

UNITED STATES DEPARTMENT OF AGRICULTURE  
FOOD SAFETY AND INSPECTION SERVICE

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LOW DOSE IRRADIATION IN BEEF

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September 18, 2008  
9:00 a.m.

L'Enfant Plaza Hotel  
480 L'Enfant Plaza, S.W.  
Washington, D.C.

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Consumer Education  
Food Safety and Inspection Service

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1 P-R-O-C-E-E-D-I-N-G-S

2 (9:08 a.m.)

3 MR. TYNAN: Can everybody hear me okay?

4 UNIDENTIFIED SPEAKERS: Yes.

5 MR. TYNAN: Excellent. Welcome to all of  
6 you for our important public meeting. I'm Robert  
7 Tynan. I'm the Deputy Assistant Administrator in  
8 the Office of Public Affairs and Consumer Education.

9 We've come here today to discuss a petition  
10 requesting recognition of the use of low-penetration  
11 and low-dose irradiation on the surface of chilled  
12 beef carcasses as a processing aid. As you can see,  
13 most of the time we have on our agenda, and  
14 hopefully everyone picked up an agenda when they  
15 came in, as you can see on the agenda, we have most  
16 of the time devoted for public comment.

17 For purposes of this meeting, however,  
18 we're planning on limiting the comment period for  
19 any individual commentor to about five minutes.  
20 That's to ensure that everybody has an opportunity  
21 to comment, and if some of you folks have comments  
22 but didn't sign up, then we'll be able to

1 accommodate everybody's interest in getting their  
2 key points out this morning. Your input is  
3 important, and we do, in fact, value that input.

4 The meeting has surely generated some  
5 significant amount of interest for us, and if you do  
6 not have a chance to make your full comments this  
7 morning, I want to remind you that there will be an  
8 opportunity to do so in writing by submitting a  
9 written comment. We'll accept them until October  
10 18th of this year, 2008, and they can be sent to our  
11 docket clerk or submitted through the federal  
12 e-rulemaking portal which is [www.regulations.gov](http://www.regulations.gov),  
13 and this is all spelled out in the Federal Register  
14 notice that announced the meeting, and we have that  
15 Federal Register notice on our website for those of  
16 you who want to refer to it in submitting your  
17 written comments.

18 On behalf of the Agency, I want to thank  
19 the folks who put this meeting together. I don't  
20 think they're in the room right now, but Keith Payne  
21 of our Congressional Public Affairs staff, Sheila  
22 Johnson and Faye Smith who you met at the

1 registration table, did an awful lot of work getting  
2 the meeting together. So I want to be sure to thank  
3 them for their efforts in getting us together today.

4 We all share the same objective here at the  
5 meeting. We certainly want to improve food safety  
6 and enhance public health. There's no, I don't  
7 think there's any disagreement about that interest  
8 on everyone's part.

9 The fact that we have such a well-attended  
10 meeting attests to the strong commitment of  
11 everybody here to make our food supply the safest it  
12 can possibly be.

13 As always, we're committed to having an  
14 open process, and we're looking forward to this  
15 morning's session to get your input, and we again  
16 thank you for your attendance at the meeting.

17 Let me begin the actual agenda by  
18 introducing Dr. Richard Raymond. He's our Under  
19 Secretary for Food Safety, and he'll be making some  
20 opening remarks. Dr. Raymond.

21 DR. RAYMOND: Thank you, Robert, and good  
22 morning, everybody, and I'll just echo Robert's

1 words in thanking you all for being here this  
2 morning on this important topic. It's your interest  
3 and your comments that help guide this Agency when  
4 it makes decisions.

5           As most of you in the room probably know,  
6 my time here is winding down. This is the last  
7 public meeting that I'll have the privilege of  
8 attending as a USDA official, I hope, because if I  
9 have to attend another one, that means something bad  
10 has happened in the next week and a half. So this  
11 is probably my last public appearance domestically.

12           Meetings like this, some of you have come  
13 to know, we do these a lot. It's always been my  
14 goal since I entered public service in 1999 to try  
15 to be as open and transparent as I could be. I  
16 learned that lesson from Secretary Johanns when he  
17 was Governor. He told me one time, he said, Doctor,  
18 when I look back at each stage of my career, when  
19 there was something I wanted to get done and I  
20 didn't get it done, it's probably because I forgot  
21 to talk to somebody and they blocked it. So he's  
22 always cautioned me to be sure you let everybody

1 have their say and be sure you listen to people and  
2 you communicate with them and you'll go further than  
3 if you just do things in a vacuum.

4           So thank you for attending this meeting so  
5 we can be open and transparent. I believe meetings  
6 like this help us with what some of you heard me say  
7 many times, the three Cs, communication, cooperation  
8 and at times collaboration. I think those are  
9 important. I don't think we can get from here to  
10 there and unless we remember to involve those three  
11 Cs and all of our various stakeholders.

12           Sometimes in public meetings like this, it  
13 can be tough getting criticized openly and publicly,  
14 and that does happen at times, and we need to get  
15 through that and understand that it does lead to a  
16 better product in the end to have these public  
17 discussions even if they sometimes involve some  
18 constructive criticism.

19           I think having these meetings does help  
20 build trust and respect amongst our diverse  
21 stakeholders, and through communication like this, I  
22 think we become educated. And I think by becoming



1 educated, it helps us to make decisions that will  
2 help us get through some complex issues at times to  
3 end up with a better product.

4           So I ask you all to keep an open mind as we  
5 go through this process, listen, become better  
6 educated and help us, guide us as we decide whether  
7 or not low-penetration, low-dose irradiation should  
8 be used on chilled carcasses as another step in  
9 trying to reduce pathogens in the products that we  
10 regulate.

11           One thing I do want to say right now is  
12 that there is no silver bullet at this time for  
13 improving the supply of the meat, particularly if  
14 you want to talk about *E. coli* O157:H7 in beef.  
15 There is no silver bullet.

16           We certainly don't view low-dose, low-  
17 penetration irradiation as a silver bullet. We view  
18 it as a possible intervention step along with the  
19 other intervention steps already in place in many  
20 slaughter processing facilities.

21           It would not be intended to replace what is  
22 currently going on. It would be intended to further

1 reduce the content of *E. coli* O157:H7 in beef  
2 period.

3           There will be other interventions that will  
4 come along also that will help further the safety of  
5 the beef supply, including vaccines, bacteriophages,  
6 food additives. None of those is going to be the  
7 silver bullet that will tell industry you don't need  
8 to worry anymore. They're just intervention steps  
9 that will help reduce the load, and that has to be  
10 our overall goal and we have to do it in a safe  
11 fashion.

12           Before I pass the mic back over to Robert,  
13 I just want to take a moment to thank you once again  
14 for coming out this morning, and I also want to  
15 express my sincere appreciation to you for working  
16 with me during my three years and two months as the  
17 Under Secretary for Food Safety at the USDA.

18           Forty years ago I walked through the doors  
19 of the University of Nebraska Medical Center as a  
20 freshman medical student, anxious to go out to rural  
21 Nebraska and practice medicine and save lives, and I  
22 went to a town of 425 people for my first clinic, my

1 first position. It was the smallest town in the  
2 United States of America that had a Joint Commission  
3 accredited hospital. And me and my partner and our  
4 staff were extremely proud of that. I like small  
5 towns. I like getting to know to people, you know,  
6 at a level you don't get to know people in a place  
7 like D.C.

8           And, when I was practicing medicine in that  
9 town of 400 people, I never thought, not in my  
10 wildest dreams, that I'd be sitting in D.C. someday  
11 as an Under Secretary for Food Safety, debating  
12 policies and communicating with all of you, trying  
13 to figure out how to make the food supply better and  
14 safer and how to have policy that would affect 300  
15 million lives. That's a long step from a hospital  
16 in a town of 425 people or going to medical school  
17 in the State of Nebraska.

18           It has been a great three years and two  
19 months, and again I just want to thank you all  
20 publicly for helping making it a great three years.  
21 There's a lot of faces here I know now that three  
22 years and two months ago I wouldn't have had a clue

1 who you were or what you did, and we certainly got  
2 to know each other I think fairly well. And I'm  
3 going to miss some of you. Hopefully I'll see some  
4 of you in the future. I'm extremely happy that our  
5 paths have crossed. And I hope that the feeling is  
6 mutual.

7           For those of you who continually work with  
8 us, you are our external conscience. You make us  
9 better by putting our feet to the fire and insisting  
10 that we never get lax or lazy, and I do thank you  
11 for that, and I do thank you for the criticism of  
12 the Agency because it does make us look at ourselves  
13 inwardly and hopefully it does make us better.

14           And for some of you who I don't recognize  
15 your face, I have not met you, if this is your first  
16 time at one of these public meetings conducted by  
17 FSIS, please continue to be involved. It is you and  
18 it's groups like this and it's meetings like this  
19 that do help us understand industry. It helps us  
20 understand consumers' concerns, and it certainly  
21 helps us understand what our employees tell us,  
22 what's not working right out there in the plants.

1           We need you all to work with us. I  
2 encourage you to continue to follow this issue and  
3 other issues that are near and dear to your heart.  
4 And at this time, I just once more thank you for  
5 friendship.

6           And, Robert, for the last time, I look  
7 forward to hearing the comments from these  
8 individuals as the Under Secretary for Food Safety.

9           MR. TYNAN:       It's been a pleasure,  
10 Dr. Raymond.

11           DR. RAYMOND: Thank you.

12           MR. TYNAN: Thank you, Dr. Raymond, very  
13 much.

14           I was remiss, I did not introduce two other  
15 folks that are at the head table with us earlier.  
16 To Dr. Raymond's left and to your right, I have  
17 Mr. Phil Derfler. He's the Assistant Administrator  
18 in the Office of Policy and Program Development, and  
19 to his left is Dr. Dan Engeljohn. He's Phil's  
20 Deputy in the Office of Policy and Program  
21 Development.

22           So they'll be with us listening to your

1 comments as well as perhaps responding to any  
2 questions that may arise during the session.

3 And last but not least, we have Dr. Scott  
4 Hurd, who is our Deputy Under Secretary for Food  
5 safety.

6 So let us then begin the substance of the  
7 agenda, and let me introduce Mr. Pat Burke.

8 Patrick is an industrial engineer and  
9 senior staff officer of the Food Safety and  
10 Inspection Service's Risk Management Division. He's  
11 been with the Agency since 1985 and has been with  
12 the Risk Management Division since its inception.

13 He is project manager on the evaluation of  
14 the AMI irradiation as a processing aid petition.  
15 And with no further adieu, I will turn it over to  
16 Mr. Burke to talk a little bit about the irradiation  
17 petition.

18 MR. BURKE: Hello. Let's go ahead and get  
19 into the meat of the project here. Okay. I'm  
20 Irish. That's okay. (Laughter.)

21 The Food Safety and Inspection Service is  
22 announcing that it has received a petition from the

1 American Meat Institute to recognize the use of low-  
2 penetration and low-dose electron beam irradiation  
3 on the surface of chilled beef carcasses as a  
4 processing aid.

5           One form of radiant energy used  
6 commercially is electron beam or e-beam. Energy  
7 from accelerated electrons is absorbed as they enter  
8 the surface of the product being irradiated. The  
9 electrons cause chemical bond breakage in the  
10 microorganisms, immediately, in addition to damaging  
11 the DNA.

12           In 1999, FSIS amended its regulations to  
13 permit the use of ionizing radiation for treating  
14 refrigerated or frozen, uncooked meat, meat  
15 byproducts, and certain other meat food products to  
16 reduce levels of foodborne pathogens and to extend  
17 shelf life. FSIS requires labeling of meat and meat  
18 food products that have been irradiated.

