

UNITED STATES DEPARTMENT OF AGRICULTURE

RESIDUE CONTROL IN A HACCP ENVIRONMENT

SUBCOMMITTEE 3

HERITAGE REPORTING CORPORATION

Official Reporters

1220 L Street, N.W., Suite 600

Washington, D.C. 20005-4018

(202) 628-4888

hrc@concentric.net

UNITED STATES DEPARTMENT OF AGRICULTURE

Pages: 1 through 57
Place: Washington, D.C.
Date: October 31, 2000

HERITAGE REPORTING CORPORATION

Official Reporters

1220 L Street, N.W., Suite 600

Washington, D.C. 20005-4018

(202) 628-4888

hrc@concentric.net

THE UNITED STATES DEPARTMENT OF AGRICULTURE

RESIDUE CONTROL IN A HACCP ENVIRONMENT

SUBCOMMITTEE 3

Lafayette Room
Loews L'Enfant Plaza Hotel
480 L'Enfant Plaza, S.W.
Washington, D.C. 20024

Tuesday,
October 31, 2000

The meeting on the above-entitled matter was
convened at 7:20 p.m.

APPEARANCES:

CHAIRPERSON

MS. CAROL TUCKER FOREMAN

MEMBERS

MR. MAGDI ABADIR
MS. CHERYL HALL
MR. LEE JAN
MS. ROSEMARY MUCKLOW
MS. DONNA RICHARDSON
MS. PATRICIA STOLFA

Heritage Reporting Corporation
(202) 628-4888

P R O C E E D I N G S

1

2

(7:20 p.m.)

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

MR. ABADIR: To start this process, we need to narrow it down so that you have an objective that can be met beforetime. That means chemicals that we know that they have public health -- number one, and that we know that we can sample them and test them. Those are the objective -- . This is the first group to start the program so that we see the results and then people can see results and say, hey, let's put more money for research here, for the other chemicals, whatever. But to start too wide, you're not going to go anywhere. It's too wide of an objective.

One of the interesting things here that people can start with, as I said, is the methods -- are the methods developed to be done. And this is the first line of -- that we want to be looking at specifically, so just putting this in a comment --

MS. STOLFA: Yes. Well, and I think that when the Academy recommends bringing -- having a process that integrates the concept of risk assessment, that that's one of the things that they're talking about. And you know,

1 there are real issues to be thought about as to how we might
2 do that. Now, we have in tried in recent years to make the
3 selection of compounds that are in our annual testing plan
4 more public-health risk based.

5 It's not clear to me that anybody knows that or
6 that anybody agrees with the criteria we use, that people
7 don't have some other ideas as to what should be the
8 criteria. But I think that's part of what centers around
9 the recommendation regarding incorporating risk assessment.

10 MS. FOREMAN: Does FSIS do the risk assessment?
11 The tolerances are set elsewhere, so --

12 MS. STOLFA: FSIS has a group. And it doesn't --
13 it's one of the interagency groups that makes the annual
14 testing plan. And that's the group that -- and that
15 activity in recent years -- you know, they tell me, oh,
16 we're risk based now. And I say, yeah, well, nobody can
17 understand it.

18 And so, you know, how can anybody have confidence
19 that it is truly risk based if they can't understand what
20 you do. So there's probably room for transparency. There's
21 probably room for consideration of whether or not people

1 really think it's risk based.

2 All the people, which includes some people from
3 FDA and, I think, CDC who design that plan each year, think
4 that they've made progress and -- but other people might
5 have different views on that or might have better ideas
6 about how --

7 MS. FOREMAN: But as Magdi asked, is there
8 someplace that I can go and find a risk assessment that says
9 we -- we're spending our resources to manage these risks
10 because we know that these chemicals are very likely to
11 occur and likely to cause harm or are less likely to occur
12 because fatal harm -- you know, the typical risk assessment?
13 Is there someplace where there is a risk --

14 MS. STOLFA: The blue book.

15 MS. FOREMAN: The blue book.

16 MS. STOLFA: The blue book has a description of
17 that process which its designers characterize as being more
18 risk based. We can certainly have somebody explain exactly
19 what they do. I mean, but it is in the blue book.

20 MS. FOREMAN: Okay.

21 MS. STOLFA: And the most current version of the

1 blue book would have a little section on how they do that.

2 I, myself, don't find it to be transparent. But I don't
3 have an extensive technical background, so, you know --

4 MS. FOREMAN: Is it a formal risk assessment?

5 MS. STOLFA: No. It's a ranking system that
6 considers several factors. And it's different from what we
7 used to do. So that's, you know, that's a -- I think that's
8 a topic area.

9 MS. FOREMAN: So the -- one of the things that we
10 need to look at is having a ranking system that is logical
11 and transparent.

12 MS. STOLFA: And risk based, according to the
13 Academy.

14 MS. FOREMAN: Yes, and obviously risk based. Put
15 the resources where they're from.

16 MS. STOLFA: Yes. I mean, I think that's
17 important to discuss. As I say, I think sampling is an
18 interesting and provocative topic. If the right people come
19 to the meeting, I think methods development is potentially
20 an interesting topic. Clearly, it's expensive. It takes a
21 long time.

1 However, other parts of the world have developed
2 live animal methods and used them more than we do. And I
3 believe that the technical capability is not particularly
4 retarded in the U.S. I don't think that anybody knows there
5 might be a good market there, or that has not been added to
6 what we convey.

7 So I think there is a methods development issue to
8 be explored. We can't have methods that nobody but us and
9 FDA can figure out how to do. We can't have methods that
10 are so expensive that nobody else wants to do them. And
11 we're not going to have methods tomorrow. We have to accept
12 that it takes time to develop methods. And so, I mean,
13 that's another thing that we --

14 MS. FOREMAN: Why don't we do this very
15 informally? Let's -- don't look, let's just ask, just get
16 into a discussion.

17 MS. HALL: Okay. I don't want to get off that
18 subject that you're currently on, but I want to go back to
19 the logical, transparent system of testing, to be sure that
20 we address the risk by category of animal, too. There are
21 some things that I think you have to test for in all

1 categories, that are so dangerous, you know, that you don't
2 want them in anything. But there are certain categories, as
3 Pat suggested, that have continuous problems. And those
4 probably need to be monitored a little more closely --

5 MS. FOREMAN: Thank you.

6 MS. HALL: -- for that reason, for the history.

7 MS. MUCKLOW: Carol, having spent a lot of time
8 working with my friend, Mark Dopp (phonetic), here, I'd like
9 to ask if Mark may come and sit at the table with us because
10 we have done the efforts we've done for the last year in
11 partnership together. We've held many meetings on the
12 subject of residues and how to go from where we've been to
13 where maybe we need to be going for the future. And we
14 don't always agree. But he brings a different perspective
15 to this issue. And so I would ask that the committee allow
16 him to come and sit at the table with us and participate as
17 a live participant in this process.

18 Secondly, I think we have to recognize that the
19 Agency in its traditional inspection role accepted
20 responsibility for testing livestock that comes into the
21 food supply that may be carrying violative residues, because

1 that particular act, the selling of an animal into the food
2 supply for food if it contains violative residues, is a
3 violation of the law that isn't under the authority of the
4 Food Safety Inspection Service.

5 It's the violation of the Food, Drug and Cosmetic
6 Act, FDCA. And a meatpacker or a poultry processor is
7 simply that narrow space in the funnel of the distribution
8 system where it is very convenient to test for this and get
9 the best results in a distribution system to find out
10 whether that -- whether those livestock are free or not
11 free.

12 I think you need to give a lot of respect to the
13 past practices of this Agency as it has struggled with this
14 issue, whether we've gone from the fast test to the stop
15 test to whatever test it is, the rapid tests, and thereafter
16 the confirmation tests. So I think that any discussion of
17 this issue without a good background of the fact that a lot
18 has been done and there is a lot of success to talk about in
19 terms of making the meat food supply different -- the
20 challenge we are faced with now and the challenge, as I
21 understand it, of this meeting is how to take it from that

1 traditional role where the government has taken that
2 responsibility and convert it into a HACCP system where it
3 is a company's responsibility when they have all the testing
4 equipment and knowledge. And again, it's still a violation
5 of FDCA, bringing that animal in. And to what extent does
6 the packer accept some of that testing responsibility?

