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DEPARTMENT OF HEALTH AND HUMAN SERVICES
FOOD AND DRUG ADMINISTRATION
CENTER FOR FOOD SAFETY AND APPLIED NUTRITION

FDA PROPOSED REGULATION
CURRENT GOOD MANUFACTURING PRACTICES (CGMPs)
DIETARY INGREDIENTS AND DIETARY SUPPLEMENTS
PUBLIC STAKEHOLDER MEETING

Tuesday, May 6, 2003

9:00 a.m.

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C O N T E N T S

	<u>PAGE</u>
Welcome and Opening Remarks Mark Roh, Deputy Regional Director, FDA, Pacific Region Janet McDonald, Public Affairs Specialist	5
Background and Proposal Highlights Karen Strauss, Consumer Safety Officer	14
Proposed Production and Process Controls Sara Dent Acosta, Consumer Safety Officer	37
Proposed Laboratory Operations Steven Musser, Lead Scientist for Chemistry	51
Public Comment Period and Next Steps Karen Strauss, Consumer Safety Officer	59
Economic Impact Analysis Peter Vardon, Economist	64
Question and Answer Session Karen Strauss, Sara Dent Acosta, Steven Musser, Peter Vardon	84
Regulatory Flexibility Act and How to Comment Peter Vardon, Economist Marcia Madrigal, Small Business Representative	133
Small Business Questions on Proposed Requirements [None]	154
Breakout Session Summaries and Discussion Peter Vardon, Facilitating	156

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

2 MS. McDONALD: I think enough people are
3 here now so we can begin. There are still some
4 people waiting to go through security, but the
5 line, I understand, is not very long.

6 I'm Janet McDonald, Public Affairs
7 Specialist with the San Francisco District Office
8 of the Food and Drug Administration. And I have
9 the honor to introduce Mark Roh, who will be doing
10 the welcoming remarks, and then I will have the
11 dubious distinction of doing housekeeping chores
12 after Mark gives his welcoming remarks.

13 Mark Roh is the Deputy Regional Director
14 for the Pacific Region. He's had that position
15 since June of 2001. Prior to that, he was a
16 Special Assistant to the Regional Director for two
17 years. Before that he was the Small Business
18 Representative. And we do have a slight change in
19 the schedule today, because Marcia Madrigal, who is
20 the current Small Business Representative for the
21 Pacific Region is sick, and Mark will be doing her
22 presentation this afternoon, right after the lunch
23 break.

24 And then prior to being Small Business
25 Representative for the Pacific Region, Mark was a

1 consumer Safety Officer, which you may better know
2 as an FDA Investigator, with the San Francisco
3 District Office for about nine years.

4 So it's my pleasure to introduce Mark Roh.

5 [Applause.]

6 **Welcome and Opening Remarks**

7 MR. ROH: Thank you, Janet. I don't know
8 which one of these is on. Both of them?

9 I'm glad to have you clap, because all
10 your faces look so very long and serious. I know
11 this is a very important meeting, and I know that
12 many of you manufacturers and distributors are--how
13 do we say--reticent?--to look at these regulations.
14 There is a smile. That's very good.

15 [Laughter.]

16 But I want to welcome you to this meeting
17 today. As you know, this is the second, maybe the
18 third, public meeting we've had on these proposed
19 regulations for the manufacturing and packing and
20 holding of dietary supplements.

21 I think we all agree that it is important
22 that consumers have confidence in all the products
23 they buy, and that includes dietary supplements.
24 When the DSHEA was passed a couple of years ago, it
25 was passed with the great support of the dietary

1 supplement industry and, I believe, also with the
2 support of the consumers at that time. But we've
3 received a lot of complaints in the past eight
4 years about labeling and other problems associated
5 with dietary supplements, and hopefully these
6 regulations will help both you, the manufacturers
7 and the consumers alleviate those problems and
8 those complaints that we received in the past
9 couple years.

10 And I think by attending this meeting
11 you've taken the first big step into going in that
12 direction, because you have the commitment to the
13 consumer, and to make sure that the dietary
14 supplement products that you put out on the market
15 are not contaminated and are labeled
16 accurately--which is really what we all want for
17 all products.

18 And, really, that's what the proposed
19 regulation is designed to do. And, as you well
20 know, for the first time in history it will put
21 some minimum requirements on the production of
22 dietary supplements, and assure that the identify,
23 purity, quality, strength and composition of those
24 products is, indeed, what we purport that it should
25 be.

1 Now, if you've read the regulation--and I
2 understand that the proposal is not all out at the
3 table. Only part of the preamble is out there.
4 But I'm sure you've all read it. And it may
5 sound--and it may be fairly complicated to begin
6 with, but it's just--today we want to provide an
7 overview of the regulation. And remember, we're
8 still in the comment stage. So you do have an
9 opportunity to comment on these regulations.

10 We want to receive your comments, and we
11 want to know what you feel about it so they can be
12 included in the final rule, because you are part of
13 the decision--making process.

14 We know that this is a unique opportunity,
15 and we ask the FDA to pay attention to what you
16 have to say, and we ask you to work with us to get
17 these rules out and make them something that we can
18 all live with--both us as regulators, and you as
19 manufacturers and, of course, you also as consumers
20 and us as consumers. The comments that we provide
21 today orally should also be submitted in writing so
22 that they can be included in the final regulation
23 when it actually does come out.

24 As you know, if you've read the rule, we
25 set a 90--day comment period--90 days from the date

1 of publication. That 90 days is up on June 11th.
2 So you have to have your written comments in to the
3 docket by June 11th. And, please, I encourage you
4 to submit good, constructive comments that affect
5 the rule, that we can incorporate into the rule,
6 both for our benefit as well as yours.

7 There's going to be another meeting--in
8 fact, actually this Friday, a satellite
9 downlink--we're hosting another meeting here--the
10 satellite downlink, we're hosting it here. And I
11 was going to point out, Marcia Madrigal, who's in
12 the office--or who was supposed to be in the
13 audience today but she's home sick with 102 fever,
14 who is organizing the downlink, but we have some
15 information here that I can provide to you on the
16 table out there--is her business card and some
17 other information about the downlink. So if you
18 want to register for that downlink, you can check
19 that out.

20 I will not provide you the CFSAN website
21 for all this information. I'm sure it will be
22 provided on the slides--because it takes up the
23 whole length of the paper, so I won't read all the
24 letters. But the CFSAN staff--Center for Food
25 Safety and Applied Nutrition--that's gathered here

1 today, we look forward to trying to explain these
2 regulations to you, and listening to your comments
3 and listening to your feedback, so collectively we
4 can work to get these regulations out in a
5 meaningful time frame, as well as having meaningful
6 regulations that we can all work with, we can all
7 live with, that also serve the needs of you the
8 manufacturers, as well as the public.