19           Under FDA's regulations, processing aids  
20 include substances that are added to a food for  
21 their technical or functional effect during  
22 processing but are present in the finished food at

1 insignificant levels and do not have any technical  
2 or functional effect in the food.

3 FDA's regulations provide that processing  
4 aids are not required to be included on product  
5 labels.

6 On July 8, 2005, AMI submitted a citizen's  
7 petition to FSIS requesting that the Agency  
8 officially recognize low-dose, low-penetration  
9 e-beam irradiation applied to the surface of chilled  
10 beef carcasses as a processing aid.

11 The petition requested that information  
12 concerning irradiation treatment not be required on  
13 the label of any products derived from the carcass.

14 The petition argues that low dose, and here  
15 we're talking less than or equal to 1.0 kGy surface  
16 dose, low penetration, 20 mm, e-beam irradiation is  
17 a processing aid because the electron beam has a  
18 functional effect of reducing pathogens on the  
19 carcass surfaces, but that once the energy from the  
20 electrons is absorbed, there's no further functional  
21 effect from that irradiation.

22 According to the petition, low-dose, low-



1 penetration e-beam application results in only a  
2 small portion of the carcass receiving the e-beam  
3 radiated exposure.

4           Now, the petition presents evidence that  
5 the use of e-beam irradiation is effective in  
6 reducing levels of *E. coli* O157:H7 on the carcass;  
7 second, has no effect on organoleptic properties or  
8 appearance of the carcass; third, has no lasting  
9 effect on the shelf life of the carcass or on  
10 product derived from the carcass; and, fourth,  
11 produces no significant loss of either macro- or  
12 micro-nutrients in the carcass or the product  
13 derived from the carcass.

14           In an Arthur, et al., 2004 study, *E. coli*  
15 O157:H7 was found on 76 percent of the beef cattle  
16 animal hides. In a McEvoy, et al., 2003 study,  
17 results showed that the *E. coli* O157:H7 can be  
18 transferred to beef carcasses during hide removal.  
19 There is a high probability that irradiation of beef  
20 carcasses could eliminate *E. coli* O157:H7 from the  
21 beef carcasses.

22           In support of their petition, the USDA

1 Agricultural Research Service's Meat Animal Research  
2 Center or MARC, conducted a study on the  
3 effectiveness of low-dose, low-penetration e-beam  
4 irradiation in reducing levels of *E. coli* O157:H7 on  
5 chilled beef carcass surface cuts.

6 Forty cutaneous trunci piece were  
7 inoculated with *E. coli* O157:H7, twenty with high  
8 concentrations of six logs and twenty with low  
9 concentrations of three logs.

10 One half of the high inoculated and low  
11 inoculated samples were treated with surface doses  
12 of 1 kGy with approximately 15 mm of penetration.  
13 The remaining samples were not treated.

14 Results for direct cell count plating show  
15 that the *E. coli* O157:H7 contamination of the  
16 untreated samples remain around the high inoculation  
17 levels. The *E. coli* O157:H7 was undetectable after  
18 48 hours in irradiated samples that had been  
19 inoculated at the high level and were present at  
20 approximately 0.1 log after 120 hours.

21 Results for direct cell count plating show  
22 that while the *E. coli* O157:H7 contamination of the

1 untreated samples remained around the low  
2 inoculation level, for the low inoculation level,  
3 the irradiation treated samples were undetectable  
4 for *E. coli* O157:H7 after 48 and 120 hours.

5 They also did a second test. The results  
6 of the most probable number analysis were similar to  
7 that from direct plating. There was no low  
8 inoculation sample at 48 hours, and only 1 low  
9 inoculation sample at 120 hours that had a MPN value  
10 above the limit of detection. All the high  
11 inoculation levels were above the limit of  
12 detection.

13 The MARC study also addressed effects of  
14 low-dose, low-penetration e-beam process on  
15 organoleptic properties of treated product. In  
16 MARC's assessment of organoleptic impact, the flank  
17 steak was used as the model muscle. None of the  
18 flank steak sensory attributes were affected by any  
19 of the penetration treatments.

20 Three Hunter Color measurements were made  
21 in the MARC study and all showed some treatment  
22 effects. The effects of lightness and yellowness

1 were not linear with dose, and thus the  
2 investigators did not consider them to be meaningful  
3 treatment-related differences.

4 Now, the effects of treatment on redness  
5 value were linear. However, the researchers  
6 concluded that the magnitude of the effect was  
7 slight and would likely have no impact on consumer  
8 acceptance.

9 Now, in the second study they presented, a  
10 study of the effects of low-dose, low-penetration  
11 e-beam surface exposure on the shelf life of beef  
12 was performed by Sillikier, Incorporated.

13 Six beef plates were designated air  
14 exposed, and three of these were left untrimmed.  
15 Six beef plates were designated vac-pac and were all  
16 trimmed. Six of these twelve were treated with low  
17 dose, that was 1 kGy, low penetration, 15 mm,  
18 surface e-beam irradiation. The other six were left  
19 untreated as controls.

20 After the six beef plates were irradiated,  
21 the irradiated and control plates were randomly  
22 subdivided into four equal segments. Each segment

1 was allocated into time slots of 1, 3, 6, 9 days for  
2 air exposed, and 1, 10, 20 and 30 days for the vac-  
3 pac.

4 Microbiological tests were performed at  
5 each measurement time. The total aerobic plate  
6 count, hetero- and homo-lactic acid bacteria or LAB,  
7 total coliforms and Biotype I *E. coli* and to provide  
8 a measure of oxidative rancidity, thiobarbituric  
9 acid, or TBA, was analyzed throughout shelf life.

10 For the APC, LAB and total coliform counts  
11 of air exposed beef after 9 days, the irradiated  
12 sample were within 1.5 logs of the non-irradiated  
13 samples. For the APC and LAB counts for vacuum  
14 packed beef after 30 days, the irradiated samples  
15 were within 1 log of the non-irradiated samples  
16 while the total coliform counts were equivalent.

17 The vacuum packed beef TBA values ranged  
18 from limited, tolerably oxidized to somewhat  
19 oxidized over 30 days of shelf life. The air  
20 exposed beef TBA values ranged from limited,  
21 tolerably oxidized at two days of shelf life to  
22 oxidized at nine days of shelf life. All samples

1 were below the range of rancidity.

2           Based on the results of this study, the  
3 authors believe that the initial antimicrobial  
4 effects of the treatment appear to have been  
5 minimal, and over the course of the shelf life, the  
6 APC and LAB counts on the surface e-beam treated  
7 product increased to the point that quantitative  
8 levels nearly approximated that non-treated controls  
9 at the end of the storage period.

10           In addition, one of the principal  
11 measurements of shelf life and product spoilage,  
12 rancidity, as measured by the TBA, indicated that  
13 the treated samples would turn rancid slightly  
14 before the non-treated controls. These data appear  
15 to demonstrate that the e-beam surface treatment of  
16 beef plates does not have a lasting effect on the  
17 product shelf life.

18           A third study that was given was a  
19 literature review and analysis on the effects of  
20 low-dose, low-penetration e-beam irradiation on the  
21 levels of micro- and macro-nutrients that was  
22 conducted by Donald Thayer, a retired USDA ARS

1 researcher.

2           Concerning the macro-nutrients, Dr. Thayer  
3 found that there was no significant differences in  
4 the peroxide and iodine values of lipids following  
5 irradiation up to 10 kGy of the *m. Longissimus dorsi*  
6 of beef. Also, there was no significant changes  
7 following irradiation in the malonaldehyde  
8 concentration in beef *m. Longissimus dorsi*.

9           Now, concerning the micro-nutrients,  
10 Dr. Thayer found that water soluble vitamins in beef  
11 were unaltered. One water soluble and one fat  
12 soluble vitamin would likely be decreased, and that  
13 was thiamin and tocopherol.

14           For these two vitamins, Dr. Thayer  
15 estimated, worse case, that the maximum net decrease  
16 in the U.S. diet would only be 0.021 percent for  
17 thiamin and 0.014 percent for tocopherol.  
18 Dr. Thayer concluded that beef carcass surface low-  
19 dose, that's 1.0 kGy, electron beam irradiation  
20 would not produce a significant loss of either  
21 micro- or macro-nutrients from the U.S. diet.

22           FSIS has consulted with FDA about this

1 issue, and FDA has advised FSIS that, tentatively,  
2 it would not object to treating low-dose, low-  
3 penetration e-beam irradiation on the surface of  
4 chilled beef carcasses as a processing aid. FDA is  
5 still considering this issue and will likely consult  
6 further with FSIS.

7 FSIS has tentatively concluded that there  
8 is merit to consider low-dose, and that is less than  
9 or equal to 1.0 kGy, and low-penetration, 20 mm,  
10 e-beam irradiation on the surface of chilled beef  
11 carcasses as a processing aid.

12 Data submitted showed that the low-dose,  
13 low penetration surface e-beam irradiation will  
14 produce a significant surface reduction of *E. coli*  
15 O157:H7 on chilled beef carcasses. The e-beam  
16 treatment does not appear to have a lasting  
17 antimicrobial effect that would extend the shelf  
18 life of the products, and it appears that there is  
19 no significant difference in color, odor, or taste  
20 between treated and untreated products.

21 Relevant studies appear to support the  
22 assertion that the low-dose, low-penetration e-beam



1 irradiation treatment would not produce any  
2 significant changes in the macro- and micro-nutrient  
3 content of the treated products. Further, the  
4 entire beef carcass is not irradiated, only the  
5 surface of the carcass.

6 Now, the issues to be discussed. Is there  
7 any additional evidence to support or contradict the  
8 evidence presented in the AMI petition on the  
9 specific application of low penetration of 20 mm and  
10 low surface dose of less than or equal to 1.0 kGy  
11 electron beam irradiation on the surfaces of chilled  
12 beef carcasses as a processing aid?

13 Second issue, is there any evidence  
14 indicating that FSIS should consider the cumulative  
15 effects of the absorbed dose delivered in accordance  
16 with the AMI petition and any subsequent absorbed  
17 dose such as a result of further irradiation of  
18 ground beef?

19 Third, should FSIS consider requiring  
20 irradiation process controls if irradiation is  
21 considered a processing aid? If so, what would they  
22 be and what impact would they have on the low-dose

1 irradiation of chilled carcasses?

2           And fourth, are there factors that FSIS has  
3 not considered? And, if so, what are they and what  
4 impact would they have?

5           And that concludes the presentation.

6           MR. TYNAN: Thank you, Patrick. What I  
7 thought we might do before we begin the formal  
8 comments regarding the presentation that Patrick  
9 made, we'd like to entertain maybe some questions  
10 from the audience, if there's some clarification on  
11 any of the issues that Mr. Burke brought up.

12           We'll see if we can't get the microphone to  
13 you. This gentleman is going to take care of that  
14 for us. Thank you.

15           Rather than come to the mic for this  
16 purpose, why don't we just -- we'll get the mic  
17 passed around. Can you do that for us or, Roger,  
18 can I impose on you. Would you consider that?

19           DR. ROBERTS: Tanya Roberts, retired from  
20 the ERS. I had a question about the *E. coli* Biotype  
21 1 you said that was used in the test. Does that  
22 include O157:O11 or other STECs?

1           MR. BURKE: For the one that Dr. Thayer was  
2 looking at or --

3           DR. ROBERTS: Well, you mentioned it  
4 earlier in your slides. Let me see which page it  
5 was, that that was what you were looking -- the  
6 process does not have an effect on shelf life, and  
7 it included the reduction. You were looking at  
8 Biotype 1 *E. coli*. Yeah, I guess that was  
9 Dr. Thayer.