7 There are some firms out there, some meatpackers
8 who have taken much more responsibility for one reason or
9 another in looking at the livestock that are coming through
10 their door, having certifications, doing the followup with
11 producers when they have a violative animal, and working
12 with the Agency to make sure that they go back to that
13 producer to see what education and corrective action he can
14 take to make sure that he quits doing whatever it was that
15 allowed an animal with a violation of a drug to enter the
16 food supply.

17 In addition, we're trying to figure out, does the
18 packer take absolute responsibility for this? Do we say,
19 goodbye, FSIS lab, the packer's now going to be responsible?

20 I don't think that anybody's going to be comfortable with
21 that. I think there is a role for the government testing

1 scheme to work for the industry. I don't know the answers
2 to that. But I think that's what we are here to talk about.

3 And I think there's a tremendous success story about what
4 the government has done. We are a hell of a lot better off
5 in the year 2000 than we were in 1985. And that's because a
6 lot of energy and initiative has been put into this process.

7 But as I told you all today about phenylbutazone,
8 here is a drug that is not supposed to be given to a food-
9 producing animal. If a veterinarian gives it to an -- gives
10 it to a producer to give to a food-producing animal, that
11 animal should wear a special mark for the rest of its life
12 because neither its milk nor its meat ought to enter the
13 food supply. And that's a violation of FDCA. It's not a
14 violation of the Federal Meat Inspection Act.

15 MS. FOREMAN: Rosemary, I understand -- I can
16 understand your concern and where you think we are supposed
17 to go in this meeting. And if the group decides we will go
18 there, then it will be over my objection. But we can go
19 there. We have been asked to respond to -- or to deal with
20 six specific questions that, instead of being oriented to
21 the past and the concerns of producers, are at least in five

1 of those questions oriented to looking to the future and how
2 the Department can design a system that addresses -- that is
3 open and transparent and creates the greatest amount of
4 public understanding.

5 I understand that in the public meeting the issues
6 that you're talking about have to be addressed. I think I'd
7 leave it to the subcommittee. I would at least ask that we
8 spend part of our time this evening addressing the questions
9 that we've been asked to address.

10 MS. HALL: Do other parts of the industry have the
11 same memorandum of understanding about testing that some
12 poultry companies have, where they, you know --

13 MS. STOLFA: That's -- the poultry industry, as I
14 recall, decided a number of years ago that it didn't want to
15 have any residues. And because of its organization and its
16 integral -- that it's integrated -- its vertical
17 integration, it was able to say, hey, we're not going to
18 have this problem because we don't need it, and took certain
19 steps including their own controls and their own testing
20 programs in certain cases. I remember when some stuff was
21 going on in Virginia with a laboratory that was just

1 developing there, that was going to test -- oh, I think they
2 were going to test both feed and there was probably some
3 tissue testing also. That was particularly facilitated by
4 the organization of the poultry industry.

5 No, other people don't do the same things.

6 MS. FOREMAN: But let me understand. The poultry
7 industry has in fact instituted a HACCP system for --

8 MS. MUCKLOW: No. Larger companies have a system
9 where they test every house that processes, about ten days
10 before it processes. They take tissue samples, kidneys and
11 fat, and test for compounds, pesticides, PCBs, antibiotics,
12 everything. So those birds have to pass the test before
13 they're allowed to process.

14 MS. FOREMAN: Is that -- but it's only the larger
15 companies that do that?

16 MS. MUCKLOW: That's my understanding. You see,
17 you've got to support quite a bit of equipment.

18 MS. FOREMAN: Is it some MOU with --

19 MS. MUCKLOW: With the government. The
20 government --

21 MS. FOREMAN: -- between those companies and the

1 government?

2 MS. MUCKLOW: Yes. And the government still does
3 random sampling in the plants. That's not changed. But
4 this is just a way to avoid residues for integrated
5 companies.

6 MS. FOREMAN: As -- supposed to be with young
7 animals, wouldn't it? You wouldn't want to spend --

8 MS. MUCKLOW: Yes. And we're talking about a lot
9 of equipment and personnel to run these tests. So smaller
10 poultry companies -- I mean, they couldn't support that lab.

11 MS. STOLFA: There may be cooperative labs some
12 places. I don't know. But I do know that the practice --
13 it's been a long time since we've had residue problems with
14 poultry, and they tend to be true, unforeseen hazards like
15 the stuff that was in the clay.

16 And I think also that you need to -- we have some
17 slightly different methods that we apply in situations where
18 a flock is considered to be uniformly raised. And so we do
19 composite residue sampling for poultry. You know, there are
20 little things, and we can put a bunch of them together, and
21 then only if you have a result that's -- that indicates

1 problems, do you go back to -- I guess there's some
2 potential for that eventually in the swine industry, and we
3 may do some things that we now --

4 MR. JAN: It could be done in feedlot situations.

5 MS. STOLFA: It could be done in feedlots. It
6 certainly could.

7 MR. JAN: And in fact, now in FSIS's residue
8 program, if there's a violator -- or they used to at least
9 have the option of, if they're sending a bunch in, send,
10 like, five or so out of a lot. If they're all the same, get
11 those tested. If they're cleared, then they can do the rest
12 without testing. But I'd like to just say one thing here,
13 that the topic here or our title of our discussion should be
14 residue control in a HACCP environment.

15 And I don't see how these six questions really
16 relate to that directly. I know they relate to a meeting
17 that's coming up that's supposed to address that. But I
18 would like to say that with FSIS's past performance in
19 testing and the residue-control programs, that the residue
20 problem is very low.

21 We've got very low incidence. So that means that

1 if we are going to use testing to control it further, we're
2 going to have to do those three thousand samples. So I
3 think we need to look at HACCP and let's apply HACCP
4 principles. And those things need to be somehow moved down
5 to the producer and not -- you can't ask the packer, just as
6 you can't ask FSIS or the taxpayer, to fund all these tests
7 for all these things that could happen.

8 I think we are at a point where the testing is
9 throwing good money -- I mean, just to test everything at
10 the high level that we have to do is really throwing a lot
11 of money. So I think we need to look about recommending
12 that HACCP principles are applied down the chain -- or up
13 the chain, I guess. That would be upstream to some kind of
14 control.

15 Now, that could be done with some -- it would be
16 easier to be done in, like, the chicken things where you
17 have them all -- big operations. You can do it in the
18 larger swine operations and the feedlots. But there are a
19 lot of livestock and a lot of swine, and I don't think so
20 many chickens, maybe some turkeys, that are produced by
21 small producers. And they need I think to have some way --

1 and I am not in favor of more regulation. But maybe it's
2 time to look at regulation outside of FSIS and in another
3 USDA agency.

4 And one would be to take these drugs away from the
5 feed stores that every small producer -- and he has the
6 right by law to treat his own animals. And I think a new
7 philosophy has to be looked at. These animals that are
8 going to be food are not their animals. They are only the
9 caretakers, and they are food.

10 And so to say they can practice veterinary
11 medicine where they have no training, just because they saw
12 grandpa use something in a white -- or gave a shot and it
13 made things better, now they're -- we need to look at
14 somebody having -- that is responsible, a veterinarian if
15 it's a drug for treating an animal, where he's got the
16 training or he or she has the training, the knowledge, the
17 expertise. They know how to use the drugs, they know the
18 deals and they have a license that they stand to lose if
19 they abuse that. Where a farmer just can go down to a feed
20 store and get what he wants.

21 And I know when I was in practice, there was a

1 feed store operator that would tell the farmers that he was
2 the next best thing to a veterinarian because he applied for
3 vet school. He didn't get accepted, but he applied for vet
4 school. And so he said that he was nearly as good as a
5 veterinarian. So he was prescribing, diagnosing, all those
6 kind of things illegally.

7 I don't know how much that goes on. Another
8 example is, we had a client that had a sick animal called
9 out to have a look at. And I don't remember now whether it
10 was pneumonia or coughing or whatever it was. And we asked
11 him, you know, did you give it anything, you know, so we'd
12 come prepared what to go for. He said, well, yeah, I gave
13 it 30 cc of regular vaccine. Well, so why did you do that?
14 Well, that's all I had.