9 So, with that, I thank you for coming.
10 Please be seated. Plenty of chairs up front. Just
11 like a church--you know, front is always empty.

12 So we'll get started. I'm going to turn
13 it back over to Janet so she can introduce
14 everybody. I'm going to come out and join you in
15 the audience so I can actually watch the slides,
16 because I haven't actually seen these slides from
17 back here.

18 And thank you very much for coming.
19 Welcome my colleagues from the Center for Food
20 Safety. And, Janet, please take over. And thank
21 you again for coming.

22 [Applause.]

23 MS. McDONALD: Well, there are some of the
24 standard announcements that you get at every
25 meeting. And the first one, of course, is to

1 please turn off your cell phones and pages. This
2 meeting is being recorded and a transcript of the
3 entire proceedings will be posted on FDA's website
4 within several weeks after the meeting. So we need
5 to make sure that the transcriber that's sitting in
6 the front of the room gets to capture all of the
7 information.

8 The restrooms--if you exit this
9 auditorium, there is a small ladies' room to your
10 immediate left, and a small men's room to your
11 immediate right, just beyond the two registration
12 tables. But the larger restrooms are located in
13 the main corridor that you all came through to get
14 here to the auditorium. So if you go through the
15 double doors, head straight to the end, turn left
16 and you will find the men's room first, on the
17 right, and then the ladies' room is a bit further
18 down the hallway, beyond the bank of elevators,
19 also on the right--hand side.

20 There is also a no food or drink policy.
21 You probably have already been a victim of the food
22 police that are outside the door. It's a very
23 strict rule for the General Services
24 Administration, so we really will try to impress
25 upon you to please abide by it. And this means not

1 only in the auditorium, but also in the immediate
2 area where the registration is.

3 There is a cafeteria on the fifth floor.
4 We will have a break in the morning session, and
5 there are two elevators inside this auditorium area
6 that go to the fifth floor. The cafeteria is on
7 the fifth floor, and it is in the South Tower. We
8 are in the North Tower. So if you follow the
9 corridor, head back towards the center of the
10 building, take a left and keep going across the
11 bridge that connects the two buildings, and you
12 will eventually come to the cafeteria. That will
13 be on your left--hand side.

14 I hope that you've all picked up all of
15 the handouts that are on the table outside. The
16 two colored ones are the agenda and the restaurant
17 list, respectively. We will have an hour break for
18 lunch. And you have a choice of either going up to
19 the fifth floor to the cafeteria, or going outside
20 the building on the Clay Street side, and if you
21 cross the street you will find the City Center
22 complex that has numerous types of restaurants;
23 everything from pizza to Italian, French,
24 McDonald's, Starbucks. You will certainly be able
25 to find something there, I think, that will appeal

1 to you.

2 The last restaurant that's listed on the
3 salmon--colored restaurant sheet is a few blocks
4 away. And I think that it might be tight if you
5 try to go there for lunch and get back here within
6 the hour's time. But that's up to you.

7 Now, if you do choose to leave the
8 building to go out for lunch, you will have to go
9 back to the main bank of elevators that you came up
10 on. You cannot use these elevators that are right
11 outside the auditorium. You'll have to go back
12 through the security entrance. And then when you
13 return you will have to come back through security
14 again. So I just wanted to make sure you know that
15 ahead of time.

16 Let me just see what else we need to
17 discuss here.

18 I want to say a few words about the
19 structure of the meeting. You do have the agenda.
20 We're going to be handing out cards. If you didn't
21 pick on the handout table, we will have a couple of
22 ushers in the audience that will be able to provide
23 you with four--by--six index cards for writing your
24 questions. And you might want to be doing that
25 throughout the various presentations.

1 Each of the speakers will be giving their
2 presentation, and then we'll have questions and
3 answers at the end, just before the lunch break.
4 So just so you remember what you wanted to ask, you
5 might want to be writing those questions throughout
6 the presentations. And then we will have people
7 collecting--if you would pass your questions to the
8 end of the aisle, we will have some FDA staffers
9 collecting those questions and delivering them to
10 the speakers at the podium.

11 After lunch, you'll get some more
12 instructions, but there will be a breakout session
13 this afternoon for about an hour and 15 minutes,
14 after some introductory remarks about commenting on
15 this proposed rule. And I would kind of like to
16 get a sense of how many people in the audience plan
17 to participate in the breakout sessions. If you
18 could just raise your hands, and give us--okay. So
19 we have a good number of you. Okay. Well, that's
20 going to help.

21 And then, just another reminder that when
22 we come to a point where any member of the audience
23 might have to use the microphone, whether it's to
24 clarify a question, or to speak this afternoon, we
25 are going to have to use the microphones that the

1 court reporter has brought. So, again, it's
2 important not to just get up there and pose your
3 question from the audience. We do have to wait
4 until we get a microphone in front of you to do
5 that.

6 So, with that, I am going to introduce our
7 first speaker. That will be Karen Strauss.

8 Karen is a Consumer Safety Officer in the
9 Division of Dietary Supplement Programs, Office of
10 Nutritional Products, Labeling and Dietary
11 Supplements, in the Center for Food Safety and
12 Applied Nutrition. That's back on the East Coast,
13 currently situated in College Park, Maryland.

14 Her work assignments include drafting
15 current good manufacturing practices proposed
16 regulations, she's a major architect of these
17 regulations that we're discussing today; and
18 working with the Food Advisory Committee working
19 groups on dietary supplements and regulatory issues
20 having to do with dietary supplements.

21 So, with that, I would like to welcome
22 Karen Strauss.

23 [Applause.]

24 **Background and Proposal Highlights**

25 MS. STRAUSS: Thank you, Janet.

1 What I want to do first is to introduce
2 the other panel members that are here with me: Sara
3 Dent Acosta is the Consumer Safety Officer for the
4 Los Angeles District, San Diego Resident Post.
5 She's worked with FDA since 1998, and has focused
6 her work on food inspections, including dietary
7 supplements manufacturers. During the summer of
8 1999, several of us who are working on the proposal
9 visited several dietary supplements manufacturing
10 firms, and some of them were in California. And
11 when we came to California, we met Sara. She went
12 with us. And then after that, she reviewed our
13 proposal and also has participated with us in our
14 presentation of the proposal on our outreach
15 visits. We really appreciated her efforts in the
16 past, and with being with us now.