10           MR. BURKE: Dr. Thayer.

11           DR. ROBERTS: Slide number 26.

12           MR. BURKE: Slide 26. Oh, okay. Is that  
13 the one that mentions the Biotype 1 *E. coli*?

14           DR. ROBERTS: Yeah.

15           MR. BURKE: That's all he tested, the  
16 Biotype 1.

17           DR. ROBERTS: What kind of *E. coli* is it?

18           MR. BURKE: Well, actually in the study, as  
19 you see the study, he didn't go into detail on that  
20 exactly what he was talking about.

21           DR. ROBERTS: Does it include STECs?

22           MR. BURKE: Generic.

1 DR. ROBERTS: Generic?

2 MR. BURKE: Yeah.

3 DR. ROBERTS: So it would include them.

4 MR. TYNAN: Okay. Just as a reminder and  
5 sort of the process we'll use, if you could please  
6 identify yourself and your affiliation for purposes  
7 of the record. Yes, sir.

8 MR. GOODSIR: Graeme Goodsir is my name  
9 from Harrisburg area, Pennsylvania. I'm a meat  
10 industry consultant, and also in part of my work, I  
11 represent the British meat industry here in North  
12 America. I've had a full career in the industry.

13 Just a because question. Why did it take  
14 three years for the petition to come up? Did it  
15 take that long for research, or were there other  
16 reasons?

17 MR. BURKE: We received the petition in  
18 2005. Yeah, we were basically making sure we  
19 understood what was being asked, make sure we went  
20 back and looked at the studies and, you know, in the  
21 sense that we were making sure we did a thorough job  
22 on this thing before we brought it up, the petition,

1 for a public meeting.

2 MR. TYNAN: Do we have other questions,  
3 clarifying questions before we get into the actual  
4 comments?

5 (No response.)

6 MR. TYNAN: Okay. There being none, I  
7 guess we'll invite the commentators, and I have a list  
8 here. So I'll go through those in the order of the  
9 way people signed up, and then if there are still  
10 some comments remaining, we'll, we'll loop back and  
11 have some of the people that may have registered.

12 Again, I want to remind you that we're  
13 going to limit it to about five minutes for the  
14 comments so that you can get the major points out on  
15 the table. If I cut you off at the end of five  
16 minutes, it's not because I don't think your  
17 comments are important, but I want to be sure that  
18 everybody gets their opportunity to have their say  
19 on the record for today.

20 And we'll ensure, as I pointed out earlier,  
21 that you will have an opportunity to submit written  
22 comments to our docket office, and all of the

1 specifics are in our Federal Register notice.

2           If time remains at the end, as I say, we  
3 can always loop back and do another round of  
4 comments.

5           So again, I would invite you to come up to  
6 the microphone, as I call your name, and again  
7 identify yourself and your affiliation for purposes  
8 of the record.

9           And the first person I have is Patty  
10 Lovera. And I want to apologize in advance if I do  
11 violence to someone's name.

12           MS. LOVERA: Good morning. My name is  
13 Patty Lovera, and I work with the consumer group  
14 called Food and Water Watch based here in D.C.

15           I actually just thought of a question on my  
16 way up that I should have asked a minute ago, but  
17 one was just a little clarification on FDA and their  
18 latest thinking on this. Are they here?

19           MR. TYNAN: Please go ahead and ask.

20           MS. LOVERA: Yes. I guess the question is  
21 we had through Freedom of Information Act received a  
22 letter that FSIS wrote to FDA last spring, I think,

1 asking for their concurrence about changing this to  
2 a processing aid, and I was curious if that had  
3 happened yet.

4 MR. DERFLER: This is Phil Derfler. I  
5 think Mr. Burke's slide addressed the question.  
6 There really hasn't been any further advancement or  
7 discussions with them.

8 MS. LOVERA: So we're still waiting?

9 MR. DERFLER: Yes.

10 MS. LOVERA: And will that have to formally  
11 happen before you could go ahead and approve this  
12 petition?

13 MR. DERFLER: I don't think I know the  
14 answer to that question. I think we need to look at  
15 all the facts that we get, and then we'll make a  
16 decision on the basis of the evidence that we have  
17 before us.

18 MS. LOVERA: Okay. So now that that's out  
19 of the way.

20 MR. TYNAN: You'll transition to your  
21 comments.

22 MS. LOVERA: Yeah.

1 MR. TYNAN: Okay.

2 MS. LOVERA: So Food and Water Watch  
3 believes that changing food irradiation to a  
4 processing aid rather than its current status as an  
5 additive is a major, major change that we shouldn't  
6 take lightly, and we also think that it's an  
7 inappropriate change due to the historic definition  
8 of a processing aid, as something that was a  
9 technical effect while you're using it but is not  
10 present in significant levels after you're done or  
11 doesn't change the food in some way after you're  
12 done.

13 You know, we believe that there's a large  
14 body of evidence that shows us that irradiation,  
15 even at very low doses, doesn't meet that criteria  
16 because it does change the food.

17 You know, we talked about even if there are  
18 minimal vitamin changes, vitamin levels change, lots  
19 of other chemical characteristics of the food  
20 change, and we know that we see the byproducts like  
21 ACBs and other byproducts even at low dose  
22 treatment.



1           So we think that that's significant, that  
2 that is material, and that consumers absolutely  
3 deserve to know that. And moving this to the  
4 category of processing aid where it would not have  
5 to be labeled is a huge mistake, and we think that  
6 it does a tremendous disservice to consumers.

7           You know, there are other processes that  
8 the FDA requires to be labeled because they think  
9 they're material, things like using dehydrated  
10 potatoes to make a potato chip. If that's material,  
11 using something as controversial as irradiation as a  
12 process absolutely is material and that should be  
13 disclosed.

14           We also, just in general, we're not fans of  
15 irradiation. I don't think this surprises anybody  
16 in this room, that we're not happy about this, but  
17 we think there's a lot more to be done to show that  
18 this will work at this point in the line.

19           There's tremendous worker safety issues  
20 that have to be dealt with and just appropriateness  
21 issues of whether this is a feasible way to deal  
22 with *E. coli*, which brings me to kind of the context

1 of this.

2           You know, last spring, we were encouraged  
3 when FSIS had a two-day meeting on how are we going  
4 to tackle *E. coli*? What are we going to do? And  
5 the proposals at that meeting talked about, you  
6 know, making it an adulterant for primal cuts and  
7 boxed beef, looking for it further upstream. These  
8 were encouraging prospects that we were happy to see  
9 and we supported, and by June, it seems like they  
10 were off the table. And that is moving in the wrong  
11 direction, and now we get something like this  
12 instead, and this is a poor substitute for some of  
13 those other changes that we think are necessary to  
14 deal with *E. coli*.

15           One of the questions that came up about  
16 what we need to discuss, we think there's absolutely  
17 a need to address the potential of, you know, if the  
18 stuff gets further irradiated in a later process as  
19 a finished product with ground beef. Until that is  
20 dealt with, we don't think that there's any way this  
21 should move forward.

22           And then to go back to that letter that we

1 got through the Freedom of Information Act, the  
2 letter was from FSIS to FDA, but at the very end, it  
3 had a line where it said that FSIS was going to  
4 confer with AMS about their possible concerns about  
5 how this interacted with organic, and we think that  
6 this shouldn't interact with organic.

7           There is no role, no place, at any dose, at  
8 any purpose, at any point in the line, for  
9 irradiation in an organic meat plant. It is a  
10 prohibited method under AMS' organic standards, and  
11 it needs to stay that way whether you call it an  
12 additive or whether you call it a processing aid.

13           Organic consumers have universally rejected  
14 irradiation. It's one of the issues that cause  
15 hundreds of thousands of them to comment on the  
16 organic standards in the late nineties, and running  
17 irradiation anywhere near organic meat is going to  
18 cause a major, major, major ruckus, as it should.

19           And so finally I'll just say that, you  
20 know, at this public meeting on *E. coli* last spring,  
21 Dr. Raymond, you talked about needing to make bolder  
22 changes to deal with *E. coli* and, you know, six

1 months later, and what we're seeing instead of these  
2 bolder changes is a bold step in the wrong direction  
3 towards irradiation.

4 And so we think that FSIS should deny this  
5 petition. Thank you.

6 MR. TYNAN: Thank you.

7 DR. RAYMOND: I'm going to just respond  
8 real quickly. Patty, nothing is off the table when  
9 it comes to *E. coli*. To make bold decisions, you  
10 can't make them overnight in a vacuum. My opening  
11 comments allude to the open transparent meetings.  
12 This is a bold initiative. That's why we're having  
13 an open meeting.

14 Some of us in the room just spent two days  
15 in Chicago, got home last night, discussing *E. coli*  
16 control in beef. Nothing has been taken off the  
17 table.

18 MR. DERFLER: Can I say one thing?

19 MR. TYNAN: Yes.

20 MR. DERFLER: This is Phil Derfler, and in  
21 the beginning of your statement, you talked about  
22 the fact that there's evidence that there are

1 byproducts that low-dose treatment, and it's really  
2 important that you include that evidence with your  
3 comments so that we have it in the record.

4 MR. TYNAN: Okay. Our next commentor is  
5 Jeff Barach. Mr. Barach, if you would come up to  
6 the microphone, identify yourself and your  
7 affiliation.

8 MR. BARACH: Yes. Thanks very much,  
9 Mr. Tynan, for the opportunity to comment here. I'm  
10 Jeffrey Barach, Vice President of Science Policy at  
11 Grocery Manufacturers Association, the GMA.

12 GMA represents the world's leading beverage  
13 and consumer products companies. The Association  
14 promotes sound public policy and helps to protect  
15 the science and security of the food supply through  
16 scientific excellence.

17 Now, let me begin my comments with a  
18 statement in a report from former Secretary of  
19 Commerce, John T. Connor. The report states, "The  
20 preservation of food by ionizing irradiation is fast  
21 approaching commercialization. Within the next  
22 decade, food irradiation will evolve as a major

1 technique for food preservation and will be utilized  
2 by many processors with substantial benefits to  
3 producers, distributors and consumers."

4           Now, this quote is from a 1965 report.  
5 This was published more than 40 years ago. Now, how  
6 could this be so wrong? Why is a technology that  
7 has proven safe, proven to destroy harmful  
8 pathogens, proven to have the capability to save  
9 human lives and prevent suffering basically been  
10 left sitting on the shelf?

11           GMA believes that food irradiation is a  
12 safe and effective process for pathogen reduction in  
13 foods.

14           We recently completed one phase of our  
15 continuing work with the Food and Drug  
16 Administration that resulted in the approval of the  
17 use of irradiation on fresh lettuce and spinach, and  
18 we are pursuing other uses for pathogen reduction  
19 such as the treatment for ready-to-eat meat and  
20 poultry products.

21           GMA supports the application of low-dose  
22 irradiation on beef carcasses as a potentially

1 useful process for pathogen reduction. Just as with  
2 pathogens in fresh produce, low-dose carcass  
3 irradiation is a promising alternative for helping  
4 to provide a safer food supply.

5 The quote I spoke of in the beginning of my  
6 comments is similar to quotes throughout the history  
7 of food irradiation.

8 GMA believes there are two main reasons  
9 food irradiation has not joined mainstream  
10 processing and production in the United States.

11 First, the requirement for labeling of  
12 irradiated foods which is a unique labeling mandate  
13 that numerous consumer studies have shown is  
14 generally perceived by the consumer as a warning  
15 about the safety of the food.

16 And, secondly, misinformation about the  
17 safety of the process and the lack of education and  
18 understanding on the part of the consumer about the  
19 technology and its benefits.