15 So if you have that kind of small -- and you make
16 all that available through the feed stores, then you're
17 really not going to get there. So I think that maybe this
18 committee -- or it ought to go to Dan Glickman and down to
19 some of the other agencies, because I think USDA regulates
20 all the animal drugs.

21 MS. FOREMAN: No. FDA does.

1 MR. JAN: No, no, FDA does human drugs. USDA does

2 --

3 MS. FOREMAN: The Center for Veterinary Medicine.

4 MR. JAN: Oh, the Center for Veterinary Medicine.

5 That's right. That's right.

6 MS. FOREMAN: As a matter of fact, I think you've
7 come up with something important. And I would ask if
8 perhaps we could start by saying that we clearly need some
9 sort of coherent system for handling a process that has
10 grown like Topsy. And perhaps the President's Food Safety
11 Council might address this.

12 They want to get into residues, I believe, and
13 come up with a rationalized system so that you don't have
14 this where FSIS -- you know, somebody else sets the
15 tolerance. FDA sets tolerance. CVM approves the drugs.
16 FSIS checks for them, but FDA has to go on the farm if you
17 find the violation. FSIS has no authority to go back on the
18 farm to get it, and it's -- you know, and APHIS has some
19 responsibility for animal health. So you've got all these
20 agencies crossing over. If FDA goes on somebody's property,
21 it is to investigate a violation and a criminal action is

1 possible. So nobody wants FDA out there.

2 So is there any disagreement that we might suggest
3 that a first step in this process would be for the -- all
4 the involved agencies, the two departments -- I think EPA is
5 involved here as well, isn't it?

6 MS. HALL: I think what we are talking about,
7 sorry, is that the control of veterinary medicine should be
8 in the hands of the veterinarian. And that's kind of what
9 we're asking for.

10 MS. FOREMAN: Well, I was going to take it back
11 one step and say -- I mean, that would clearly be one of
12 them -- but that you have some issues here that can't be
13 addressed by FSIS, as Rosemary has pointed out and Lee has
14 pointed out, that we perhaps want to look at the President's
15 Food Safety Council or even, maybe, have the National
16 Academy of Sciences make some recommendations about how you
17 rationalize the responsibilities in a process that has never
18 been rational. Has anybody got problems with starting
19 there?

20 MS. MUCKLOW: No, I haven't a problem with that.
21 I'd like my esteemed friend to tell you about the request

1 that he drafted, and I agreed and signed on to the letter,
2 to FSIS that we are still waiting for an answer on about how
3 we deal -- the sample number. Do you want to tell us about
4 that?

5 MS. FOREMAN: Wait a minute, is this about
6 sampling? Is this --

7 MS. MUCKLOW: No, this is about finding violative
8 residues.

9 MS. FOREMAN: Could we -- just before we go there,
10 could we address under this general rubric here? We need to
11 have some improved control over veterinary drugs. The MOU
12 arrangement that the large poultry companies have might be
13 one model to be examined. And now we could go --

14 MS. MUCKLOW: And an interagency model needs to be
15 developed probably for the large animals.

16 MS. RICHARDSON: And they do have -- well, at
17 least when I was at Labor, there was an interagency
18 agreement between Labor, HHS and EPA on pesticides, because
19 when I was looking at grapefruits and oranges, OSHA did part
20 of it. EPA did the other part. And HHS was involved. So I
21 mean, there is a model. And with blood-borne diseases, they

1 also have an interagency consult and regs.

2 MS. FOREMAN: One of the glories of the
3 President's Food Safety Council is that it is one level
4 higher than interagency groups which sometimes -- and this
5 is one of those times -- where each agency sits on its
6 jurisdiction and basically doesn't move.

7 MS. RICHARDSON: Or if it's something they don't
8 want to do, everybody keeps --

9 MS. FOREMAN: Well, that's probably more common.
10 Everybody bounces it around.

11 MS. STOLFA: We have a rather longstanding MOU
12 that includes all of the agencies that have some
13 jurisdiction.

14 MS. FOREMAN: But nobody wants to spend any
15 money --

16 MS. STOLFA: Well, some people --

17 MS. FOREMAN: -- or give up any legislative --

18 MS. STOLFA: Well, nobody -- there have been no
19 legislative changes as a result of the MOU. You can be sure
20 of that. We are generally thought of as the enforcement arm
21 or, you know, in more common terms, verification arm. See,

1 FDA doesn't have really independent authority that they
2 apply to livestock which is brought to slaughter. We do
3 that.

4 MS. MUCKLOW: But they go back to the producer.

5 MS. STOLFA: Oh, absolutely. And that is how we
6 get our repeat violator list. They verify it.

7 MS. MUCKLOW: And they prosecute.

8 MS. FOREMAN: Which means everybody views them as
9 the enemy and the cop. So it's -- that's why I think until
10 we find some --

11 MS. HALL: There has to be an admitted cop. I
12 mean, somebody has to be there.

13 MS. FOREMAN: Yes, but --

14 MR. JAN: The thing about the cop situation, if
15 you rely on that alone, how many of us speed every day
16 because of the benefits that we perceive on speeding and the
17 risk of getting caught and then the penalty you pay for
18 getting caught is, well, I don't like to pay for it. I --
19 got away from it.

20 So if you don't move it to a more proactive thing
21 rather than to just a reaction to getting caught -- I think

1 we need to try to somehow get this focus on the proactive.
2 And part of -- and we've got -- FSIS now has a food-animal
3 production deal, that new area, and we've got APHIS and all
4 these that we can -- we could try to get it. And there are
5 programs out there that are voluntary programs that if we --
6 that need to get addressed, these issues, to get them in a
7 HACCP mode.

8 MS. MUCKLOW: Well, Lee, this is the --

9 MS. FOREMAN: Would it be reasonable to say that
10 the large grower producers have developed a model that's
11 acted on through an MOU? Perhaps we could have some efforts
12 to establish models for HACCP/proactive action that are more
13 appropriate for smaller producers?

14 MR. JAN: There is a little difference, I think --
15 and I may be wrong, but I think the broader people, they're
16 integrated. So they kind of own the poultry from start to
17 finish. Cattle producers that go to a feedlot, they don't
18 slaughter, so they can slip that over here.

19 They don't have quite the same incentive. And
20 they want to -- they want to produce a uniform-sized animal
21 to their slaughter facility that will purchase it at the

1 slaughter facility. And if it takes drugs to do that and if
2 they can use it -- and they -- and I know that they can find
3 drugs that we can't test for, or they know that FSIS can't
4 afford to test for, or isn't testing for.

5 Spectam (phonetic) was a drug that a lot of
6 producers used, and probably still do, that wouldn't be
7 picked up on a stock test. And there are a lot of producers
8 that say, I can use this drug and I know you'll never catch
9 me. And they're wise to that.

10 So that's why if we can go to where the producer
11 has to, or is encouraged to -- and I hate to get regulatory,
12 but maybe pushed back down from the plant that they asked
13 for this, they get some -- just have a -- maybe an MOU or a
14 requirement, a specification that you have documentation of
15 drug use and it's only used under approval of the
16 veterinarian and withdrawal times are observed and all those
17 things, and only using approved drugs, so that -- and I'm
18 speaking of drugs. There are other things, too. The same
19 thing would be for pesticides, application of pesticides or
20 wormicides or whatever else they use.

21 And some of those, it wouldn't be done on the

1 veterinary deal, but pesticides, for example, a pesticide
2 applicator's license be required -- something that people
3 have at risk that if they sign off on and say, look, we
4 follow the rules in this herd and if we get caught, we know
5 we are going to lose our license and we can't do -- we'll
6 lose a livelihood rather than losing, you know --

7 MS. FOREMAN: So you just want a flat statement
8 that we've got to have a better way to, number one, regulate
9 the veterinary drugs so they're not available.

10 MR. JAN: Veterinary drugs and other chemicals
11 used on animals, I would say.

12 MS. FOREMAN: Okay. Can you get that, Mike, so
13 we've got a specific about that.

14 MS. HALL: The poultry is fairly easy because all
15 of the houses are on a ranch. You know exactly what you're
16 going to process, what day you're going to process them,
17 that kind of thing. And when you are talking about cattle,
18 you know, you bring them all in from different places. It's
19 not the same at all.