17 Then Steve Musser is the lead scientist
18 for chemistry, Center for Food Safety and Applied
19 Nutrition, FDA, in College Park. He's also a chief
20 instrumentation and biophysics branch officer of
21 the Scientific Analysis and Support at CFSAN. He's
22 really responsible for developing analytical
23 methods for a number of CFSAN program areas,
24 including dietary supplements.

25 And then Peter Vardon is our Economist in

1 the Office of Scientific Analysis and Support in
2 CFSAN, FDA, and he's the primary economist on our
3 analysis of economic impacts of the rule. And he
4 will be giving some information on that part of the
5 proposal.

6 I want to start by first expanding on what
7 Mark said about the comment period, some of you may
8 know that there is, in FDA at the present time, at
9 least one request to extend the comment period, and
10 the agency is considering that. But we are
11 operating under the assumption that the comment
12 period will not be extended, until it actually
13 is--if, in fact, it is extended. And if there is
14 an extension, it would be published in the Federal
15 Register.

16 I want to first acknowledge, not by name,
17 but that were many, many individuals that
18 participated in the drafting of the proposal.
19 Chemists, microbiologists, people who know
20 manufacturing processes in the field--many, many
21 people in FDA, as well as those in industry; from
22 time to time I would call individuals and get some
23 insight into things, as well as on our site visits,
24 we gained a lot of insight into the kinds of
25 manufacturing practices that were currently being

1 used.

2 So what my presentation will cover this
3 morning are really an introduction to the rule.
4 I'll summarize--give you some background, that is
5 what is a CGMP designed to do and why it's needed.
6 We used stakeholder input--and I'll describe the
7 ways that we received input. I will summarize the
8 legal authority that we relied on for proposing the
9 rule, and then I'll highlight some of the
10 requirements. Sara Dent will give over view of the
11 production and process controls, and Steve Musser
12 will give an overview of the laboratory operations.

13 I want to start by hoping that you all
14 have read the proposed rule. It's a lengthy
15 document, I admit, and we would actually rather
16 that it not be so long but we, at the same time,
17 wanted it to be an explanation of why we proposed
18 certain requirements. And what I want you to know
19 is that this presentation in no way will give you
20 enough information about the proposed rule. You
21 really need to look at it and see how it will
22 impact on your business. And as you read it
23 through, if there is a particular requirement that
24 you really want more information about, to go back
25 into the preamble and look up that particular

1 requirement to see how we explained it. Because
2 we've attempted to interpret the why's of the
3 various requirements that we've proposed.

4 And so our role here this morning is to
5 clarify the meaning of particular requirements as
6 much as we can. However, there are some
7 requirements that we propose that give a
8 manufacturers some discretion in how they would
9 actually perform that requirement. And so for
10 those requirements where there is manufacturer's
11 discretion, those kinds of things would actually be
12 followed up with guidance documents, following any
13 final rule.

14 And we have encountered some questions in
15 our previous presentations where individuals have
16 asked for clarification on when we've given some
17 discretion, if a particular action that they're--a
18 manufacturer is currently doing would meet what is
19 proposed. And those are really hard to answer
20 because we are giving discretion, and those kinds
21 of things would be clarified in later guidance
22 documents.

23 Also, after Steve give his presentation, I
24 will come back and give--specify some particular
25 items that we've asked for comment about, and then

1 describe the next steps to get us to a final rule.

2 So what are CGMPs designed to do? Well,
3 consistent with the FDA's public health mission,
4 the CGMPs are intended to help protect consumers
5 from adulterated product; that is, product that is
6 contaminated. They're also intended to help
7 protect consumers from products that do not contain
8 what is claimed on the label. If it becomes final
9 as proposed, it would establish industry--wide
10 minimum standards that would ensure that dietary
11 ingredients and dietary supplements are
12 manufactured consistently, batch to batch, as to
13 their identity, purity, quality, strength and
14 composition.

15 Because dietary ingredients are included
16 in the DSHEA--the Dietary Supplement Health and
17 Education Act--within the definition of dietary
18 supplements, we have included dietary ingredients
19 in the CGMP proposal. It's important to note,
20 however, that the CGMPs will not ensure the safety
21 of a particular dietary ingredient, independent of
22 whether it's manufactured under current good
23 manufacturing practices, and it will not ensure
24 that the dietary supplement produces any claimed
25 effect. So the CGMP doesn't affect the safety of a

1 dietary ingredient, and it doesn't affect efficacy.

2 However under DSHEA--which amended the
3 Food, Drug and Cosmetic Act--manufacturers have an
4 essential and critical responsibility to
5 substantiate the safety and efficacy of the dietary
6 ingredients they use in manufacturing a product.
7 Also, the proposed requirements will not affect
8 other standards, such as organic standards.

9 So Congress saw a need for specific CGMPs
10 for dietary supplements by including them the
11 authorization for CGMPs for dietary supplements in
12 the DSHEA. They gave the Secretary of Health and
13 Human Services, and FDA, by delegation, the
14 explicitly and express authority to issue dietary
15 supplements CGMPs. And FDA has found manufacturing
16 problems that have been associated with product
17 recalls. And so it appears that there are
18 manufacturing problems that can be improved by
19 CGMPs.

20 We also learned of public support for
21 CGMPs by comments--public comments--at several
22 public meetings that we held. For example, the
23 strategic planning meeting to develop a ten--year
24 plan for dietary supplements urged the agency to
25 give high priority to developing a CGMP rule.

1 Then, also, industry demonstrated their
2 support by sending to us an outline of CGMPs--a
3 coalition of trade organizations and
4 manufacturers--and that was published as an advance
5 notice of proposed rulemaking in the late '90s.

6 In the preamble, we have given some
7 examples--it's not a comprehensive list--of product
8 recalls, and also there have been some independent
9 laboratory testing that's demonstrated the need
10 from CGMP. The kinds of things that we found in
11 inspection would be some poor sanitation that
12 resulted in bacterial contamination. There have
13 been examples of misidentification of dietary
14 ingredients--one, in particular, is especially of
15 concern: digitalis bonata was mistaken for plantain
16 and digitalis can produce some very harmful heart
17 effects.

18 We found super--potent selenium at 2 to 20
19 times what was claimed on the label. And at those
20 high levels, it can have adverse health effects.
21 And we found sub--potent folic acid; actually, the
22 dietary supplement contained 35 percent of what was
23 claimed on the label. And folic acid, it has a
24 well--known effect of preventing--or helping to
25 reduce neural tube defects; birth defects. And we

1 found dietary supplements were contaminated with
2 prescription drugs.