20 To assist industry and public in addressing  
21 the labeling barrier to commercialization, FDA, back  
22 in April of 2007, published a proposed rule

1 concerning labeling alternatives for irradiation.  
2 GMA and others have expressed strong support for the  
3 approaches described in the proposal and desire to  
4 see this proposal finalized.

5           The concept of considering low-dose  
6 irradiation as a processing aid presented in the  
7 petition will also help overcome the labeling  
8 challenges that we have. We fully support the  
9 approach of carcass irradiation categorized as a  
10 processing aid.

11           We note, as does AMI, that carcasses  
12 treated with low-dose irradiation will be subject to  
13 further processing by a variety of techniques prior  
14 to packaging and sale to the consumers. And  
15 therefore, it is appropriate, to view carcass  
16 irradiation as a processing aid.

17           Because processing aids do not require  
18 labeling, final products such as hamburger, primal  
19 cuts, et cetera, offered to the consumer should not  
20 require labeling because of the carcass irradiation  
21 treatment.

22           We bring to your attention, and this



1 addresses one of the questions at the end of  
2 Dr. Burke's presentation, we bring to your attention  
3 that the labeling or marking of intact or whole  
4 irradiated carcasses as to its irradiation treatment  
5 and dose level during manufacturing, would actually  
6 be beneficial. This labeling of the irradiated  
7 carcass should be conveyed on documentation  
8 accompanying the carcass, destined for further  
9 processing, so as indicating a treatment has been  
10 given, and if further irradiation treatments are  
11 applied, such as the irradiation of ground beef made  
12 from that carcass, the maximum dose of irradiation  
13 which is approved is not exceeded.

14 In conclusion, GMA strongly supports  
15 irradiation technology for pathogen reduction in a  
16 variety of foods where beneficial and applicable.

17 We support the application of low-dose  
18 surface treatment of beef carcasses as described in  
19 the AMI petition.

20 We support the concept of using low-dose  
21 irradiation as a processing aid, which when used in  
22 this manner would not require irradiation labeling

1 on the finished product.

2 The food safety outcome of this proposed  
3 application of food irradiation technology will be  
4 of benefit to the health and well-being of  
5 consumers. Thank you very much.

6 MR. TYNAN: Okay. Thank you, sir. Next on  
7 my list is Ms. Nancy Donley. Ms. Donley, come up  
8 and identify yourself and your affiliation.

9 MS. DONLEY: I'm Nancy Donley with STOP,  
10 Safe Tables Our Priority.

11 Dr. Raymond, on behalf of our organization,  
12 I want to wish you best wishes for your future, and  
13 we hope that it's happy, healthy and safe.

14 DR. RAYMOND: Don't take that from her five  
15 minutes, Robert. She can go on if she wants.

16 MR. TYNAN: We'll give her another 30  
17 seconds. (Laughter.)

18 MS. DONLEY: I'd just like to start off by  
19 saying that STOP has historically embraced the idea  
20 of validated technologies that will better enhance  
21 the safety of our food supply. We have long been  
22 proponents of continuous innovation and improvement

1 in development of such technologies.

2 We particularly embrace that because as  
3 representatives of victims of foodborne illness and  
4 myself, the mother of a six-year-old little boy who  
5 died from O157, we really, really, really try to get  
6 behind and support, not individual technologies, but  
7 again the idea of improved technologies as a whole.

8 That said, I want to comment on this  
9 petition, and just make a couple of points. And I'm  
10 going to limit my comments strictly to the food  
11 safety application of these technologies, not any of  
12 the organoleptic or other types of shelf life, those  
13 types of issues.

14 The petition was done in 2005 as was  
15 brought up earlier, and the question was why was  
16 nothing done about it in that period of time. I  
17 would like to postulate that perhaps this was not  
18 done and FSIS did not approve it because maybe this  
19 was the right thing to do because the study to our  
20 viewpoint simply does not make the case and that we  
21 would submit that the study is flawed and certainly  
22 could not be construed by FSIS during these years as

1 a validated processing aid.

2           And while I'm not a scientist, I'd just  
3 like to bring up a couple of points I noticed in  
4 this particular study.

5           Number one is that the whole support for  
6 this petition was a single study, just a single  
7 study done by and initiated through the beef  
8 industry's Check Off dollars. And the study was not  
9 done on actual carcasses, and I understand here, we  
10 have a bit of a catch-22 because the industry's  
11 saying we don't want to build the technology unless  
12 we know that it's going to be validated. So we have  
13 a real problem with that.

14           Number two is that the study that was used,  
15 they inoculated with non-toxigenic O157, which the  
16 authors themselves said that they have no knowledge  
17 of any studies comparing the irradiation sensitivity  
18 of such strains to toxigenic O157. So we have a  
19 problem with that.

20           Another thing is that the petition calls  
21 for irradiation at the level of 20 mm penetration,  
22 but the study was done at 15. So again, we just

1 don't know. There's an inconsistency there.

2           And then lastly, I just want to point out  
3 that the remaining levels of pathogens present based  
4 on the initial inoculation levels, that the case is  
5 being made of the remaining levels of pathogens are  
6 being based on the inoculation levels and not what  
7 the levels that actually are formed after  
8 attachment.

9           So as a for instance, the petition points  
10 out that they inoculated with 3.0 which actually  
11 after attachment wound up actually at a level of  
12 3.9. It goes on to say that after 48 hours and 120  
13 hours, respectively, that these levels came down to,  
14 after irradiation, down to a non-detectable level  
15 which actually if you look at where the actual level  
16 of the pathogenic level was, you come down to, in  
17 the case of the low inoculation, would come down to  
18 a 1.0 and 1.3 after 48 hours and 120 hours,  
19 respectively.

20           The same thing with the high inoculation  
21 level. It was inoculated at 6.6. It actually wound  
22 up growing to 7.6. How can you have a 6.6 log

1 reduction which is what they're claiming on a 6.0  
2 log inoculation. You have to take a look at 7.6,  
3 not 6.0, which means that after 48 hours, you were  
4 left with 1.0 and after 120 hours at 1.9.

5 So I just want to point out these things  
6 that to me as a non-scientist, it's not making a  
7 whole lot of sense.

8 That said, I just want to end this with, we  
9 would be receptive and listen to again because we  
10 want innovations that are going to make people  
11 safer, stop the illnesses and stop the death. If  
12 industry wants to go ahead and put forward a real  
13 true study on this, we would certainly look at it.  
14 We do have open minds on this issue, but again, we  
15 just can't support this in the manner that it is.  
16 Thank you.

17 MR. TYNAN: Thank you, Ms. Donley. The  
18 next commentor I have on the list, and again I will  
19 apologize in advance if I do violence to the name,  
20 is Urvashi Rangan.

21 DR. RAYMOND: You must have.

22 MR. TYNAN: I must have.

1 DR. RANGAN: I think that gets a prize  
2 actually. It beats any telemarketer that's called  
3 me. (Laughter.)

4 Thank you. My name is Dr. Urvashi Rangan.  
5 I am a senior scientist and policy analyst with  
6 Consumers Union. We're the non-profit publisher of  
7 Consumers Reports Magazine. I'm a toxicologist by  
8 training. I've worked there for over a decade,  
9 including working on our 1993 in-depth project and  
10 report on irradiated foods.

11 Thank you for the opportunity to comment  
12 here today on this petition. Consumers Union has a  
13 lot of concerns about this petition, and I'm just  
14 going to go through them.

15 First of all, we agree with Patty Lovera  
16 that this should not be a replacement for good  
17 hygiene on the farm. We really want to see the  
18 hygiene standards move upstream because that's where  
19 the origin of the problem is. And we think that  
20 techniques like this can function as band-aid jobs  
21 for a messy system and can actually allow for  
22 potentially dirtier and dirtier product to enter in.

1           In 1993, we looked at chicken tenders  
2 before and after they were irradiated at the plant,  
3 and we found that the ones that were awaiting  
4 irradiation are actually much filthier with regard  
5 to *Listeria* contamination than those that were never  
6 irradiated that we tested at retail.

7           It's a snapshot in time observation, but  
8 it's an important one to indicate that we don't want  
9 the process to get any dirtier.

10           We also think that this application which  
11 is used in the middle of processing does not take  
12 into account the rest of processing which can often  
13 lead to recontamination of a product during the  
14 processing of it. And so it can be somewhat  
15 misleading to say that the product has been treated  
16 with this, especially for consumers who want to buy  
17 irradiated product because processing in and of  
18 itself can lead to recontamination.

19           We also think that this does not qualify as  
20 a processing aid because there are unique  
21 characteristics that are altered in the food product  
22 that aren't taken into account. First of all,



1 Dr. Thayer never measured these unique radiolytic  
2 byproducts in fat, the 2-ACBs. It's a big concern  
3 for consumers. There are questions about the safety  
4 of it that are still being studied and frankly, that  
5 is a unique change that happens in the food and it  
6 does seem to happen, some studies demonstrate as low  
7 as .1 kGy doses. So that really needs to be taken  
8 under consideration here and those measurements need  
9 to be made.

10 We also think that consumers have a right  
11 to know what's going on with the products that they  
12 buy. If it's irradiated, whether it's irradiated at  
13 this stage, whether it's irradiated at the end  
14 stage, it's an important technique that consumers  
15 want to know about, and without labeling, consumers  
16 who want to avoid irradiated products will be  
17 misled, but without specific labeling -- that is to  
18 say that this can't just be labeled as irradiated.  
19 It needs to be labeled as irradiated at early  
20 processing step.

21 Even consumers who want to choose  
22 irradiated products will be misled because if they

1 don't understand where in the processing step this  
2 occurred, they may be misled to think that this is  
3 indeed a safer product as one that had been  
4 irradiated at the very end, and that's important for  
5 consumers to know, whether they choose to buy it or  
6 whether they're choosing to avoid it.

7           So thank you. Those are our comments.

8           MR. TYNAN: Thank you very much, and I  
9 apologize for the messing up of the name. But I  
10 sincerely appreciate the suggestion for post-  
11 retirement career as a telemarketer. (Laughter.)

12           The next commentor we have is Joseph -- oh,  
13 I'm sorry.

14           DR. HURD: Can I just ask her a question?

15           MR. TYNAN: Yes, sure.

16           DR. HURD: Can I ask you a question?

17           DR. RAYMOND: Dr. Rangan.

18           MR. TYNAN: Dr. Rangan.

19           DR. RANGAN: Yes.

20           DR. HURD: Can I just ask you a question?

21           DR. RANGAN: Yeah.

22           DR. HURD: The argument about the product

1 getting recontaminated, if one of the main purposes  
2 of this is O157, and this is more to think about in  
3 your comments and stuff like that --

4 DR. RANGAN: Uh-huh.

5 DR. HURD: -- and where it's going to get  
6 contaminated when they pull the hide or someplace  
7 like that, where would the recontamination with  
8 respect to O157 occur?

9 DR. RANGAN: In this case, first of all, as  
10 the woman previously mentioned, we don't get to 0  
11 O157 with this technique. So even 1 or 2 CFUs by  
12 the way have public health implications, and those  
13 bacteria are alive. So as you grind the meat, as  
14 you aerate it, as you make the ground beef, the  
15 potential to recontaminate or have that bacteria  
16 grow and spread is still there all the way until the  
17 consumer buys it and cooks that product. So the  
18 potential for bacterial contamination or  
19 recontamination at that stage is still there.

20 DR. HURD: Okay. Thank you.

21 MR. TYNAN: The next commentor I have on my  
22 list is Joseph Mendelson. Did I do better on that

1 one?

2 MR. MENDELSON: You'd be amazed at what  
3 people do to it, though.

4 My name is Joseph Mendelson. I'm with the  
5 Center for Food Safety. We're a non-profit  
6 organization that represent consumers across the  
7 country.