20 MS. MUCKLOW: Yes, worse yet, the problem is not
21 the feedlot cattle. You're going to find that feedlot

1 owners are really fairly responsible because they have a
2 huge amount of dollars at risk if they have 25,000 or 50,000
3 head of cattle.

4 MS. HALL: And they have a veterinarian.

5 MS. MUCKLOW: And they have a veterinarian. And
6 they have a hospital pen, and they have records. And they
7 do a lot that they keep good records on. And it's probably
8 more than their livelihood is worth to have unlawful drugs
9 like phenylbutazone sitting on the shelf there because they
10 shouldn't be using them.

11 The problem you have is the owner of a few
12 animals, the owner of cows and they give birth to little boy
13 calves called bob veals. And they need to move them out.
14 And they're not standing up quite like they should. And
15 let's give them a little help. Let's give them a shot of
16 something. Who's ever going to know? And off they go to
17 market. And if he really wants to hide the trail, he can
18 sell them to a dealer who then peddles them around. And he
19 knows where there's a soft veterinarian and how he's going
20 to get them through the system without them being tested.

21 The problem livestock we have come in very small

1 numbers. They don't come in flocks or herds or feedlot
2 cattle. They come in very small numbers, in -- they'll come
3 through a market. And the guy that's going to move them is
4 going to be somebody who's smart enough to know he's got to
5 cover his track.

6 Dr. Schultz at Taylor Packing Company, has done a
7 very interesting and helpful job in the last year. He has
8 written a paper on it. He has said we need to look at
9 different criteria for testing these livestock. We
10 shouldn't just judge them on antemortem inspection. We
11 should have other criteria that we look at to determine.
12 And that would be injection sites and other things when the
13 animal is already dead and hanging up in the slaughterhouse.
14 Those thoughts have been incorporated and accepted by the
15 Agency, and they have been significant in helping to improve
16 the residue situation.

17 But then the packer becomes the bad guy. And the
18 guy who sold that animal in and who did those things to that
19 animal is lost somewhere out there in the system. There is
20 a burden on that packer to make sure that he is not
21 contributing to shielding the producer who has wrongfully

1 entered that animal into the food supply.

2 And Mark and I have spent a year working with an
3 interagency group to which people from FSIS and CBM and
4 other agencies have participated in trying to figure out
5 some of the ways to resolve these issues. There is a lot of
6 reluctance out there by -- especially by people who protect
7 those who are wrongfully using this system to put an animal
8 with drug residues into the system and think he can hide in
9 the system.

10 We think we've made some progress. I would like
11 you as part of what you're hearing tonight -- Mark is better
12 at describing this than I am -- to talk about the proposal
13 that we have made to FSIS to change the way in which they
14 decide when somebody comes off the violator list.

15 Another piece of that puzzle is that we have asked that
16 that violator list be made available to the packers, because
17 if they, indeed, know the name and address, even if Joe Blow
18 has his sister, Helen Blow, sell the animal instead of him,
19 we can begin to identify those people, because Helen Blow's
20 only going to do it once and she's going to be on the
21 violator list, too.

1 It takes time to do this. But at least the first
2 step should be the publication of that violator list by the
3 Agency because these are people that have been clearly put
4 on notice in a certified letter from the Food and Drug
5 Administration that they have violated the Federal Food,
6 Drug and Cosmetic Act.

7 MS. FOREMAN: Is there any reason not to do that,
8 Pat?

9 MS. STOLFA: I don't think so.

10 MS. FOREMAN: Okay.

11 MS. STOLFA: Because, as I say --

12 MS. MUCKLOW: But it hasn't been done. We've been
13 asking for it for a year.

14 MS. FOREMAN: We are willing to make some
15 suggestions.

16 MS. MUCKLOW: Good.

17 MS. FOREMAN: Look, Mark, how long does it -- we
18 are now one hour into our two-hour --

19 MS. MUCKLOW: Please come and sit here and tell
20 us.

21 MS. FOREMAN: Now, wait a minute, Rosemary.

1 MR. DOPP: I'm waiting for an invitation.

2 MS. FOREMAN: Thank you. We have used one hour of
3 a two-hour period. We have not ordinarily in these
4 meetings, since I've been a member of the committee, had
5 people who are not members of the committee come sit at the
6 table and participate in the discussion. I'm prepared to
7 have you make a short presentation of this.

8 I'm really -- you'd have to overcome my objection
9 to have somebody who is not a member of the committee
10 participate actively in a discussion in the subcommittee. I
11 can be voted down on that, but I just want you to know we're
12 setting a precedent if we do that. And it's a precedent you
13 might not like the next time when I show up with GATT. Does
14 anybody object to having Mark talk a few minutes about this?

15 MS. HALL: I object to it.

16 MS. FOREMAN: I beg your pardon?

17 MS. HALL: I object to it.

18 MS. FOREMAN: Okay. I just want you to understand
19 that precedents are precedents. And if you're going to come
20 have somebody participate as a member of the subcommittee,
21 it's not something we've done before. It does have some

1 implications. When you do it, you might find the next time
2 it's done in a way that you don't like.

3 MR. DOPP: Perhaps it would be preferable if I
4 declined the invitation under the circumstances.

5 MS. FOREMAN: I would be more than happy to have
6 you share in a brief -- and I really don't want to use up a
7 lot of time talking about it. My concern is having you
8 participate as a member of the subcommittee.

9 MR. DOPP: I understand your concern completely.
10 And that's why I'm suggesting, perhaps it would be prudent
11 that I decline the invitation so that the precedent not be
12 established. Rosemary has done a very adequate job of
13 explaining what our priorities are.

14 MS. HALL: Thank you for your consideration.

15 MS. FOREMAN: I didn't hear you, Cheryl.

16 MS. HALL: I told him, thank you -- thanked him
17 for his consideration.

18 MS. FOREMAN: Thank you.

19 MS. RICHARDSON: And we also -- there is an
20 opportunity for public comment tomorrow.

21 MS. FOREMAN: Yes.

1 MS. RICHARDSON: So certainly that would be a
2 venue that he could share.

3 MS. FOREMAN: There is also a public meeting
4 coming up where I assume most of these issues will get
5 discussed.

6 MR. JAN: I would like to just say a couple of
7 things. When you're talking about participating in our
8 meeting, you're talking about committee members
9 participating in the subcommittee, because last time, we had
10 members that were not members of this committee participate
11 in our committee.

12 MS. FOREMAN: All right. I'm talking about
13 members of the Meat and Poultry Inspection Advisory
14 Committee --

15 MR. JAN: Okay.

16 MS. FOREMAN: -- as opposed to people who aren't
17 members.

18 MR. JAN: Okay. Let me go on then so we can -- I
19 would like to kind of build on this.

20 MS. HALL: One point on this real quickly. I
21 think it's admirable that people come from other

1 subcommittees when they're through with theirs, to our
2 subcommittee. But I would appreciate their sitting in the
3 audience and listening rather than --

4 MS. FOREMAN: I think we can take that up in the
5 full committee.

6 MS. HALL: -- rather than strongly trying to run
7 the meeting. There are times available during the full
8 committee meeting when they can make any comment they'd like
9 to. We have something to accomplish in our subcommittee and
10 we don't need other people disrupting it. And I think
11 that's the approach we should take from this point forward.

12 MR. JAN: If we can -- if I can build on -- before
13 we got into this, on what she was talking about. And
14 Rosemary is exactly right, that a majority of the residue
15 problems are going to be from the minority of the producers
16 -- I mean, just very small. They don't have the at-risk
17 like the feedlots. They don't have the feedlot
18 veterinarians. They feel that if they can salvage an animal
19 without using -- paying for veterinary medical care and all
20 that, they'll do that.

21 So I think that, you know, if we would urge the

1 HACCP approach overall, but then focus the sampling by FSIS
2 on those that are the -- come from the small producers.
3 They go through feed -- I mean, they go through auctions.
4 And there may be a truckload of them. And you can't test
5 that truckload. You have to -- but you view it then -- take
6 that 3,000 -- or to get closer to that 99 percent, you might
7 be able to pick up more of those violators and identify more
8 of those producers that violate.