3 Consumers want assurance of product
4 quality. There are some consumer surveys that show
5 some things that consumers have told the surveyers;
6 for example, surveys show that only 37 percent of
7 consumers thought that some supplements were
8 adequately tested before marketing. A majority
9 said that there is not as much regulation as is
10 needed to make sure that supplements are pure and
11 dosages are consistent. And only about a third of
12 consumers were confident that products were
13 accurately labeled. And surveys of people over 50
14 years of age said that the Federal government
15 should review safety data and approved a product
16 before it's sold. So there are some concerns out
17 there by consumers.

18 We also are aware that industry has some
19 challenges with the kind of recalls and media
20 publicity, there has been some eroding of strength
21 of consumer confidence in the dietary supplements
22 they purchase. They have some safety concerns and
23 quality issues about some products. And there are
24 also some concerns about inaccurate or
25 unsubstantiated label claims. And if a final

1 regulation--if there is a final regulation as
2 proposed--as we propose it--we believe that there
3 will be enhanced consumer confidence in the dietary
4 supplements that they purchase.

5 Now I will go over some of the legal
6 authority that's cited authority for the proposal
7 as a whole, as well as some specific requirements
8 that we propose. It starts with Section 502(g) of
9 the Food, Drug and Cosmetic Act--and this was an
10 amendment that came through DSHEA. And the Act, as
11 I mentioned, gives explicitly authority to FDA to
12 propose the CGMP. And it further states that once
13 there's a final rule, if a product is manufactured
14 not in compliance with CGMPs it would be an
15 adulterated product, because it has not followed
16 the CGMPs.

17 Also, Section 401(g), Congress stated that
18 regulations were to be modeled after current good
19 manufacturing practice regulations for food. And
20 when Congress used the term "modeled after," we
21 wanted to get a sense for what that meant, as far
22 as giving us direction, so what we did is we went
23 to the dictionary and found that "model" means a
24 preliminary pattern. And so we've used the food
25 GMPs as a preliminary pattern in developing the

1 CGMP for dietary supplements. If Congress had
2 intended that as a food CGMP was the only CGMP that
3 dietary supplements were to be subject to, they
4 could have explicitly stated that; that they were
5 subject to food CGMPs.

6 So we've modeled it after food. And the
7 proposal is modeled after food in that it covers
8 some of the same practices relating to receiving,
9 inspecting, segregating, storing and distribution;
10 used many of the same sanitary practices that other
11 conventional food production, in order to produce a
12 product that's not adulterated.

13 However supplements have their own unique
14 set of requirements, as the result of their own
15 characteristics and hazards, because there are
16 different preparation methods, there are different
17 dosage forms, ingestion forms--different from
18 conventional foods. There are different product
19 processes to insure that they're not adulterated,
20 and that they're produced in the same way from
21 batch to batch.

22 The scope of legal authority also relies
23 on the same kinds of authority for determining when
24 food is adulterated in that section 402, and it
25 says that when a whole or a part of any product is

1 filthy or decomposed, or if it's otherwise unfit
2 for food, then it's adulterated. And section 403
3 describes when a product would be "misbranded."
4 This is also the section that gives authority for
5 nutrition label information and the supplement
6 facts panel.

7 And, in order to have an accurate label, a
8 product would need to have the identity of the
9 dietary ingredient, as well as the quantity. And
10 this indicates that some testing was necessary.

11 Then we also used section 701 and 704, and
12 these two sections give authority for requirements
13 for efficient enforcement. 701 gives the authority
14 for record--keeping, and we note that there are
15 record--keeping requirements for other
16 commodity--driven food CGMPs or manufacturing
17 regulations.

18 704 gives the agency authority to inspect
19 factories, warehouses and other establishments.
20 Then we've used section 361 of the Public Health
21 Service Act, and this section gives authority to
22 the agency to propose regulations and have final
23 regulations to prevent introduction, transmission
24 or spread of communicable diseases from one state
25 to another; and we're especially thinking of plant

1 and animal dietary ingredients that come from
2 natural sources that could have contamination with
3 soil, or animals or other--become contaminated
4 during handling and transportation.

5 So how was the proposal developed? What
6 did we consider? Well, as I mentioned before, we
7 considered the unique characteristics: how they're
8 manufactured. There are tablets, capsules, powders
9 liquids, versus canned, frozen. So there are
10 different processes there. And we looked at the
11 unique properties of dietary ingredients and
12 dietary supplements. For example, if you're going
13 to identify the difference between two conventional
14 foods, most often you can tell by just visually
15 looking at two green products--a green pea, a green
16 bean--you can really tell the difference by
17 looking. But if you have two white powders, you
18 can't tell the difference by looking. So, some
19 different kinds of identity tests would be needed.

20 Then we considered the desire for a clear,
21 enforceable regulation. On the one hand, we used
22 plain language techniques, which would--say, if we
23 took a paragraph from 110, the food GMP in it had
24 many, many requirements in a paragraph. What we
25 did, we would have a heading and bullet kind of

1 enumerations of those various requirements, being
2 much more plain, rather than bunching them in a
3 paragraph. And there's a trend in government to
4 have plain language in regulations, and that's one
5 of the techniques. So sometimes it looks like we
6 have a page and a half versus a paragraph, and it
7 really is not more there, it's just formatted
8 different.

9 And we wanted a clear, enforceable
10 regulation. You'll hear from Peter--and you know,
11 maybe, yourself--that many of those in industry are
12 small manufacturers, and some of them are actually
13 doing no CGMPs at all. So we wanted to strike the
14 right balance between enough detail so that the
15 firm that's not using any GMP can understand what
16 we're saying, but at the same time have performance
17 objectives that leave some flexibility and
18 discretion.

19 Then, lastly, we considered the estimated
20 cost and benefits, not only for the rule as a whole
21 but to look at what were more expensive
22 requirements, and trying to really consider the
23 cost and benefits.

24 We also looked at several different
25 documents. And with DSHEA came the establishment

1 of a White House Commission on Dietary Supplement
2 Labels. And they prepared a report in 1997, and
3 this commission supported CGMPs in two ways: one,
4 they encouraged industry and FDA to work together
5 to develop the regulations; and, secondly, they
6 endorse CGMP record--keeping as important in
7 substantiating dietary supplement labels.

8 There was a Food Advisory Working Group,
9 1998 and 1999, and I worked on that working group,
10 and the two topics there were identity--testing of
11 dietary ingredients and record--keeping. And that
12 report gave us some insights into those two topics.
13 Actually, the report contained much more detail
14 than would be appropriate for a rule, but they will
15 be no doubt used later as guidance documents, or as
16 the fodder for guidance documents.