8 I'd like to first thank Dr. Raymond for his  
9 public service over the years.

10 And, at the risk of sounding redundant with  
11 my colleagues, I'd like to say that our organization  
12 does not approve of this change, and it stems from  
13 both some of the technical and legal aspects.

14 Certainly there's a long history over,  
15 frankly 30 years, of both FDA and in some instances,  
16 FSIS, saying that irradiation is not a processing  
17 aid.

18 And as was mentioned before, this is a  
19 petition that has one study and another study on  
20 nutrients, but that's not enough to overturn 30  
21 years of what is essentially a legal precedent at  
22 the Agency, and I think there needs to be much more

1 to legally justify that.

2           A couple quick comments, again, not to be,  
3 well, to be redundant but the study certainly does  
4 not look at ACBs. As previously mentioned, there  
5 are a number of studies that suggest that ACBs and  
6 2-DCB in beef occurs at low levels, below 1.0 kGy.  
7 Certainly studies have shown and used 2-DCB to be a  
8 detection method as to whether a product is  
9 irradiated, and those studies have shown it to be  
10 below 1.0 kGy.

11           Similarly, there's also at least one study  
12 that suggests that irradiation of beef at this level  
13 can raise trans fat levels. I think both the  
14 presence of ACBs and a potential to raise trans fat  
15 levels are technical and functional changes in the  
16 product and therefore would not meet the definition  
17 of a processing aid.

18           Further, it's been mentioned that, this one  
19 slide suggested that there's not organoleptic  
20 changes. Certainly we have seen a number of studies  
21 show that there are organoleptic changes and, in  
22 fact, our organization, Food and Water Watch, issued

1 a report called "Gross Failure" that goes through a  
2 number of those studies.

3           So what you have is a combination of  
4 presence of materials that have never before been in  
5 beef which is a functional effect on the end  
6 product, possible increase in trans fats from this  
7 technology and a history of organoleptic changes.  
8 All of those do not meet the definition of a  
9 processing aid, and certainly are material changes  
10 for the purposes of mandating consumer labeling.

11           I would add to Ms. Lovera's comments about  
12 organic. Certainly if you look at National Organic  
13 Program's regulations, and specifically 7 C.F.R.  
14 205.105, 205.270 and 205.301, irradiation, whether  
15 it's a processing aid or however you characterize  
16 it, cannot be used in any type of handling of  
17 organic food and is prohibited.

18           One last thing, I know certainly that FSIS  
19 under regulation is exempt from NEPA. That can  
20 change. We know that if the Agency head finds that  
21 there is significant environmental impact from a  
22 federal action such as this, that NEPA compliance

1 would be required, and certainly we think there is  
2 an environmental impact on this.

3           As alluded to earlier, there's a moral  
4 hazard involved in this technology, and that is  
5 because it is allowed at the end process. It  
6 insulates people from upstream changes, and those  
7 can be issues that certainly affect the environment  
8 from husbandry practices, manure management, ground  
9 water contamination, something such as the  
10 increasing feed of distiller grains to cattle which  
11 we know, in several studies, say that O157 increase  
12 rates happen because of that.

13           So we would ask that the Agency also look  
14 at the environmental impacts of this and sidestep  
15 what is its exclusion from the NEPA process.

16           So to sum up, we oppose this project, this  
17 effort and certainly will be submitting further  
18 written comments. Thank you.

19           MR. TYNAN: Thank you. Dr. Raymond, did  
20 you want to --

21           DR. RAYMOND: Yeah. As Mr. Burke said in  
22 his comments, one of the reasons we're having this

1 meeting is to make sure that we have all the  
2 information available to us.

3           And so, Mr. Mendelson, I would ask you  
4 because one other testifier -- no, you don't need to  
5 get back up, but one other testifier already said  
6 there's only been one study. So we shouldn't make  
7 this move with one study. You said there's been  
8 multiple studies that showed organoleptic changes.  
9 So if those studies are pertinent to this  
10 discussion, if they are low-dose, low-penetration  
11 irradiation, make sure you get that in your  
12 submitted testimony for clarification because right  
13 now we have two conflicting comments.

14           MR. TYNAN: The next commentor we have is  
15 Ms. Pat Buck. Ms. Buck, if you would come to the  
16 microphone and identify yourself and your  
17 affiliation.

18           MS. BUCK: Good morning. I'm Patricia  
19 Buck, and I'm the Executive Director for the Center  
20 for Foodborne Illness, Research and Prevention.  
21 And, like the other commentors, I want to thank you  
22 for this opportunity to express our opinion on what



1 you are talking about which is low-dose, low-  
2 penetration irradiation.

3 We did our share of research looking at  
4 low-dose, low-penetration irradiation, and we have  
5 come to recognize, like Nancy Donley, that this is a  
6 technology that can, in fact, do something to reduce  
7 the level of deadly pathogen on products.

8 And I am, you know, you think about it, you  
9 say, well, that is really worthwhile, but like any  
10 other thing that's really good, you have to look how  
11 you're going to implement it.

12 All right. So the technology may in my  
13 mind and in CFI's mind be safe, but it then comes  
14 down, it always comes down to how is FSIS and how is  
15 industry going to put this in place? Because if  
16 they put it in place without good management  
17 practices, if they put it in place without good  
18 husbandry and farming practices, if the Agency  
19 thinks they should put this in place without  
20 informing the consumers, I don't care who calls it  
21 what, I don't care if it's a processing aid that you  
22 want to monkey around, is that the name, or if it's

1 an additive, I have serious problems with the FDA  
2 and their announcement that this is a processing  
3 aid, low-dose, low-penetration irradiation, and so  
4 therefore it doesn't have to be labeled.

5 Consumers have the right to make a  
6 selection as to whether they want to buy an  
7 irradiated product or a non-irradiated product, and  
8 they also have the right to say, I want to buy a  
9 product that has been treated with low dose, low  
10 penetration that might reduce the load on the  
11 product of pathogenic contamination, in particular  
12 for the *E. coli* O157 and the other deadly STECs.

13 What is it that we feel when we say that?  
14 As I said, the good manufacturing practices, the  
15 sanitation practices. The technology that puts this  
16 in place is going to have to be regulated, and it  
17 cannot be regulated by the industry, and it should  
18 not be regulated by just anybody. USDA has to have  
19 a very strong policy in place of how are you going  
20 to oversee low-dose, low-penetration irradiation.  
21 How are you going to do it?

22 These companies are going to spend 1 to 5

1 million dollars to put this technology in place.  
2 What is the proposal? Nobody's talked about that,  
3 and that is a problem.

4 We've talked about the problems that there  
5 aren't enough studies. There are a plethora of  
6 studies out there, but FSIS is only being presented  
7 with one study. So, yes, before you move forward,  
8 you have to have more information and some of these  
9 other studies should come to you.

10 We're also concerned that the petition  
11 talks about a level of penetration of 15 and now  
12 you're talking about 20. I am not a scientist. I  
13 don't know if that makes a big difference, but I  
14 certainly would want some assurance why there is  
15 that discrepancy. Okay.

16 USDA needs to specify the jurisdiction of  
17 who is going to be controlling the oversight of the  
18 process. USDA must clearly define what low dose,  
19 low penetration is so that there's no confusion.  
20 They must clearly define what a carcass is. I don't  
21 want later on to find out that this is what we meant  
22 a long time ago.

1           Again, we intrinsically believe that  
2 consumers have the right to know. I see labeling as  
3 your biggest problem. I see defining oversight over  
4 the technology as another major consideration, and I  
5 think that there must be some effort made to have  
6 some kind of outside study that's going to evaluate  
7 if the process is really doing what they said it was  
8 going to, and I think that's it. Thank you.

9           MR. TYNAN: Thank you, Ms. Buck. Next  
10 commentor is Ms. Tanya Roberts.

11           DR. ROBERTS: Hello. I'm Tanya Roberts  
12 retired from the Economic Research Service in USDA.  
13 And while I was at ERS, I had the pleasure of  
14 working on *E. coli* O157:H7 farm to fork risk  
15 assessment. And I worked on the slaughterhouse  
16 module, and in the slaughterhouse we noted, because  
17 this may be of interest to you since you're talking  
18 about irradiating carcasses, that 90 percent of the  
19 surface contamination on a cow goes into the combo  
20 bin that goes into hamburger or processed meats.

21           In comparison for a steer or heifer, since  
22 most of it is turned into steaks and other products

1 that go directly to the consumer, only 75 percent of  
2 the surface contamination that we found for *E. coli*  
3 O157 went into the combo bins that are turned into  
4 hamburger or processed meat.

5           So the point here I'm trying to make is  
6 that irradiation of a carcass where the  
7 contamination of O157 is occurring seems to be a  
8 very appropriate place.

9           What my questions are, have to do with how  
10 you're going to test to make sure that the controls  
11 for irradiation are actually having the impact that  
12 they are. What kind of tests are going to be  
13 required for *E. coli* O157:H7? How often are the  
14 tests going to be required? And what kind of  
15 enforcement actions would FSIS take?

16           So I would be interested in learning some  
17 of these details, if you members of the panel are  
18 prepared to answer some of these questions.

19           DR. RAYMOND: I don't think, Tanya, we're  
20 going to be able to answer that yet at this point  
21 because right now we're trying to decide whether  
22 this is a process, processing aid, an intervention,

1 that we are going to move forward on based on the  
2 comments today and on the submitted comments that  
3 will come in, in the next 30 days.

4 At that point in time, if we do decide to  
5 move forward with this, there's many questions that  
6 will have to be answered. And we've visited with  
7 many people about these.

8 For instance, if industry would take a look  
9 at this as a way to eliminate some of the other  
10 interventions, we need to make absolutely certain  
11 that there is an improvement in the safety of the  
12 beef, not a maintenance of the status quo to change  
13 cost or reduce cost.

14 Your points are well taken, and they are  
15 questions that will be addressed at the right time.

16 DR. ENGELJOHN: This is Engeljohn. I will  
17 try to answer maybe perhaps a bit to give you some  
18 information to inform your comments as they come in  
19 as well. But irradiation generally within the  
20 Agency currently is regulated, and we have in place  
21 some very prescriptive regulations on the process by  
22 which an irradiator would go through to get

1 approvals to do those irradiations, as well as the  
2 type of documentation that has to be present to  
3 demonstrate the effect of the treatment.

4           So in terms of will there be new or  
5 different things related to that? The intent here  
6 would be if we do go forward with rulemaking, that  
7 would be spelled out there.

8           But in terms of informing your comments,  
9 currently we have irradiation of beef in our system.  
10 We have a process by which either OSHA, EPA or FSIS,  
11 generally all have a role to play in terms of  
12 licensing and oversight over the operation, and even  
13 though this might be applied as a processing aid, it  
14 likely would be handled in the same manner we  
15 currently have regulations for the control of the  
16 process.

17           So I think that you should consider that it  
18 would be done in the same manner that irradiation of  
19 ground beef is done today. It's just the level of  
20 application is what's being addressed differently  
21 here and the point at which the irradiation process  
22 is actually treated for the beef. So there would be

1 some differences in that application, but in terms  
2 of the actual effect, that's what we're talking  
3 about for processing aid. It's meant to reduce, not  
4 eliminate, the presence of 0157 at a point in the  
5 process.

6 DR. ROBERTS: Well, can I have a follow-up  
7 comment?

8 MR. TYNAN: Please.

9 DR. ROBERTS: I would suggest that you have  
10 required, that there be testing done at the end of  
11 each shift, that you take some random samples of  
12 trim from the most contaminated locations and, you  
13 know, the industry knows where that is, and that  
14 then would allow you to not only evaluate the  
15 irradiation effectiveness but also everything that's  
16 happened before, what happened on the slaughter  
17 line, what happened on the incoming beef if it was  
18 heavily contaminated and whether extra processing  
19 steps were added, and what happened in the tiller as  
20 well.