9 And then when they start getting identified and
10 enough of them get identified -- I mean, it's the same as
11 the cop situation. If you have -- and you know there's a
12 cop out there, people are going to start stopping or slowing
13 down. But if you rarely pick up because you're testing the
14 wrong animals, then it's going to be a rarity that you're
15 going to catch that violator and you're not going to have
16 very many on that list. So that's where I think we ought to
17 focus.

18 MS. FOREMAN: If we've talked about risk
19 assessment, we should have a risk management system that
20 concentrates in those areas where the violations are most
21 common. That seems like a no-brainer.

1 MR. JAN: And I guess I'd like to say one other
2 thing, at least for the record -- that we don't get into a
3 Supreme Beef situation with slaughterers by expecting the
4 slaughter plants to be responsible if they find a residue
5 violator or if FSIS has found a residue violator.

6 Now, someone -- right now -- and it makes -- it's
7 absolutely correct if there's a residue, a violative residue
8 in a tissue, that tissue is condemned and doesn't go
9 anywhere. But to penalize the producer,
10 and by saying, well, this animal that you slaughtered had a
11 residue, then we're going to condemn the whole carcass --
12 and this carcass may already be owned by that slaughterer
13 and you have no control. And so we need to, I think, be
14 careful that the responsibility goes where the problem is
15 being incurred. And that's at the producer level.

16 MS. FOREMAN: Well, let's tease that out a little
17 bit because if the -- right now, if we do the testing and if
18 it's an enforcement testing, it's a test and hold, right?
19 But where they're just doing the sampling, by the time the
20 sample --

21 MR. JAN: It's gone.

1 MS. FOREMAN: -- the sample comes back, it's gone,
2 so -- and the action is taken back against the producer. Is
3 that right, Pat?

4 MR. JAN: Yes. That's correct. That's what's
5 happening now. I just didn't want to get into the situation
6 where we move this and say, okay, so now it's the plant's
7 responsibility. It's the plant's responsibility, I think,
8 as far as, if there's a violation, they need to address it
9 as either an unforeseen hazard or whatever in the HACCP plan
10 and then do what it takes, but not necessarily to hold --
11 well, like, say, three strikes and you have to close or
12 something.

13 MS. FOREMAN: I think it is the Agency's intention
14 that some -- that slaughter houses should assume that
15 residues are a hazard reasonably likely to occur. So --

16 MR. JAN: I would agree with that. And those that
17 are taking those high-risk animals, I think they should
18 address that situation. And then -- but what I'm saying is,
19 I'm concerned -- or I want to be sure that we don't end up
20 and say that even if you address it in your HACCP plan and
21 you're doing the corrective action, you're doing whatever it

1 takes, we don't come in and say, okay, you can now slaughter
2 three animals and there's residue -- either you found them
3 or we found them -- so we're going to withdraw your license
4 or withdraw your grant. I think we need to recognize that
5 they need to do everything they can, but they're not raising
6 those animals.

7 MS. FOREMAN: We can have that on the record. And
8 we should have on the record that I disagree with you. So
9 just --

10 MS. HALL: How close are we still -- I mean, we
11 must be a long ways from having a trace-back system for
12 these animals. Is that still a long ways --

13 MS. MUCKLOW: Yes, a long way. And that --

14 MS. FOREMAN: There is no legal authority. There
15 is no legal authority. Is there anybody here who objects to
16 having -- the Department having legal authority to trace
17 animals back? I sent that bill to the Congress exactly 20
18 years ago next month.

19 MR. JAN: There's a guy by the name of, I think
20 it's Weems that works for FSIS?

21 MS. STOLFA: Weems? I don't know about that.

1 MR. JAN: Something -- or Weimer, something of
2 that nature, that said at a meeting last week that there
3 will be a national identification system regulation within
4 three years. Now --

5 MS. FOREMAN: The Department does not have the
6 legal authority to do it. Do we want to say the Department
7 ought to get the legal authority to do trace-back?

8 MR. JAN: Yes, they could do that.

9 MS. FOREMAN: We could tell Gary Webbers
10 (phonetic). Actually, Gary's group has endorsed that
11 effort, haven't they? Haven't the cattlemen endorsed that?

12 MR. JAN: See, you've got the Bird (phonetic) --
13 or the -- yes, the Bird system now, which is a brucellosis
14 thing. And if they would just expand that, it's already in
15 place. But brucellosis is going to be controlled. And
16 actually, it's down to about -- Texas is about the only
17 state. And so as that's gone away and the states don't have
18 it, they're no longer able to trace that.

19 In Texas right now, we can trace. We can call the
20 Texas Animal Health Commission. Most animals are going to
21 have a tag for brucellosis, either for "vaccinate", or if

1 they were sold or tested. So -- but it won't be around very
2 long. So I don't know where that authority is and if that
3 could be -- you know, go to that authority rather than to
4 FSIS.

5 MS. FOREMAN: But USDA does not have that
6 authority nor does -- nobody has that authority at the
7 federal level right now. And in fact, the last time the
8 administration sent a bill to the Hill, it didn't include
9 that although it had previously. I don't know why it got
10 dropped out, but it did. So that's --

11 MR. ABADIR: The issue of tolerance is what we're
12 talking about now, different agencies here. Is the
13 tolerance area, clear tolerance levels being specified or
14 would it be strictly going back afterwards to debate which
15 tolerance would be taken?

16 MS. STOLFA: I think the responsibility on that is
17 clear, that FDA sets the tolerances for animal drugs. EPA
18 sets the tolerances for pesticides and other potential
19 environmental contaminants. And both of them, more so FDA,
20 have worked very hard over the past 15 years to sort of
21 round out that picture so that there are clear tolerances.

1 And EPA is engaging in a process of reviewing its tolerances
2 and action levels under F2PA or whatever the name of that
3 statute is.

4 So although we actually have authority, we have
5 never staffed our Agency to do that ourselves. We could do
6 what we have never chosen to do, but we don't have the
7 people that do the kind of risk assessments that are at the
8 foundation of tolerance setting. And we would not see the
9 need for us to do that as long as it's adequately done by
10 others people.

11 MS. HALL: Are you seeking the -- you're talking
12 about testing methods, et cetera -- are you seeking funding
13 for ARS or some help with new testing methods for residues?

14 MS. STOLFA: We do that. A lot of the work that
15 ARS does for us applies to methods development. We're
16 actually hoping to stimulate the private sector to go ahead
17 with some stuff that we think they can do. So it's kind
18 of -- there really is -- I mean, you need to understand,
19 there's not going to be enough federal money to do all the
20 things that need to be done. You know, there simply isn't.

21 And so why not -- and I would say there never has

1 been. You know, you may be comfortable with what we've
2 done, but we have never done as much as we could have, had
3 we had more money. We're sort of specifically out of the
4 methods development business ourselves. So we do our best
5 to stimulate other people to do a good job with it and get
6 on with it.

7 MS. FOREMAN: Is there a major area of ARS work
8 that ought to be done that would --

9 MS. STOLFA: ARS can certainly contribute to that.
10 But they do some methods development work. And I have not
11 looked closely enough at their research in recent years to
12 tell you sort of how it breaks out. And you know, it's
13 certainly worth investigating to see what you all think
14 about that.

15 MS. MUCKLOW: Pat, who is in the Office of Risk
16 Assessment --

17 MS. FOREMAN: You ought to have some there that
18 maybe -- going to -- exploring with ARS, more research into
19 methods development. Did I say that right? Is that where
20 we were going?

21 MS. MUCKLOW: Pat, isn't the Office of Risk

1 Assessment Cost Benefit Analysis within ERS or ARS?

2 MS. STOLFA: Neither. It's a separate office that
3 reports to the chief economist.

4 MS. MUCKLOW: Okay. And he 's not within ERS
5 then, Keith Collins? Okay. So he's in the Office of the
6 Chief Economist.

7 MS. STOLFA: Yes. He is the chief economist. He
8 has a small office. You know, he oversees, like, ERS, not
9 ARS. But he oversees --

10 MS. MUCKLOW: ERS, yeah.

11 MS. STOLFA: -- ERS. And he has those, you know,
12 the -- reports.

13 MS. MUCKLOW: I see. So it's an administrative
14 office that reports to him.

15 MS. STOLFA: Right.

16 MS. MUCKLOW: Okay.

17 MS. HALL: On one of the questions, question
18 number 2 -- I have big concerns with that, the international
19 residue testing, because of -- a lot of other countries have
20 drugs cleared for use in their countries, which do produce
21 residues and they are drugs that cannot be used in this

1 country. And there's not really an adequate system for
2 testing, I don't believe, for testing those things that are
3 imported under those other, foreign veterinary systems.