17 Dietary supplement manufacturers were
18 visited by FDA in 1999. We visited eight different
19 firms, and really wanted to see what operations
20 were currently being used, as far as GMPs, and they
21 were very helpful to us. We also conducted small
22 business meetings, and these were looking at the
23 industry outline, and we wanted to get their input
24 as to what their concerns were about costs, based
25 on the requirements included in the industry

1 outline. And those also were in 1999.

2 Then, when we actually sat down to draft,
3 we started, as I mentioned, with the food CGMPs.
4 And we looked at other food commodities
5 manufacturing regulations. And those that we
6 looked at were low--acid canned food, the juice,
7 fish and fishery products and infant formula--both
8 existing and proposed. What we wanted to do was to
9 do some updating. The food GMP--the umbrella
10 GMP--is really pretty old, so we wanted to be sure
11 that it was scientifically accurate.

12 Then we also looked at the drug and device
13 GMP for organizational principles. And then,
14 lastly, once we looked at the food GMP, decided our
15 organization, we looked at the industry outline
16 that was submitted and published as the ANPRM--or
17 Advance Notice of Proposed Rule Making. USP has an
18 outline, and MNFA has an outline, and we looked at
19 these as well.

20 Well--this is a kind of schematic that
21 shows kind of how we approached this, and also
22 shows where there are some of the requirements that
23 we have. When we looked at the developing the
24 proposal we decided to come--start at the
25 door--warehouse door, and end at the warehouse

1 door: when the materials come in is where we start,
2 and where they're going out for distribution is
3 where we stopped. So we haven't included raw
4 agricultural commodities, and we have not included
5 retail.

6 Components--Sara will talk a little bit
7 more about these--but they include packaging,
8 labels--outside of the components. And then the
9 components are ingredients that are in the final
10 product--dietary ingredients and things that aren't
11 in the products but are there during the time
12 they're manufactured, like a solvent.

13 And ingredients must either be an approved
14 food additive or a graft food additive, or
15 self--graft. A dietary ingredient is not treated
16 that way. So--let's say that again. Anything
17 that's not a dietary ingredient, but stays in the
18 final product must either be an approved food
19 additive, a graft food additive, or a self--graft
20 by the manufacturer. We've received several
21 questions on that, so I want to just mention that
22 aright up front.

23 Then looking at--once things come into a
24 warehouse, they would need to be segregated so that
25 it wouldn't get mixed up from other things. The

1 manufacturers would have a formula or recipe for
2 producing that dietary supplement, and we call that
3 a "master manufacturing record"--kind of like a
4 recipe. And they would produce some bulk product.
5 Then you'll see above that there's "flexible
6 testing." And there are two prongs going from
7 flexible testing--and Steve will talk more about
8 this, as will Sara.

9 But to get a handle on cost and diminish
10 costs, we've proposed a flexible testing
11 requirement, where a manufacturer could choose to
12 test, based on some parameters that will be
13 discussed later, either finished product testing,
14 final product testing, or, if that's not possible,
15 then they could test incoming materials and
16 in--process materials. And the objective here is
17 to be sure that what is in that product and what's
18 on the label are consistent. So you need to know
19 what you're starting with and at the end that
20 material is still there in the quantity and that
21 it's not contaminated.

22 Then the product would be packaged and
23 distributed or shipped. And then we also have some
24 requirements proposed for consumer complaints, and
25 a consumer complaint would come back to the firm,

1 and then they would--it could impact anywhere along
2 the manufacturing process.

3 And then the records kind of underscore
4 the whole process. There are only certain records
5 that we've proposed in our rule, and I'll talk
6 about these in a minute.

7 Now, just some highlights. General
8 provisions would apply to domestic firms, as well
9 as foreign firms. And, clearly, FA does monitor
10 dietary supplement imports when a problem is
11 suspected and then tests them as needed. And also,
12 generally, when FDA establishes a final rule for a
13 product and a foreign manufacturers wants to bring
14 it into the country they're usually pretty good
15 about complying with whatever is necessary as far
16 as U.S. regulations are concerned. A dietary
17 supplement firm would also be required to comply
18 with other applicable statutory provisions that
19 would be required under the act related to
20 manufacturing, packaging or holding. For example,
21 a manufacturer produces a dietary supplement that
22 includes fish or fishery products, such as fish
23 oil, would have to comply with HACCP regulations as
24 required by Part 123, as well as these CGMP
25 provisions.

1 Other statutory provisions or regulations
2 may apply because of particular ingredients. There
3 are also some bioterrorism regulations that would
4 require registration, and these are proposed. And
5 if these become final, they would also be something
6 that a manufacturer would need to comply with.

7 So CGMPs would apply to activities
8 associated with manufacturing, packaging, holding
9 and distributing. A manufacturer would need to
10 comply with requirements applicable to the
11 operation that they're performing. A contractor
12 would need to comply with the applicable
13 requirements and a contracting firm responsible for
14 a contractor's performance is also--has a
15 responsibility. For example, if a manufacturer
16 contracts with a packager--labeler, that package
17 labeler would need to comply with the CGMPs, and it
18 would be the contractor's responsibility to see
19 that they comply. Neither one is off the hook, so
20 to speak.

21 Same with a distributor. The distributor
22 gets the products, you know, puts a label on it and
23 then distributes it, it would need to--the
24 distributor would need to ensure that what's on the
25 label is what's in the package, as well. How they

1 do that, we have not proposed a rule on, although
2 we may in a final rule provide more detail on that
3 to be sure that it's understood. But there is a
4 responsibility there.

5 We've proposed requirements for personnel.
6 And these model Part 110--the food umbrella CGMP.
7 Basically, they help prevent contamination. The
8 personnel would need to be qualified by training
9 and experience to perform their assigned duties.
10 The firm would need to institute disease control
11 and hygienic practices to ensure that an employee
12 doesn't contaminate a product. They would also be
13 required to assign qualified supervisors to oversee
14 implementation of the CGMPs.

15 The physical plant and environment--these
16 also really model Part 110--the food CGMP. And
17 they too are intended to help prevent
18 contamination. It deals with the design and
19 construction of the physical plant: ceilings,
20 floors, walls would need to be easily cleaned and
21 maintained. There needs to be separate areas to
22 prevent mix--up, and screening to keep out pests.

23 A manufacturer would need to keep the firm
24 in good maintenance and clean and sanitized as
25 necessary. Water that is used in the physical

1 plant, where it's used as an ingredient, or
2 component, or where--would, at minimum need to meet
3 the EPA drinking water requirements. That doesn't
4 mean that a firm couldn't use a more purified water
5 if they wanted, but this would be the quality that
6 would be required. And the aim here is really to
7 get at private wells. Those private wells would
8 also need to meet the EPA drinking water
9 requirements.