21 So I think you've chosen a good point that  
22 would be excellent for testing that would look at



1 the impact of everything that's happened before in  
2 the supply chain, in the supply process, and given  
3 the fact that the tests have become much more  
4 sensitive and much cheaper, much faster, for 0157  
5 and other STECs, it would be an excellent thing to  
6 require each and every plant to do each and every  
7 shift. I know that sounds like a lot of testing but  
8 I also think that testing should be made publicly  
9 available to everybody.

10 And I know that industry doesn't  
11 necessarily want to do that, but that would be  
12 something that I would like FSIS to consider as a  
13 possibility and use irradiation to kind of further  
14 the assurance to the American public that there is  
15 no 0157 or it's in very, very limited reductions in  
16 the amounts that are in the food supply. Thank you.

17 MR. TYNAN: Okay. Thank you, Ms. Roberts.

18 DR. ROBERTS: I'm interested in any other  
19 comments you had on that, too.

20 MR. TYNAN: The next commentor I have is  
21 Randy Huffman. Randy, if you'd come to the  
22 microphone, identify yourself and your affiliation.

1 DR. HUFFMAN: Thanks, Robert. I appreciate  
2 the opportunity to be here today, and I guess I'm  
3 partly to blame for us being here this morning. I  
4 appreciate the Agency taking the time to hold this  
5 public meeting and gather input.

6 And, Dr. Raymond, I had the pleasure of  
7 being at your first public meeting about three  
8 years, three months ago, and I'm glad to be at the  
9 last one, and I've enjoyed working with you. I hope  
10 you enjoy your time away from Washington.

11 As stated, my name is Randy Huffman, and  
12 I'm speaking to you on behalf of the American Meat  
13 Institute and our member companies. I'm President  
14 of the AMI Foundation, which is the research,  
15 education and information arm of the AMI, which is  
16 the oldest and largest trade association  
17 representing meat and poultry packers and processors  
18 in the U.S. AMI, our member companies, process over  
19 90 percent of the meat and poultry products  
20 manufactured in the U.S., and we appreciate having  
21 the opportunity to speak to you on this petition,  
22 and we appreciate the action that FSIS has taken.

1           The beef industry has made significant  
2 progress in enhancing the safety of beef products  
3 during the last two decades. The industry has  
4 invested tens of millions of dollars in research  
5 aimed at developing new technologies that will  
6 reduce microbial hazards, that are inherent in the  
7 processing of raw agricultural products.  
8 Implementation of the most effective of these  
9 technologies has occurred and has contributed to the  
10 reduction in pathogens such as *E. coli* 0157 that  
11 we've seen on raw beef products.

12           However, clearly there's a need for more  
13 technologies and more effective technologies, and  
14 that's what the basis of our petition is.

15           The AMI Foundation strives to fund  
16 exploratory research in cooperation with other food  
17 safety funding entities to discover, evaluate and  
18 validate solutions-based microbial interventions  
19 that can be made freely available to the meat  
20 industry as a whole.

21           Since 2000, the AMIF research program,  
22 which is funded entirely with voluntary

1 contributions from our member companies, has  
2 directly sponsored over 60 food safety research  
3 projects at leading universities and public labs,  
4 totaling well over \$6.5 million in direct research  
5 costs. So our industry is strongly committed to  
6 funding food safety research.

7 We're also cooperate closely with other  
8 groups that provide research funds such as the  
9 National Cattlemen's Beef Association and the  
10 Cattlemen's Beef Board, and the fruits of this  
11 research cooperation can be found in the underlying  
12 science that supports the petition that's under  
13 consideration today.

14 AMI and our industry partners have a vested  
15 interest in developing safe and effect technologies  
16 that can make a real difference in enhancing beef  
17 safety. We profit from selling safe food.

18 The proof of concept research underlying  
19 the petition was conceived, designed, and conducted  
20 using a multifaceted team of researchers and experts  
21 in beef processing, including microbiologists,  
22 engineers, biochemists, and meat and sensory

1 scientists.

2           The project was initiated to evaluate the  
3 possibility that this unique application of electron  
4 beam energy could be an effective intervention at a  
5 point in the process where unintended contamination  
6 is most likely to occur on the surface of the  
7 carcass.

8           AMI agrees with the position of the FSIS  
9 that low-dose, low-penetration electron beam applied  
10 to the surface of a chilled beef carcass is a  
11 processing aid and, accordingly, that the process  
12 need not be labeled or any products derived from the  
13 carcass be labeled.

14           The information contained in the petition  
15 demonstrates that the process under consideration  
16 would be used as a processing aid. The data clearly  
17 show that it could be remarkably effective as an  
18 antimicrobial on the carcass surface, but in no case  
19 has FSIS ever required the labeling of an ingredient  
20 merely because of its antimicrobial properties at  
21 time of treatment.

22           In the case of this process, it has no

1 other technically functional effect on the carcass  
2 or the products derived from the carcass. The  
3 petition demonstrates the process has no significant  
4 effect on the organoleptic properties, the shelf  
5 life or nutritional properties of the carcass, or  
6 the products derived therefrom.

7 In addition, we submit that this lack of  
8 any technical effect demonstrates that the process  
9 is insignificant in terms of the products of the  
10 carcass.

11 The key unique difference of this proposed  
12 application of irradiation, compared with other  
13 approved methods or final product irradiation, such  
14 as with ground beef, is that it is low dose, it's  
15 low penetrating, and it's only an e-beam  
16 application. And it results in an insignificant  
17 portion of the carcass actually receiving e-beam  
18 exposure, and most of the edible portion of the  
19 carcass would not receive any e-beam exposure at  
20 all.

21 The external surface of the carcass is  
22 largely used in ground beef manufacturing where it

1 constitutes about 5 percent of the ground beef  
2 blend. Much of the carcass surface is covered by  
3 adipose tissue which is inherently self-limiting as  
4 a component in ground beef blends.

5 Indeed, we submit it would be misleading to  
6 mandate the labeling process or any beef derived  
7 from the carcass since those products would evidence  
8 no characteristics of being irradiated products.

9 FSIS posed a series of technical questions  
10 that were considered by the research team, and the  
11 appropriate research studies were conducted to  
12 address these questions. The specific questions and  
13 the detailed research results are contained within  
14 the petition.

15 And I would point out that the primary  
16 component of the petition includes a public peer-  
17 reviewed study. So I submit based on some of the  
18 comments made earlier, that the recognition that the  
19 research was peer reviewed and in the published  
20 literature, in the Journal of Food Protection, I  
21 think establishes the validity and veracity of that  
22 research, and it shouldn't be questioned here at the

1 -- in this meeting. Certainly, additional research  
2 is needed, but the research that's in this petition  
3 is valid and appropriate.

4           The series of questions and conclusions  
5 from those questions are summarized in the petition.  
6 The proposed application surface applied low dose  
7 irradiation would be exceptionally effective at  
8 reducing *E. coli* O157. Number two, the application  
9 would not have any effect on organoleptic properties  
10 or appearance of the products. The proposed  
11 application would not have any lasting effect on the  
12 shelf life. And, four, the proposed application  
13 would not produce significant losses of either  
14 macro- or micro-nutrients.

15           These data provide an initial evaluation of  
16 the potential effectiveness and the needed data to  
17 support a regulatory decision on label. AMI and its  
18 member companies recognize clearly that it is simply  
19 the first step in a long process of developing and  
20 validating this potential food safety tool. There's  
21 a lot more work and research that needs to be done.  
22 Engineering studies will need to be conducted and



1 prototype units for applying this technology in a  
2 plant setting will need to be constructed.

3           Worker safety and FSIS inspector safety  
4 procedures must be established and properly  
5 implemented. Process control techniques would need  
6 to be developed and implemented to ensure proper  
7 dose application and the penetration and to ensure  
8 that the minor dose on the surface would be  
9 accounted for at any subsequently irradiated  
10 products.

11           A prototype system must be validated under  
12 real world operational conditions, and ultimately  
13 processing plants, if all these issues are properly  
14 addressed and the technology still is promising,  
15 processing plants would likely require significant  
16 reconfiguration and incur significant capital  
17 expenditures.

18           These issues are significant to our  
19 industry, but I don't see them, and our industry  
20 does not see them as insurmountable.

21           The key issue at hand today is that a  
22 regulatory decision is being contemplated based on

1 sound scientific data which will allow the industry  
2 to further study this potential food safety tool and  
3 potentially take advantage of its pathogen reduction  
4 capabilities.

5           So, in summary, based on the data and  
6 analysis referenced in the petition, we submit that  
7 the proposed process of e-beam to treat the surface  
8 of a chilled beef carcass would meet the USDA FSIS  
9 definition of a processing aid and would result in  
10 significant reduction of pathogens such as *E. coli*  
11 O157, while causing no meaningful change in the  
12 organoleptic properties, the shelf life, or the  
13 nutritional profile of the products derived from the  
14 carcass.

15           We appreciate your action on this request,  
16 and I look forward to working with you as we move  
17 forward. Thank you.

18           MR. TYNAN: Thank you very much. The last  
19 commentor I have on my list is David Plunkett.

20           MR. PLUNKETT: I will submit written  
21 comments.

22           MR. TYNAN: You're welcome to have some

1 oral comments or -- no.

2 MR. PLUNKETT: I'll submit them.

3 MR. TYNAN: All right. Thank you.

4 Mr. Plunkett has yielded his time at this particular  
5 point.

6 I would invite then since we still have  
7 time on our agenda, if there are some other folks  
8 that have comments that would like to do so at the  
9 time, I'd like you to come to the microphone,  
10 identify yourself and your affiliation, and we'll  
11 include those in the oral comments.

12 MR. GOODSIR: I'll add a little to my  
13 former introduction.

14 MR. TYNAN: And if you could state your  
15 name and --

16 MR. GOODSIR: Graeme Goodsir is my name,  
17 originally from Australia, just to explain the  
18 accent, and I've lived in the United States 36 years  
19 and am a U.S. citizen now.

20 I've been in the livestock and meat  
21 industry all of my career, and as I mentioned, I do  
22 work for the British industry for liaison purposes

1 which doesn't directly affect irradiation.

2           In my former trade activities, I've had my  
3 consultancy 20 years. Before that, I had other  
4 roles. I was Chairman of the Meat Importers Council  
5 of America and dealt a lot with industry issues and  
6 have kept very much involved especially with *E. coli*  
7 O157.

8           I took a special interest after the Jack-  
9 in-the-Box outbreak in 1993 and have done so ever  
10 since on a private basis. I talked a lot with the  
11 industry people and others. I totally sympathize  
12 with Nancy Donley, and if I had lost a child like  
13 she did, I would never forgive this industry until  
14 we addressed the issue in a totally responsible  
15 manner and came up with the best possible solution.

16           And I believe we're close to that today.  
17 We've been trying a long time and spent a lot of  
18 money as Randall just said.

19           I also want to add that I've got a great  
20 respect for Dr. Randall Huffman, and his father was  
21 a notable meat scientist, and I think he's looking  
22 at the total integrity of this issue.

1           And one point I'd like to make at the  
2 outset, I've been disturbed all along by the  
3 adversarial nature of the attitudes between consumer  
4 groups and the industry, and I think there's a great  
5 need, and I hope USDA can help as a mediator, to sit  
6 down and show respect for each other and really go  
7 through these issues without emotion. We have a lot  
8 of irradiated food already. We have spices, for  
9 example, that often go into meat products. Most of  
10 them irradiated, and it's not an issue of  
11 controversy at all. The procedure is acceptable.