4 MS. STOLFA: It's certainly true that if we
5 haven't approved it, we don't have the method for it.

6 MS. FOREMAN: Well, then maybe our recommendation
7 about exploring with ARS, the methods development ought to
8 be -- include the notion that we ought to have methods for
9 drugs that are widely used in other countries and not
10 permitted.

11 MS. HALL: You see, how it looks to the veterinary
12 community here is that drugs that are not allowed to be used
13 here can be used in other countries. And we're just
14 supposed to accept that product as being fine and dandy.
15 That should not be. And there's a reason that it's not
16 approved for use here.

17 MS. FOREMAN: Yes. And I really -- actually, I
18 was going to ask if we could look a little bit, since we're
19 down to 45 minutes, at the questions that are asked here.
20 And there are -- 1 and 3 have some public questions about
21 them. And can we do it a little bit with number 2 and then

1 come back, maybe, and look at 1 and 3 for a few minutes,
2 too? I think --

3 MS. MUCKLOW: Could we focus on number 2 where
4 Codex is, on residues?

5 MS. STOLFA: Yes. And you could get more complete
6 advice from people other than me. Codex has made some
7 effort to sort of even out the playing field. The
8 difference is -- and by all means, you know, explore that
9 with Codex.

10 You know, what is the name of that committee that
11 -- it's an expert committee that looks at minimum residue
12 levels within the context of sanitary, phytosanitary
13 agreement where you can't really do things to other
14 countries -- take all this sort of with a grain of salt --
15 you're not supposed to do things to other countries that
16 you're not doing to yourself.

17 And there are ways for trying to equalize this
18 sort of thing that are specifically looking at residues.
19 And someone other than me should give you an up-to-date
20 report. There are efforts.

21 MS. FOREMAN: There are at least two issues here.

1 One is the use of drugs in other countries, that are not
2 allowed here. But there is the other issue of most other
3 countries not having residue control systems that are as
4 good as ours. And not having -- I don't know if our import
5 inspection is adequate to cover that. I just don't know.

6 MS. HALL: With as much regulation and control of
7 licensing and everything as we have here and we still have
8 problems with residues, you can imagine in other countries
9 how much --

10 MS. FOREMAN: I'm sorry, Donna?

11 MS. RICHARDSON: Well, picking up on what you're
12 talking about is looking at -- we want more control over the
13 import process so that we aren't accepting animals with
14 residue that would not be allowed here, much the same way
15 that you have drugs that are used in England and France and
16 that are approved there, but can't be used here because the
17 FDA hasn't approved them.

18 The second part is -- which goes on all the
19 time -- is that we send expired drugs and other things to
20 other countries that are not allowed to be used here. And
21 so, one, we should be looking at import to make sure that

1 the system here stays unadulterated, but then also doing the
2 right thing and looking at how we can prevent the export of
3 residue.

4 MS. FOREMAN: I think we're looking hard at
5 addressing -- we've been talking about how we address the
6 issues, making sure we are not getting residues in our --
7 how to improve the system that prevents domestic residues,
8 which would affect our export products.

9 MS. RICHARDSON: Right.

10 MS. STOLFA: Which eventually also affects our --
11 that's a two-way street. Remember, we are both a big
12 exporter and a big importer. And you know, that -- I can
13 remember in -- about the time that this report came out, at
14 the behest of the Congress we delisted six Central American
15 countries for inadequate residue programs, and we threatened
16 to delist more than half of the -- what was then still the
17 EC. And don't think they don't remember that. So as I say,
18 it cuts both ways on this. And you have to balance. You
19 have to think about both sides of the equation when you get
20 into the international stuff.

21 MS. FOREMAN: But no one objects to restrictions

1 if those are based on a risk assessment and it is being
2 applied with an even hand in terms of the risk management,
3 so that it's being applied domestically as well as
4 internationally. In other words, you know, the treaties
5 require evenhanded treatment. We can delist countries that
6 don't have meat inspection systems that come anywhere close
7 to meeting ours.

8 MS. MUCKLOW: Since Mr. Billy is the chairman of
9 Codex at the moment, I would suggest that we ask him at what
10 level or stage Codex is in rationalizing --

11 MS. FOREMAN: Good.

12 MS. MUCKLOW: -- this issue.

13 MS. FOREMAN: Why don't we, in fact, ask him if
14 during our report tomorrow he'll take a few minutes to do
15 that? Is that what you're suggesting?

16 MS. MUCKLOW: Uh-huh.

17 MS. FOREMAN: That we get a quick report from the
18 Codex chairman.

19 MS. HALL: When the Russian Treasury was being
20 worked on for poultry and a Russian veterinarian came and
21 visited poultry plants, came with his interpreter, the first

1 question he asked when he came in was, "Do you use
2 chloramphenicol?" Everybody went, wow.

3 MS. RICHARDSON: But this -- and this also relates
4 back to the first question about public participation in
5 designing the program, because getting back to pesticides,
6 which I worked on when I was at OSHA and that I have dealt
7 at FDA, is that when the public becomes educated about the
8 possible health effects, then the public says, no, I'm not
9 going to buy fruit that comes from a specific country,
10 because of the concerns about what they'll be exposed to.

11 And it will be the same thing, doing the same kind of
12 educational program when you talk about meat, that has been
13 done with apples and grapes and fruit. So you can't get
14 public participation until you educate the public about what
15 the possible problems are.

16 And certainly, I think the public in Iowa and
17 Texas and Arkansas that are also involved in the industry
18 may know more about the problem than the public in New York
19 City and Washington, D.C., and Baltimore. So I think you've
20 got to have a public education campaign just like we did
21 with fruits and like we've done now with apple juice and

1 other things.

2 MS. FOREMAN: Well, I would like to follow up on
3 that. The Food Marketing Institute has now got, I think, 25
4 years of their supermarket shoppers survey. And it is
5 shocking that the stress level about chemical residues and
6 food additives continues to be substantially higher than
7 public concern about pathogens. They didn't ask about
8 pathogens until just a few years ago, and that question got
9 subsumed under spoilage and other things. They started
10 asking it and the level of concern has -- about pathogens
11 has progressively gone up.

12 But the public's level of concern about residues
13 is very high. And anytime there is any sort of hint of a
14 scandal, there tends to be a very strong reaction because if
15 you get into Peter Sandman's outrage factors, that, you
16 know, the risk equals the hazard plus the outrage -- and
17 people react strongly to those things where they feel they
18 have no control. They can take the chicken home and cook
19 it. But I can't cook the residue out. And cancer, the
20 dread disease, gets raised in this context.

21 I've got to tell you, though, I think living in an

1 international -- living with the global marketplace and with
2 information systems that make instantaneous communication,
3 means that when there's a dioxin scare in Belgium, we will
4 have fallout here, and that it would be beneficial if we can
5 find some way to talk about residues in a way that over a
6 period of time educates the public.

7 And that we might be able to do that in a positive
8 way instead of in a response to some sort of contamination.

9 So that -- you know, I went and made a speech last week to
10 a couple of hundred women, all of them, as they like to
11 describe themselves, overeducated mothers who are staying
12 home to care for young children. And they were much less
13 concerned about Salmonella than they were about dioxin, and
14 less concerned about that than they were about stryoline
15 (phonetic) corn.

16 So I don't how to do that. But it sure seems to
17 me it would be worth pursuing. I agree.

18 MS. MUCKLOW: We have another problem, which was
19 the Swiss problem we had a year or so ago. We didn't have
20 any laboratories in this country, to the great embarrassment
21 of the government, to even test for what they said they

1 found in Switzerland. And that was a great embarrassment to
2 us internationally. They have to go to Canada to find a lab
3 to do that.

4 MS. FOREMAN: Was that the BDS?

5 MS. MUCKLOW: We're the greatest country in the
6 world and we had to go to our poor little neighbor to the
7 north, to get the tests run.