10 We propose plumbing, bathroom, lighting,
11 and ventilation and trash requirements to prevent
12 contamination. And these really follow the
13 umbrella food CGMPs.

14 We have proposed requirements for
15 equipment and utensils. Again, these really follow
16 Part 110 of the food CGMP quite closely. We would
17 require that manufacturers use equipment of
18 appropriate design, construction and workmanship
19 for their intended use, and provide for adequate
20 cleaning and maintenance.

21 Under the proposal, the manufacturer would
22 be required to maintain, clean and sanitize as
23 necessary all equipment, utensils and contact
24 surfaces that are used to manufacture, package or
25 hold dietary ingredients or dietary supplements.

1 In the proposal, we've required that if a machine
2 is used--or equipment is used in producing a batch,
3 that the maintenance, cleaning and sanitizing
4 records be kept in that batch record.

5 In the answer rounds there was a comment
6 that, I think--included a log, and so that we don't
7 have a log, you put it in the batch. And because
8 we're minimizing the number of records we're
9 requiring, we decided to propose that it be kept in
10 the batch. In question and comment meetings, they
11 said it would really work better if you had a log.
12 So maybe there's some--that's an area for comment.
13 Should it be one place or other, or should there be
14 an option. And if you propose one or the other,
15 give us some why. Tell us, you know, why we should
16 do it that way.

17 We have not proposed equipment validation
18 or process validation. The only validation we've
19 proposed has to do with analytical method. So,
20 there has been some questions that--we proposed
21 equipment validation or process validation and we
22 had not. But we do ask whether that should be
23 included in a final rule. What we've said is that
24 a manufacturer needs to ensure that equipment
25 functions as intended. And we've not given--so we

1 have given discretion in that area.

2 At this point, that's where I stop and
3 Sara takes over, and she will give some highlights
4 of the production and process controls.

5 Ah--no, she's not. She'll be down.

6 **Proposed Production and Process Controls.**

7 MS. STRAUSS: I will give just a little
8 bit of overview of the production and process
9 controls, and just kind of the basic elements that
10 we've included in this proposal. And Sara will
11 give more details.

12 There's a quality control unit that we
13 would require; a master manufacturing record and
14 batch production record; specifications for
15 incoming, in--process and final product; and then
16 flexible testing requirements that I've mentioned
17 before. And you'll hear more about it as we go on.
18 And I'm sure you'll have question about
19 them--everyplace else has, as well.

20 Testing of final product, when that's
21 possible, or incoming and in--process testing.

22 Consumer product quality complaints. We
23 have proposed a requirement for handling consumer
24 complaints. And this is an area that

25 [Technical difficulty.]

1 First of all, we would require that the
2 manufacturer keep a written record of each consumer
3 complaint they receive that is related to CGMPs.
4 Some examples would be super--potent or
5 sub--potent--you know, having more or less than
6 claimed on the label. Having a wrong ingredient,
7 and having a contaminant--like a drug contaminant
8 or other contaminants like a bacteria, pesticide,
9 toxin or foreign material. So complaints about
10 prices, package sizes, shape or other matters that
11 couldn't possibly reveal the existence of a hazard
12 to health, or do not concern the purest case order
13 of quality of the dietary ingredients are not
14 considered consumer complaints under this
15 regulation, although CGMP relating to consumer
16 complaints about quality could be related to a
17 health hazard or an adverse event.

18 The quality control unit would be required
19 to review the CGMP--related product quality
20 complaints to determine whether there was a
21 possible risk of illness or injury that is an
22 adverse event. They also need to look at them to
23 see if there's a possible CGMP failure, or maybe
24 the specification wasn't met. And if there was an
25 adverse event, and it was related to the CGMPs,

1 then the quality control unit would need to do an
2 investigation into what was--what had happened,
3 maybe with that batch or other batches.

4 But here's where it's difficult to kind of
5 understand. What is not included in a
6 CGMP--related consumer complaint is a complaint
7 that's related to the pharmacologically active
8 substance of the dietary ingredient. These we
9 don't consider to be CGMP--related practices, and
10 aren't related to practices. So they're not a
11 consumer complaint under this proposed rule. So
12 it's only those complaints that are related to
13 manufacturing practices that we have proposed to be
14 handled under this rule.

15 We have holding and distribution
16 requirements, and these really are to ensure that
17 products are not contaminated or that they don't
18 get mixed up, or that there's deterioration. So it
19 really relates to temperature, humidity, light and
20 kind of how they're handled.

21 We proposed records and record--keeping
22 requirements. The record--keeping requirements we
23 propose would be for calibration of instruments and
24 controls, for the master manufacturing records, for
25 the batch production records and for consumer

1 complaints. And what we've proposed is that
2 records would be kept for three years beyond the
3 date of manufacture that would be associated with
4 those particular records, and that FDA would have
5 access to records when requested.

6 We've chosen the three year date because
7 we do not propose expiration dating. We don't
8 propose a requirement for expiration dating because
9 we feel that in order to have a meaningful
10 expiration date you would need to know the active
11 ingredients in a dietary supplement. So if, for
12 example, botanicals, the active ingredient is not
13 know, an expiration date really wouldn't be related
14 to an active--you wouldn't know what it is. So
15 what we've done is tied that back to the
16 manufacture. We don't prohibit expiration dates.
17 If a firm chooses to use one, they must have the
18 data to support that expiration date.

19 And that's where I'll stop. Sara?

20 I should add that if you have questions,
21 write them down on a card and raise your hand, and
22 then what we'll do when we answer the questions is
23 we'll give you an opportunity to ask a follow--up
24 question if you felt we've not answered the
25 question.

1 And we'll do those questions after all of
2 our presentations.

3 MS. ACOSTA: Hi. We have no reached the
4 part on production and process controls. The
5 proposed regulations would require that the
6 manufacturer have a system of production and
7 process controls.

8 That system would be required to cover all
9 stages of manufacturing, packaging, labeling and
10 holding dietary ingredients and dietary
11 supplements. The purpose of the control system
12 would be to ensure that the dietary ingredients or
13 dietary supplements are manufactured, packaged and
14 held in a manner that would prevent adulteration.
15 And that's the important part--preventing
16 adulteration.

17 The production and process control system
18 would be required to be reviewed and approved by
19 the quality control unit. The production and
20 process control system would also be required to
21 include the quality control unit, and also all
22 manufacturing operations, including laboratory
23 operations, the holding and distributing and,
24 finally, record--keeping.