12           We've heard other terms for irradiation. I  
13 remember Hormel and, Dr. Raymond, your predecessor  
14 in Food Safety, while she was at Texas A&M, was a  
15 great advocate of irradiation, and together with  
16 Hormel they were promoting the concept and I thought  
17 in a very admirable way, but they were totally shot  
18 down by consumer advocacy criticism without ever  
19 having started the dialogue, and Hormel retreated I  
20 believe. I can't speak for them, but I believe they  
21 retreated because their brand name would have been  
22 in danger of a lot of injury if they really pushed

1 this, but that's the problem we have to overcome.

2 I just want to comment a little bit on the  
3 practical aspect.

4 No, first if I can take a minute as a  
5 consumer, I buy irradiated ground beef in  
6 Pennsylvania where I live from the Wegmans  
7 Supermarket, very high profile and in my belief, top  
8 integrity. And they advocate this in their fliers.  
9 They explain it. They've sold it for a number of  
10 years, and I think it's good. And they use the  
11 SureBeam process.

12 And the other product I can buy where I  
13 live is from the Schwan Group that goes door to door  
14 selling irradiated ground beef among other products  
15 frozen. But on the labeling, on their package, they  
16 do recommend that you cook that product still to 160  
17 degrees, which is almost telling me that maybe I  
18 can't have total confidence in the irradiation.  
19 I've still got to follow the USDA recommendation for  
20 safety, and they're doing it to protect themselves  
21 from legal liability I'm sure, but it's a confusing  
22 label, and we've got to show very careful attention

1 to labeling and make sure consumers fully understand  
2 all of the aspects.

3 I meant to say that Texas A&M and Hormel, I  
4 remember, advocated a term of electronic  
5 pasteurization. Whether that can be considered as a  
6 legitimate description, I'm not sure, but I'd like  
7 it to be considered because there's no question,  
8 irradiation sparks alarm and danger.

9 How do we explain milk being pasteurized?  
10 It's the same problem of farm contamination having  
11 to be corrected. We did it years ago with a lot of  
12 controversy but now it's not even a talking point.  
13 We're looking at a similar thing to protect meat the  
14 same way that we protect milk.

15 And I just want to comment briefly on the  
16 practical aspects of looking at this. My studies in  
17 the last, what, since 1993, 15 years, have persuaded  
18 me, and I'm not a scientist, but persuaded me that  
19 the hazard lies with the hide of cattle. We don't  
20 have any problem with pork. I never heard of *E.*  
21 *coli* with pork because at the end of the line, we  
22 put it through a high temperature flame procedure

1 that eliminates contamination if it's there.

2           We can't do that with cattle, and I believe  
3 that contamination is on the hide, and I believe  
4 with the hide puller, the mechanical process that  
5 pulls the hide off, and at the end it snaps off with  
6 a lot of friction, and if there's any manure on that  
7 hide, it's going to dissipate into the atmosphere  
8 and those particles could fall anywhere along the  
9 line before that carcass leaves the slaughter floor,  
10 and that's where I think we still have that risk.  
11 With all the interventions that we try to eliminate,  
12 I think it's all those particles still falling down  
13 that give us that odd contamination.

14           And we've got to investigate and explain,  
15 this is the reason we need to have an intervention  
16 like irradiation at the end, and I'd like to know  
17 where it would be, at the end of the slaughter line  
18 or just before going into the cooler. But it's got  
19 to be at that point, not after it leaves and gets  
20 scattered around, like SureBeam tried to do,  
21 irradiating ground boxed beef, ground beef in boxes  
22 in different parts of the country.



1 MR. TYNAN: Not to impose a time limit on  
2 you --

3 MR. GOODSIR: Okay.

4 MR. TYNAN: -- but if you could maybe --

5 MR. GOODSIR: Thank you. Just one more  
6 point.

7 If irradiation comes into slaughter plants,  
8 we heard it could cost millions of dollars to  
9 install, very expensive, and I worry about how that  
10 affects the small and very small processor.

11 I want to make this point that I believe  
12 the contamination is on the hide and on the  
13 mechanical hide remover with those particles.

14 I think if a small processor does not use  
15 that mechanical hide remover and does the removal of  
16 the hide by handwork and knife work, he should be  
17 allowed not to have irradiation. That should be  
18 subject to a whole lot of testing to be sure that he  
19 or she is capable and does not have that risk of  
20 contamination. Thank you. I didn't mean to say so  
21 much, but I'm inspired today that it triggered.  
22 Thank you.

1           MR. TYNAN: I lost track of the time. I  
2 got so engrossed in your comments.

3           Is there anyone else that would like to  
4 make a comment before we conclude? I'm sorry.  
5 Mr. Waldrop, if you want to come up, identify  
6 yourself and your affiliation.

7           MR. WALDROP: Chris Waldrop, Consumer  
8 Federation of America.

9           At the beginning of his remarks,  
10 Dr. Raymond mentioned that he just envisioned this  
11 as just being another intervention step, and Randy  
12 Huffman from AMI said the same thing, that this is  
13 an intervention step. That seems to be how FSIS is  
14 considering it.

15           I think consumers need reassurances that if  
16 it is an intervention step, that it doesn't result  
17 in the decrease use of other interventions, or if  
18 that's the case, then that we are receiving the same  
19 or actually better protection as Dr. Raymond said.  
20 And so consumers need reassurances if that is going  
21 to be the case. We don't want it to just be put in  
22 there as another intervention step and then left

1 alone. So we need FSIS' oversight on that to make  
2 sure that that happens.

3 In terms of the study that was presented to  
4 support the petition, I believe, and I forgot to  
5 look at it just quickly, but I believe that was done  
6 on individual pieces of meat and not on entire  
7 carcasses in order to determine reduction in *E.*  
8 *coli*, and I think that that's something that we need  
9 to look at before we go ahead and approve this.

10 Can we get a uniform dose on a carcass?  
11 All carcasses are different. It's not the same  
12 thing. Can we get a uniform dose on a carcass? If  
13 so, USDA needs to validate that, and consumers  
14 expect USDA to be validating that.

15 Can irradiation get into the folds and the  
16 crevices of all these carcasses in the way that  
17 steam pasteurization or other methods cannot? And  
18 if so, USDA needs to validate that that's the case.

19 So again, reassurances that this is going  
20 to be done properly and that any further studies  
21 that are needed, USDA is validating them and not  
22 just accepting them on their face.

1           Finally, on the labeling issue, FSIS needs  
2 to look at the labeling issue very, very carefully.  
3 There's been a number of comments about it.  
4 Consumers do have a right to know that this process  
5 is being used. It's different than other processes.  
6 You can't just educate consumers and say, look, it's  
7 great. We have this great technology. Just trust  
8 us, you know, don't worry about it, everything's  
9 fine. Consumers have valid concerns, and those need  
10 to be addressed. Consumers have a right to know  
11 about this.

12           And they also have a right to know to avoid  
13 this process if they want to. This gentleman before  
14 me said he seeks it out. That's great. That's  
15 good. It's an option that is out there in the  
16 marketplace, but some consumers want to avoid it.  
17 So FSIS needs to think through the labeling issue on  
18 that.

19           We also don't want to mislead consumers and  
20 say that just put irradiation on the packaging  
21 because it's been done at an earlier step, and if  
22 you start mixing that product in with other product,

1 all of a sudden the irradiation doesn't hold in the  
2 same way that it does if you're doing it at the very  
3 end of the line.

4 So these are very critical issues, and FSIS  
5 needs to think through them very, very carefully.  
6 Thanks.

7 MR. TYNAN: Thank you, Chris. Any other  
8 comments from the audience?

9 MS. RANGAN: One point I just wanted to  
10 bring up, it's Urvashi Rangan from Consumers Union,  
11 is to encourage the panel to take a look at  
12 Dr. Thayer's data. One point I forgot to mention in  
13 my comment that I'll definitely include in your  
14 written ones is that the data do not, in fact,  
15 conclusively support the assertions being made.

16 The fact that AMI has asserted that there  
17 are no organoleptic changes is simply not  
18 demonstrated by the data, and I encourage you to  
19 take a look at Table 5 in Dr. Thayer's report.  
20 While aroma and flavor only saw statistical  
21 differences when you did 100 percent of the cut in  
22 the ground beef, and there was only a statistical

1 difference there, tenderness, juiciness did, in  
2 fact, show that there were statistically significant  
3 differences even when 5 percent of the irradiated or  
4 10 percent of the irradiated parts were used.

5           So the assertion that there are no  
6 organoleptic changes based on this validated data  
7 doesn't stand, and it's extremely important to take  
8 a look at the science that's been presented to you  
9 because the assertions that are being made are not  
10 upheld in the data. Thank you.

11           MR. TYNAN: Okay. Thank you. One last  
12 call. Ms. Buck, I saw you leaning in that  
13 direction.

14           UNIDENTIFIED SPEAKER: Should we just line  
15 up? Would that be easier?

16           MR. TYNAN: Well, you could do that if  
17 you'd like to.

18           MS. BUCK: Yeah, this is Pat Buck from CFI.  
19 I have a comment to make, and basically I'm  
20 directing it to FSIS and to the industry. There's  
21 almost nothing else that a person does that is as  
22 intimate or personal as eating food. I mean, you

1 are actually taking it into your body. I mean, this  
2 is stuff that really involves importance to people.

3 I see this irradiation to some degree as a  
4 trust issue. Most consumers have very little  
5 knowledge of the science behind all of this. So  
6 they're looking toward their government agency to  
7 make sure that you have shown complete due diligence  
8 in your research efforts and in your gathering, and  
9 I think this meeting, of course, one of those  
10 efforts, but you need to continue at that, and if  
11 any consumer group in this rank over here has a  
12 concern about the study, that has to be looked at  
13 thoroughly, and more studies may have to be  
14 conducted.

15 Again, it's a trust issue. This is a new  
16 technology. The American consumer has a right to  
17 know that it's being used, and I really in all  
18 deference to what you said earlier, I truly believe  
19 that it would be to the business' advantage to say  
20 this has been used to reduce the pathogen load on  
21 beef carcasses.

22 The other thing I would like to mention

1 which I didn't mention before is that that Radura  
2 symbol, when it's put onto the package, to some  
3 consumers, that means that that product is now  
4 sterile. As the gentleman pointed out to me, that's  
5 not 100 percent the case.

6           So you have to have clear, concise messages  
7 to the consumer on this label that you will develop  
8 that safe food handling must be applied because  
9 really you have only conducted a partial treatment  
10 of irradiation because, as Mr. Huffman pointed out,  
11 most of the product is not irradiated.

12           The last thing that I forgot to mention is  
13 that we are very concerned about that small  
14 processor, and the small processor should not have  
15 to necessarily follow and do irradiation. He may  
16 have a different way of handling his contamination  
17 control that he wants to use or that he can afford  
18 to use. We think that small processor should not be  
19 put in a position where it has to use irradiation as  
20 part of their processes.

21           All right. Those are my last comments.  
22 Thank you.



1           MR. TYNAN:           Thank you, Ms. Buck.  
2 Ms. Roberts.

3           DR. ROBERTS: Yes. Actually I have a Ph.D.  
4 in Economics. So I suppose I should call myself  
5 Dr. Tanya Roberts. I'm just not used to using that  
6 label because in the Government you tend to just  
7 call yourself by your name and not have a lot of  
8 fancy titles.

9           But I had a question that's not really an  
10 economic question at all in nature, but it has to do  
11 with the physical process of irradiation. And my  
12 interpretation of slide number 3 where the way that  
13 the irradiation works is by damaging the DNA of I  
14 assume the *E. coli* 0157 organisms and destroying  
15 them, in that process, you're creating free radicals  
16 and oxidants, and that is the procedure that  
17 actually allows the 0157 to be killed.