8 MR. JAN: That's why we're so good; we know where
9 to go.

10 MS. FOREMAN: I was thinking that it meant that
11 they were sending some money up there so they could afford
12 to buy some American feed.

13 MS. MUCKLOW: They don't buy a lot of our beef.

14 MS. FOREMAN: I don't know any way, though, to --
15 that starts off with how you encourage public participation,
16 and maybe instead of having just public meetings, that the
17 Department engage in some seminars among public health
18 people, APHA, nurses, other people who have at least some
19 basic information about science, and see if you can start
20 with a core that builds out.

21 MS. RICHARDSON: And I think one of the --

1 MS. FOREMAN: Excuse me. Science writers.

2 MS. RICHARDSON: But I also think one of the
3 untapped resources, because I'm looking at the number of
4 nutritionists that are working on women's health and
5 working on the cancer aspects now of, you know, is it fat,
6 you know, is it fiber, whatever, is using this growing group
7 of nutritionists --

8 MS. FOREMAN: A great idea.

9 MS. RICHARDSON: And a number of whom are -- you
10 know, they're working with diet groups, and some of the
11 physicians' practices now have them on, you know, their own
12 staff -- is tapping the nutritionists and using them for
13 that education as well. The educational system -- I don't
14 know. I don't know if they make people take home ec --

15 MS. FOREMAN: No.

16 MS. RICHARDSON: -- like they used to. When I was
17 in school, all the girls had to take home ec, all the boys
18 had to take shop. We couldn't take shop, they couldn't take
19 home ec. My godson in the seventh grade -- the boys had to
20 take home ec.

21 So in looking at whether or not the educational

1 system can also do some of this teaching -- you know, the
2 only reason people talk about Salmonella and stuff now is
3 because now you've got Clorox wipes versus Lysol saying, you
4 know, when you spill that chicken, just wipe it right up.
5 So they make it a marketing issue in doing the education.

6 MS. FOREMAN: Oh, the American way.

7 MS. RICHARDSON: Yes. And so I don't know if
8 there's a marketing factor that will help you with the
9 education.

10 MS. FOREMAN: Yes. But maybe somebody would like
11 to market little litmus strips that would turn red if you've
12 got a residue.

13 MS. RICHARDSON: I mean, the other -- the only
14 other thing --

15 MS. FOREMAN: You can use them first.

16 MS. RICHARDSON: -- is looking at, you know, what
17 Dr. Koop did when, in '84 or '85 when we were first talking
18 about HIV disease, and then it's like every household got a
19 little pamphlet that said, this is what HIV disease is, this
20 is what it isn't; this is how you protect yourself, this is
21 what you need to do. But it also means that you have to

1 have that commitment in order to spend that money and to do
2 that kind of educational campaign.

3 MS. FOREMAN: Yes. And I'm not sure that kind of
4 educational campaign will happen until there's some terrible
5 scandal about a residue, which we hope will never happen.
6 But I think the notion about nutritionists, because they're
7 -- the American Dietetic Association now has this corps of
8 people who are out talking about policy issues. And they
9 have lots of continuing education efforts, so -- seminars
10 for them and for public health people, state government
11 public health. Have they still got public health educators
12 that --

13 MS. RICHARDSON: FAHA.

14 MR. JAN: Yes. Another thing was the Food Safety
15 -- National Food Safety Month here in September is a
16 different focus.

17 MS. FOREMAN: Oh, that's a good idea.

18 MR. JAN: And so that could be -- and you know,
19 you have to be careful that people don't perceive this as
20 another big government scare thing.

21 MS. FOREMAN: Absolutely.

1 MR. JAN: And you know, there's going to be a
2 certain number of people just, like, they still smoke, that
3 says, you know, it's just a plot or something. And so you
4 have to be careful -- maybe target who this public is, like
5 you mentioned about the Public Health Association or public
6 health officials or nutrition people or people that -- but
7 if you just kind of go out and there's a whole big campaign,
8 I'm afraid that it might backfire and they'd say, oh, you're
9 just trying to scare us.

10 MS. FOREMAN: That's a good point.

11 MS. RICHARDSON: And you also have to have the
12 industry to buy into it because you don't want the industry
13 reacting to it like they did to Oprah and mad cow disease,
14 you know, them saying that we're trying to persuade people
15 not to eat meat.

16 MS. FOREMAN: Yes.

17 MR. JAN: Yes, it would have to be credible.

18 MS. FOREMAN: Yes. Well, I think we have the
19 advantage here with residues, is that we do have a pretty
20 good system that has kept them under control. And the time
21 to start that kind of process which you recognize here is

1 when you don't have a panic and you can develop rapport with
2 the people who have some training that makes them inclined
3 to accept and understand the issues here, so that if and
4 when the day comes, there are people out there who
5 understand, because once again, the fright factors with
6 residues are so much higher than they are with pathogens.
7 And people do -- all you have to do is remember Alar.

8 And the best line I ever read about that was in
9 *The Washington Post*, where the guy went and interviewed
10 people who had driven across town to the organic market to
11 buy organic apples so they could be sure to avoid getting
12 Alar apples. And about 40 percent of them confessed that
13 they'd driven across town without hooking their seat belts.

14 MS. MUCKLOW: Well, in my view, the veterinary
15 drug issue needs to be framed very much like the human drug
16 issue -- and that when you're sick, you go to the doctor and
17 the doctor checks your vital signs. And he decides you've
18 got some illness that he's got a medication that's going to
19 be able to help. And that's also what happens in the animal
20 business except that it isn't the doctor, a medical doctor.
21 It's a DVM who prescribes certain drugs to treat an animal

1 to make it better again.

2 And just about every family has a pet in this
3 country. They understand something about treating a sick
4 animal and they certainly understand about treating sick
5 children. And I think it can be put in that kind of frame
6 of reference.

7 Part of the responsibility is that just like you
8 know you've got to eat all the antibiotic pills if you have
9 an infection and you get treated with it, so there has to be
10 responsible use of veterinary drugs in this way, to make
11 sure that the livestock that we slaughter for food do not
12 contain them. We have got laws that say that those animals
13 should not enter the food supply. And everybody needs to
14 play their role, including the veterinarians who prescribe
15 those drugs.

16 I think it's a very plausible story to be told to
17 the American public if it's told in the right way.

18 MS. FOREMAN: And that way, you have a little bit
19 better control over the availability of some of those
20 veterinary drugs.

21 Are there other -- we haven't gotten down into

1 some of these, and we've got about 20 minutes.

2 MR. JAN: Well, I think number 5 could be answered
3 very quickly, just to kind of put that off on -- let's
4 continue -- or encourage the Food Safety Committee where we
5 really have interagency --

6 MS. FOREMAN: Or the President's Food Safety
7 Council. Kick this up to a level where there might be some
8 --

9 MR. JAN: Yes, get them involved --

10 MS. FOREMAN: -- some clout behind it.

11 MR. JAN: -- to -- right.

12 MS. RICHARDSON: And we made some of those points
13 when we first started.

14 MS. FOREMAN: Yes, yes. And I think we probably
15 addressed the small producer, packer and the contest --

16 MR. JAN: Yes, and maybe just for the opposite of
17 the way this question is asked, because this is talking
18 about how it impacts, well, we might say that it actually
19 impacts -- they have the biggest impact on the residue
20 problem. At least we have to keep that in mind, that
21 they -- how they impact residue product.

1 MS. FOREMAN: And to the extent that we want to
2 institute a HACCP system, that you want to be sure you have
3 a risk management system that focuses on those people who
4 are the problem, as opposed to just --

5 MR. JAN: Higher risk rather than problem, maybe.

6 MS. FOREMAN: Okay, higher risk. Yes.

7 MR. JAN: But the small producer would be higher
8 risk, the individual producer, mixed loads, all those --

9 MS. MUCKLOW: The dealers and --

10 MR. JAN: The dealers, yes, the livestock markets.

11 MS. FOREMAN: I want to tell you, when I was at
12 USDA, we were in the height of the sulfur residue issue.
13 And it was overwhelmingly people who bought their hogs at
14 auction. And part of the reason the hogs were at those
15 auctions was --

16 MS. HALL: They were hiding them.

17 MS. FOREMAN: -- they were hiding them. You're
18 exactly right. And because then FSQS couldn't go on the
19 farm and no one would let FDA go on the farm because they
20 assumed that they'd found a residue that would be subject to
21 legal action, we made a deal and everybody agreed that APHIS

1 would go and try to find why it was that people said, I'm
2 withdrawing, I'm following all the rules and I'm still
3 getting residues.