25 Louder? Okay. Sorry.

1 We would require that the system of
2 production and process controls include
3 specifications and testing to ensure those
4 specifications are met, and that's covered in the
5 later part of this talk; monitoring, material
6 review--sorry--and disposition decision, and the
7 manufacturer would also be required to use the
8 master manufacturing records and batch production
9 records.

10 Specifications would be required anyplace
11 that control is necessary to prevent adulteration.
12 For example, a control specification might include
13 hearing temperatures, drying times, or cooling
14 specs. If used, the manufacturer identifies that a
15 particular specification is necessary to prevent
16 adulteration, then that specification is part of
17 these required regulatory specifications. However
18 in addition to that, we have identified certain
19 steps when specifications would be required.

20 Specifications would be required for the
21 identity, purity, quality, strength and composition
22 of incoming components, and within incoming
23 components we include the dietary ingredients,
24 ingredients and any other component. And let me
25 define that a little bit further.

1 The term "component" is define as "any
2 substance intended for use in the manufacture of a
3 dietary ingredient or a dietary supplement,
4 including those that may not appear in the finished
5 dietary ingredient or dietary supplement. A
6 solvent is an example of a component that may not
7 appear in the finished product. A component would
8 also include ingredients and dietary ingredients as
9 described in the definitions of Chapter II of the
10 Food, Drug and Cosmetics Act, Section 201 (ff)."

11 "Ingredients" would be any substance that
12 is used in the manufacture of a dietary ingredient
13 or a dietary supplements that is intended to be
14 present in the finished dietary ingredient or
15 dietary supplement. And that includes, but not
16 necessarily limited to: dietary ingredients as
17 described in 201(ff).

18 Janet is asking me to speak a little bit
19 louder. Can you hear me in the back now? Sorry
20 about that.

21 We would require that any substance other
22 than a dietary ingredient within the meaning of
23 Section 201(ff) of the Act which, when used, is
24 reasonably expected to become a components, or
25 other affect the characteristics of the dietary

1 ingredient or dietary supplement, be it either an
2 approved food additive or generally recognized--

3 [Technical difficulty.]

4 And, as I was saying, let me go back a
5 little bit--specifications for the incoming
6 components--also we would require specifications in
7 process, anytime the control is necessary to
8 prevent adulteration, for the identity, purity,
9 quality, strength and composition of the final
10 product, and for packaging and labels.

11 Then I'm also going to define a little
12 bit--and I'm sorry, this is a long slide--what we
13 have interpreted "identity, purity, quality,
14 strength and composition" to mean. That means that
15 the product, on a batch--by--batch basis, is
16 consistent with the master manufacturing record,
17 and is also what it is represented to be on the
18 label, the identity; it is without impurities, and
19 it's the desired product, the purity. Quality
20 would be that it has the identity, purity and
21 strength for the intended purpose. "Strength"
22 is--you know, this is common sense--the
23 concentration or the amount intended to be in the
24 product. And the composition is the intended mix
25 of product and the product--related substances.

1 A little bit more on packaging and labels.
2 Specifications would be required for the packaging
3 and labels. They should be safe and suitable for
4 the intended use. They should comply with all
5 other applicable statutory and regulatory
6 requirements, and they should not be reactive or
7 absorptive to affect dietary ingredient or dietary
8 supplement safety. The packaging should also be
9 intended to protect the ingredients from
10 contamination and from deterioration.

11 The manufacturer would also be required to
12 monitor operations to ensure specifications are met
13 and detect unanticipated occurrences. The
14 manufacturer would be required to conduct a
15 material review and disposition decision when
16 specifications are not met, or an unanticipated
17 occurrence may lead to adulteration; whenever a
18 master manufacturing record step is not completed,
19 if an instrument or a control calibration suggests
20 a problem or a dietary ingredient or dietary
21 supplement is returned to the manufacturer.

22 All those actions need to be documented,
23 and that documentation would be required to
24 identify the specific deviation or unanticipated
25 occurrence, describe the investigation, evaluate

1 whether or not the deviation or unanticipated
2 occurrence resulted in or could lead to
3 adulteration; identify the actions taken and show
4 that the quality control unit approved the material
5 disposition decision.

6 A manufacturer must establish and use the
7 quality control unit. We do not require that a
8 quality control unit have a particular number of
9 employees. WE do propose requirements for the
10 authorities and responsibilities of the quality
11 control unit. The requirements would include that
12 the quality control unit must approve or reject
13 procedures, specifications, controls, tests and
14 deviations or modifications from any of these;
15 approve or reject materials received and products
16 manufactured, packaged and labeled by the firm, and
17 review and approve master manufacturing and batch
18 production records.

19 An appropriately trained person in the
20 quality control unit would be required to review
21 CGMP--related consumer complaints to determine if a
22 quality problem exists, and to determine if it is
23 associated with an adverse event. If a quality
24 problem exists, and there is a possible
25 relationship between the quality problem and the

1 adverse event, then the quality control unit must
2 conduct an investigation of the consumer complaint.
3 That investigation must extend to all batches
4 associated with the consumer's complaint.

5 The manufacturer would be required to keep
6 this CGMP--related consumer complaint record. And
7 we, in addition, recommend--but we would not
8 require--that a manufacturer report serious adverse
9 events to the FDA.

10 The manufacturer would be required to
11 prepare and follow a master manufacturing record.
12 The master manufacturing record would be similar to
13 a recipe, and we would require that the master
14 manufacturing record include a list of components;
15 and, as stated previously, components include
16 dietary ingredients, ingredients that remain in the
17 final product, and substances that do not remain in
18 the final product.

19 And here I'm going to read--this is almost
20 word by word the definition in the Food, Drug and
21 Cosmetic Act, Section 210(ff), which defines a
22 dietary ingredient as "The vitamins, minerals herb
23 or other botanical and amino acid or any dietary
24 substance for use by man to supplement the diet by
25 increasing the total dietary intake, or a

1 concentrate, metabolized constituent, extract or
2 combination of any of the above."

3 The master manufacturing record will also
4 include any other ingredient that appears in the
5 final product, and any substance that does not
6 appear in the finished product. As mentioned
7 previously, this could be a solvent.

8 The master manufacturing record would be
9 required to include specifications anyplace that
10 control is necessary to prevent adulteration; the
11 weight or measure for each component; instructions
12 for adding, mixing, sampling and testing; the
13 expected yield; and specifications for packaging
14 and the labels to be used. And the manufacturer
15 must also keep the master manufacturing record.

16 In addition to the master manufacturing
17 record, the manufacturer would be required to
18 prepare a batch production record every time the
19 batch of dietary ingredients or dietary supplements
20 is manufactured; and that includes reprocessed
21 batches.