18           And I guess my question is, is that true?  
19 And the question is antioxidants have recently been  
20 shown in the literature to be increasingly important  
21 in consumer health. And so with this antioxidant  
22 and free radicals, is that a consumer health issue?

1 I'm not a scientist. I don't know how to answer  
2 that.

3 MR. BURKE: When the electron beam hits,  
4 you know, hits the product on that, a lot of,  
5 depending on the energy going in there, depending on  
6 what is actually done to different organisms and the  
7 tissue and such, it has different resistance to  
8 that. In other words, you're coming in and you're  
9 slamming an electron into the product, and it's  
10 breaking, you know, like the DNA, specifically *E.*  
11 *coli*, and we haven't gotten into any of the issues  
12 you were talking about at this time exactly how all  
13 the organism are affected on this. That's one of  
14 the things we're going to have to look at.

15 DR. ROBERTS: Any other comments?

16 (No response.)

17 DR. ROBERTS: Then my last question has to  
18 do with I'm not really up to date on what the  
19 current regulations are by FSIS for testing  
20 shipments of combo bins for *E. coli* 0157. Is every  
21 shipment required to be tested, and if not, why not?

22 DR. RAYMOND: Tanya, I'm just going to have

1 to jump in here and say, you know, this is a  
2 listening session for us to hear comments about low-  
3 dose irradiation --

4 DR. ROBERTS: Okay.

5 DR. RAYMOND: -- not to discuss the entire  
6 beef industry.

7 DR. ROBERTS: Sure.

8 MR. TYNAN: Mr. Mendelson, I'm going to let  
9 you be the last commentor for the day.

10 MR. MENDELSON: Thank you. I'm honored.  
11 (Laughter.) And I won't make people stay in this  
12 room for much longer.

13 I just actually had a question. Joseph  
14 Mendelson with the Center for Food Safety. I know  
15 FDA has a proposal out to address certain labeling  
16 requirements and certainly labeling is discussed  
17 briefly in, in this proposal. I was wondering if  
18 there was any discussions on how this dovetails with  
19 FDA's proposed labeling changes and if there's a  
20 sense on when FDA would be completing that and how  
21 the timing of a decision on this petition may  
22 intersect with that?

1           MR. DERFLER:     This is Phil Derfler.     I  
2 think we see ourselves proceeding on two different  
3 tracks, and I mean, we're going to make our decision  
4 on the basis of the comments and what we learn in  
5 response to the notice and our evaluation of the  
6 petition and our evaluation of our statute.     And  
7 ultimately we're going to proceed in communication  
8 with FDA, but we're going to proceed separately and  
9 make a decision on the basis of the evidence that's  
10 in the record of this proceeding.

11           MR. TYNAN:     Ms. Donley, I see you'd like to  
12 make a comment, and I take it back, Mr. Mendelson.

13           DR. RAYMOND:    You can get back up if you  
14 want.

15           MR. TYNAN:     Yeah, you can get back up.

16           MS. DONLEY:     Thank you very much.     I  
17 appreciate it.     It's really one of going forward.  
18 It's kind of a strategic question.     Although I do  
19 have to just make one kind of response to something  
20 that was said is I think, you know, that, Graeme,  
21 and I've been working with you, beside you, across  
22 from you, 15 years as well on this issue, and I

1 think one thing I'd just like to say, I think it's  
2 good, it's necessary that we keep these tensions  
3 going here. We need to because otherwise we're  
4 going to become stagnant and not get anything done.  
5 You can't be too cozy. These things are actually  
6 good. These types of debates are positive and I  
7 think a very, very good thing.

8 I would also like to kind of respond to the  
9 fact of questioning science at this microphone and,  
10 you know, again that's a positive thing in that it's  
11 keeping everybody on their toes, and we're not just  
12 going to swallow and stomach something that's been  
13 put forward to us by a self-sponsored study. We're  
14 just not going to do it.

15 That said, I really hope that the industry,  
16 that AMI goes forward and builds one of the things,  
17 gets it done, puts in front of us and let's take a  
18 look at it. I'm all for that.

19 So now to my procedural thing is, and Phil  
20 started talking about this. I just question is this  
21 a yes or no situation here where you assess these  
22 comments and our written public comments or if you

1 could kind of elaborate a little bit more on the  
2 next steps. Thank you.

3 MR. DERFLER: Well, I don't think I've ever  
4 answered a question yes or no in my life.  
5 (Laughter.)

6 MR. RAYMOND: Not the last three years.

7 MR. DERFLER: You know, we're going to  
8 evaluate the comments. We're going to evaluate the  
9 science. We're going to evaluate the law. There is  
10 a possibility we can decide that we can treat it as  
11 a processing aid in which case there would be some  
12 sort of public announcement of our decision, but we  
13 would not necessarily have any further process based  
14 on that.

15 There may be a possibility that we decide  
16 that there is a basis, there is something here on  
17 which we think we can proceed, but we do think  
18 because of the nature of the regulation that we have  
19 in place already on irradiation, we're going to need  
20 to amend that regulation, and so we would have a  
21 public process to do that.

22 Or, there is I guess some possibility on

1 the basis of the science and the information that we  
2 receive in comments that we decide that there really  
3 is no reason to treat type of irradiation any  
4 differently than the way we're already treating  
5 irradiation, and we leave the regulation standing  
6 and not proceed any further with this particular  
7 idea.

8 I think all those things are open. I think  
9 we're having this meeting because we felt on the  
10 basis of our analysis of the petition that there was  
11 some promise here in light of how we treat  
12 processing aids.

13 There is some possibility here that there's  
14 something that we need to look at a lot more  
15 closely. And so that's why we're here today, but we  
16 really are interested in comments and additional  
17 public input and stuff like that so that we can make  
18 our decision.

19 MR. TYNAN: Before I turn it over to  
20 Dr. Raymond for maybe giving us closing comments,  
21 since this is his last public meeting, we ought to  
22 give him the last word, I just want to remind

1 everybody that we are accepting written comments.  
2 So if you were not able to get all of your thoughts  
3 conveyed today, and I know there was quite a bit of  
4 dialogue, and I appreciate the effort that all the  
5 commentors put into their thoughts, we will be  
6 accepting written comments through the 18th and the  
7 Federal Register notice kind of outlines how that  
8 should occur. So the different methods of  
9 submitting the comments.

10 In addition, we'll have a transcript of  
11 this public meeting that we'll probably receive  
12 within 10 to 12 days, Keith?

13 Yeah, about 10 to 12 days, and we will post  
14 that on our website, and that will be available so  
15 that you can review some of the comments that were  
16 made today and formulate based on that, your  
17 thoughts a little bit more carefully.

18 And with that, I would also mention that I  
19 think we'll have Mr. Burke's presentation up on the  
20 website as well. So all of the information will be  
21 available for you to fashion the comments that need  
22 to be submitted by the 18th.



1           And with that, I want to thank you again  
2 personally for your thoughts and comments today.  
3 I'm going to turn it back over to Dr. Raymond.

4           DR. RAYMOND: Thanks, Robert. I won't say  
5 much about the process down the road since I won't  
6 be here to try and guide it, but a couple things  
7 that had come up in the discussion this morning that  
8 I think I can boldly try to respond to.

9           A couple of people mentioned small  
10 establishments, and they should not have to do this.  
11 I don't think there's any intent on the Agency to  
12 make this a requirement for anybody. The intent is  
13 to consider making this a possible intervention that  
14 can be used at the industry's desire, personal  
15 desires.

16           I agree with the comments that the  
17 processes of removing the hide are different in the  
18 small slaughter establishments versus the larger  
19 establishments. There is no question about that  
20 either, and the small establishments are represented  
21 here today by one of their associations, and they're  
22 here probably to make sure that we don't make this

1 mandatory for small establishments. So that's not  
2 our intent. That's not our intent at all.

3           Secondly, Chris, I think it was, made the  
4 comment about the study was done, he thought, maybe  
5 on muscles rather than carcasses, and I think that's  
6 correct. And industry, when Mr. Huffman was up, he  
7 made the comment that there is more studies that  
8 need to be done. Industry just isn't willing to  
9 invest millions of dollars unless there's an  
10 indication that this can be an intervention that  
11 they can use, and so I think the studies we have  
12 seen are preliminary studies. And if they are good  
13 enough to open the door for further studies, I think  
14 probably that's kind of what AMI petitioned us for.

15           It isn't to say let's just put this in all  
16 the plants willy-nilly. It's like we want to move  
17 forward but are unwilling to invest the money unless  
18 there's an indication that it will be a tool that we  
19 can use to make beef safer.

20           So you're right in your question, and I  
21 think you're right, and I think that's why I say at  
22 least this would be just another intervention in the

1 series of interventions rather than the be all end  
2 all to the problem because with the crevices in the  
3 carcasses, you're exactly right. The level of  
4 radiation is going to differ, and that's why when  
5 the study shows, you know, this huge log reduction  
6 on a muscle, that doesn't mean that's what we get on  
7 a carcass, and I think we all agree with that  
8 comment. Your concerns are our concerns.

9 I wish we could say it was better. I wish  
10 we could say it was almost 100 percent like Wegmans  
11 says versus Schwan's because Wegmans, their  
12 advertisement is if you like pink hamburger, buy  
13 this irradiated product. I mean, they're willing to  
14 tell you that you can eat it pink, and I love pink  
15 hamburger, used to, you know. (Laughter.) But I  
16 cook all my hamburger to 160 degrees and just so I  
17 don't spend the extra money at Wegmans and buy the  
18 irradiated beef, I'm still going to cook it to 160.  
19 I've certainly learned that in three years.

20 And my last comment is, and I think Pat is  
21 the one that says we need clear, concise messaging.  
22 To quote, "We need clear, concise messaging so the

1 consumers know what was used in the processing of  
2 this meat." I wish we could get consumers to  
3 acknowledge our clear, concise messaging that ground  
4 beef needs to be cooked to 160 degrees because we're  
5 not going to turn this thing around with low-dose  
6 irradiation, with vaccines, with bacteriophages.  
7 This is just another step, but another huge step is  
8 that end processor, the consumer. And so we can try  
9 our darndest for clear, concise messaging, but to  
10 some people it doesn't register. To others it's  
11 extremely important, and that's part of this thing  
12 that these guys, we're going to have to determine  
13 from the input of this meeting and the 30-day  
14 comment period is clear, concise messaging necessary  
15 or not necessary, and like I said, I'll be gone. So  
16 it will be somebody else's problem to determine  
17 that.

18 But that said, thank you again for being  
19 here today. Randy, what was the first public  
20 meeting? You said you were at the first one. I  
21 don't even remember.

22 DR. HUFFMAN: You spoke to the

1 international boundaries in meat science and  
2 technology --

3 DR. RAYMOND: Okay. Well, thank you for  
4 remembering that. I hope --

5 DR. HUFFMAN: It was very memorable.

6 DR. RAYMOND: I don't know that I had --  
7 comments yet, but thank you all for being my friends  
8 during these three plus years and look forward to  
9 seeing you again. Thanks.

10 (Whereupon, at 10:58 a.m., the meeting was  
11 concluded.)

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C E R T I F I C A T E

This is to certify that the attached proceedings in  
the matter of:

UNITED STATES DEPARTMENT OF AGRICULTURE

FOOD SAFETY AND INSPECTION SERVICE

LOW DOSE IRRADIATION IN BEEF

Washington, D.C.

September 18, 2008

were held as herein appears, and that this is the  
original transcription thereof for the files of the  
United States Department of Agriculture, Food Safety  
and Inspection Service.

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DOMINICO QUATTROCIOCCHI, Reporter  
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