4 And we knew there was a problem, but we couldn't
5 find somebody to go to the farm that they would let come on
6 the farm. And interestingly, what we found was exactly
7 consistent with what you said earlier. We had a lot of
8 people who would run medicated feed through a feed mill, you
9 know, they'd do the mixing.

10 MS. MUCKLOW: They never cleaned the feed mill.

11 MS. FOREMAN: So then they'd take another batch of
12 feed they felt wasn't medicated. Well, it's sure medicated
13 enough to show up in the residue samples. So I'm assuming
14 that all these years later now, you know, that that isn't
15 this kind of problem. But it was a regular problem then.

16 MR. JAN: And also another risk -- and it depends
17 on how big the operation is -- particularly swine, if you
18 set a sick pen up and you have a trench drain where you
19 flush manure down, then you'll start medicating these pigs
20 down here because they recycle the food one more time, you
21 know, particularly if they don't have enough in their food -

1 - .

2 So those things can happen. I mean, I think the
3 big, sophisticated operations have figured that out. But a
4 lot of the smaller ones just don't have the scientific
5 background. You know, there are just a lot of reasons. So
6 that makes them higher risk, not necessarily a problem, but
7 a higher risk which, I guess, becomes the problem then.

8 MS. FOREMAN: Well, Pat, have you got -- has this
9 been helpful to you in planning your meeting and --

10 MS. STOLFA: Yes, very helpful.

11 MR. ABADIR: I have a comment I would like to say
12 here, which I have experience with , is countries that
13 produce an item or export it, they have the know-how of what
14 -- go into this product. So by going to the information
15 that you get from other countries, you would find a lot of
16 answers to some of the residues that are mostly coming,
17 especially something that was very clear to us when we were
18 dealing with seafood like salmon.

19 I'm talking about Iceland, Norway or Chile. They
20 have been through a lot of work here in testing. It seems
21 like that they have references to a lot of residues that

1 they know specifically where to go and what to find. Lamb,
2 for example, in New Zealand, I've done a lot of research on
3 that. So that's why I was telling you information that can
4 be utilized rather than working from New Zealand on it.

5 MS. FOREMAN: Who besides Canada ships live cattle
6 into -- live animals into the U.S. for food?

7 MS. STOLFA: Mexico.

8 MS. FOREMAN: Mexico? I thought we shut them
9 down.

10 MS. STOLFA: No. We let some relatively young
11 cattle come in and are finished on feedlots here.

12 MS. FOREMAN: Okay.

13 MS. MUCKLOW: They don't come in direct for
14 slaughter, do they?

15 MS. STOLFA: No.

16 MS. MUCKLOW: No?

17 MS. STOLFA: They're too young and they are
18 finished on feedlots. That's quite what the trade is at
19 this point.

20 MS. FOREMAN: So we do have a concern about trace-
21 back to a producer that does extend in a couple of cases

1 across international borders.

2 MS. STOLFA: Absolutely. We regularly get some --
3 both -- cows and, I think, calves from Canada. And there's
4 a couple of issues. They're producing compounds for use in,
5 for instance, veal calves that we don't. And now we're kind
6 of looking at a problem with veal calves that FDA has asked
7 us to look into. And a definite aspect of it is the -- what
8 about the Canadian trade and how are we going to handle
9 that. The same kind of letter that goes to a U.S. producer
10 we send to a Canadian producer if we find residue violation.

11 MS. FOREMAN: Can we trace back? If it goes
12 across the border, can we trace them there?

13 MS. MUCKLOW: Yes, because --

14 MS. FOREMAN: Hopeful, but --

15 MS. MUCKLOW: -- those animals that come in, if
16 they come direct from slaughter --

17 MS. FOREMAN: Right.

18 MS. MUCKLOW: -- are excluded from certain
19 inspections at the border.

20 MS. FOREMAN: Yes.

21 MS. MUCKLOW: They come direct to a slaughterhouse

1 and they're known exactly where they come from.

2 MS. FOREMAN: That might be a nontariff barrier.

3 MS. STOLFA: But many other countries have more
4 extensive and more consistent animal identification systems
5 than we do.

6 MS. HALL: What about something like Argentinean
7 corn beef? The animals are from Argentina, they're
8 slaughtered there. And it's canned and sent here. That's a
9 big import product, it's my understanding.

10 MS. STOLFA: It's only an import product, I think.
11 We don't make that here.

12 MS. HALL: No.

13 MS. MUCKLOW: The animals that come from Canada --

14 MS. HALL: So those are not the best animals --

15 MS. MUCKLOW: -- into our feedlots have to undergo
16 animal health inspection in this country --

17 MS. STOLFA: Oh, yes.

18 MS. MUCKLOW: -- but if they come direct to a
19 slaughter plant to be slaughtered within X number of days,
20 they are exempt from that because they're going through
21 federal inspection in the slaughter plant.

1 MS. STOLFA: In the case of countries that are
2 eligible to export to the U.S., the requirement is that they
3 have residue control systems that are equivalent to ours.
4 We do a rather -- I don't exactly know what they do in any
5 of their programs now, but I'm sure that the programs are
6 not less intensive than what we did do 15 years ago. We do
7 an extensive review of their residue control programs,
8 including their laws and regulations, their laboratories,
9 the methods they use, the results they get.

10 In the case of Argentina, we used to go around
11 the world 15 years ago and say, look, nobody can test for
12 everything. They tested every animal in Argentina that went
13 into corn beef. They just said that we're going to test
14 everything because it was essentially an American company
15 that owned -- or a couple of American companies that run
16 that operation. At the time, it was certainly big companies
17 --

18 MS. MUCKLOW: Another wrinkle that you might be
19 interested in too on that one is that is if an American
20 company is slaughtering those animals that are direct
21 shipped from Canada but is also producing for the school

1 lunch program, he has to have a totally segregated program
2 to make sure that only domestic animals go to school lunch.

3 MS. FOREMAN: Unless it's strawberries.

4 MS. HALL: And they have a veterinary health
5 certificate.

6 MS. FOREMAN: Yeah. Has anybody else got anything
7 to add?

8 MR. JAN: No other thing that I know.

9 MS. FOREMAN: Well, Pat says we've helped her a
10 little bit, so --

11 MS. STOLFA: Yes, thank you very much. I hope
12 some of you might be available on the 11th, either to
13 participate in the meeting or maybe to help us and
14 facilitate in some of the groups.

15 (Whereupon, at 8:45 a.m. on Tuesday, October 31,
16 2000, the meeting was concluded.)

17 //

18 //

19 //

20 //

21 //

- 1 //
- 2 //
- 3 //
- 4 //
- 5 //
- 6 //
- 7 //
- 8 //
- 9 //
- 10 //

CERTIFICATE OF REPORTER, TRANSCRIBER AND PROOFREADER

Residue Control in a HACCP Environment - Subcommittee 3
Name of Hearing or Event

Washington, D.C.
Place of Hearing

October 31, 2000
Date of Hearing

We, the undersigned, do hereby certify that the foregoing pages, numbers 1 through 56, inclusive, constitute the true, accurate and complete transcript prepared from the tapes and notes prepared and reported by Muriel Barclay, who was in attendance at the above-identified hearing, in accordance with the applicable provisions of the current USDA contract, and have verified the accuracy of the transcript (1) by preparing the typewritten transcript from the reporting or recording accomplished at the hearing and (2) by comparing the final proofed typewritten transcript against the recording tapes and/or notes accomplished at the hearing.

11/8/00
Date

Bonnie J. Niemann
Name and Signature of Transcriber
Heritage Reporting Corporation

11/21/00
Date

Lorenzo Jones
Name and Signature of Proofreader
Heritage Reporting Corporation

10/31/00

Heritage Reporting Corporation
(202) 628-4888

Date

Muriel Barclay
Name and Signature of Reporter
Heritage Reporting Corporation

Heritage Reporting Corporation
(202) 628-4888