22 The proposal would require that the batch
23 production record include complete information
24 relating to the production and control of each
25 batch. Generally, the batch production record is

1 the mirror image--it accurately follows the master
2 manufacturing record. And we would require that
3 the quality control unit review and approve the
4 batch production record, including
5 cross--referencing of the receiving and batch
6 production records, any material review and
7 disposition decision, reprocessing, as well, also
8 release for distribution. The batch production
9 records would be required to be kept for three
10 years beyond the date of batch production.

11 What is going to be included in the batch
12 production records? It's also going to include the
13 batch, lot or control number for each batch; the
14 identity of the equipment and processing lines that
15 were used in manufacturing, the date and time of
16 the maintenance, cleaning and sanitizing of the
17 equipment and processing lines used; incoming
18 shipment lots identifier and the identity and
19 weight or measure of each component used.

20 It's also going to include the
21 documentation of the time of performance, showing
22 the date and initials of the person performing and
23 verifying each step of the master manufacturing
24 record. It's also going to include the date the
25 batch was produced, the actual test results for any

1 testing that is performed during the batch
2 production, material review and disposition
3 decision; documentation that the dietary ingredient
4 or dietary supplement meets the final
5 specification, and the copies of all container
6 labels used, and results of examinations conducted
7 during labeling operations to ensure that the
8 containers have the correct labels.

9 The signature of the quality control unit
10 would be required to document the batch production
11 record review and any approval for reprocessing or
12 repackaging.

13 Manufacturing operations need to be
14 designed or selected to ensure that the
15 specifications are achieved. They need to be
16 conducted in accordance with sanitation principles,
17 and also to take precaution to prevent
18 contamination. Precautions to prevent
19 contamination would include protecting against
20 growth of microorganisms and the potential for
21 contamination; washing or cleaning components that
22 contain soil or other contaminants; preventing the
23 growth of microorganisms and decomposition by
24 methods such as sterilizing, pasteurizing,
25 freezing, refrigerating, controlling pH, humidity

1 or water activity; preventing against inclusion of
2 foreign material by using filters, traps, magnets
3 or electronic metal detectors, and identifying all
4 processing lines and major equipment used during
5 the manufacturing to indicate their content.

6 It's also going to include the batch and
7 lot number, when necessary, and the phase of
8 manufacturing.

9 And this is my last slide. And now I'll
10 leave you with Steve Musser, who's going to discuss
11 the laboratory operations.

12 Proposed Laboratory Operations

13 MR. MUSSER: Good morning. This is--I'm
14 going to talk to you about laboratory operations.
15 You know, this is a very small portion of the
16 proposed rule. It really has led to the vast
17 majority of the questions that we've gotten about
18 the rule. And I'm going to attempt to address
19 some of those questions. And I realize that I
20 won't be able to address all of them. And, of
21 course, we encourage your questions and comments.

22 Laboratory operations consist of about
23 three parts. One of them is to establish and
24 follow the laboratory controls. That means as you
25 decide what your specifications are, and then you

1 follow those specifications; that you use adequate
2 facilities, either in your facility or from outside
3 sources to perform the testing and examination.
4 What that means is that you can use a third party
5 or a supplier to do the testing. You can use a
6 contract laboratory. You can use any outside
7 testing organization that you choose.

8 However, if you do choose to use an
9 outside testing laboratory your quality control
10 unit would need to inspect that facility on a
11 routine basis to make sure that they are following
12 the tests that you've specified, and that the
13 records and documents that are required by the
14 proposed rule would be kept in accordance with the
15 rule, and for the appropriate length of time; and
16 then, finally, regardless of where the testing is
17 performed, that the laboratory test and examination
18 records are kept for the specified period of time.

19 Within the establishment and following of
20 laboratory controls, as well as most of the other
21 items that are listed within this particular
22 portion of the rule, there are two basic criteria.
23 And the criteria are split into two sections. One
24 is that the testing either be performed on the
25 finished product, and if finished product testing

1 cannot be performed, that the components or dietary
2 ingredient and dietary supplements as they are
3 received are tested; that any in--process materials
4 that are specified in the master manufacturing
5 record be tested; and that if water is used as a
6 contact or as a mixing agent, that it meet EPA
7 national drinking water regulations.

8 Food GMPs require a fairly stringent use
9 of water, however we thought that by adding EPA's
10 guidelines or regulations, that that would be a
11 much clearer specification as to what water could
12 be used, and what the specifications would be
13 appropriate for use of water in the manufacturing
14 of dietary supplements.

15 This provision does allow the use of
16 municipal water or well water--if you have well
17 water on your facility you can use it, as long as
18 it conforms to EPA's national drinking water
19 regulations.

20 Within the establishment of these
21 guidelines you would need to establish such things
22 as what criteria are used for the tests; what will
23 be tested; and what performance criteria must be
24 met.

25 So each batch must be tested, to test the

1 finished batch for identity, purity, quality,
2 strength and composition, according to those
3 criteria that you have outlined in the previous
4 establishment of the criteria you're going to use.
5 And if analytical methods are not available--I'm
6 sorry. I'm getting a little ahead of myself.

7 If analytical methods are not available
8 for testing the finished batch, then you must test
9 incoming components, dietary ingredients or dietary
10 supplements, to determine whether the
11 specifications are met, and you must test
12 in--process, in accordance with the manufacturing
13 record to ensure the identity, purity, quality,
14 strength and composition of dietary ingredients or
15 dietary supplements.

16 You would need to test for types of
17 contamination that may adulterate your product.
18 And those things may include filth, insects, other
19 extraneous materials such as glass or metal,
20 microorganisms. If you know, for example, that
21 your particular raw product is contaminated--or
22 routinely contaminated with microorganisms, then
23 you would need to test and remove that
24 contamination. And toxic substances--and those
25 toxic substances can be organic or inorganic,

1 meaning things such as lead--inorganic--and organic
2 substances could be things such as naturally
3 occurring toxins.

4 Also, if there is historical
5 confusion--this is particularly applicable to
6 botanicals--if particular products are routinely
7 confused with other botanicals, then the types of
8 adulteration that might be wanted to be checked for
9 would be whether that particular botanical that
10 you've specified is indeed that botanical and is
11 not mixed up with one that has historically been
12 misidentified.

13 The proposed rule indicates that tests or
14 examination must use at least one of the following,
15 and they may be gross organileptic, microscopic,
16 chemical or any other test that is appropriate and
17 can be validated for that particular specification
18 or criteria for which you've identified. We leave
19 this open to your discretion. These are your
20 products, and we feel that you can identify the
21 testing requirements that are needed for those
22 products.

23 Now, because the rule only says that you
24 must perform at least one, it doesn't mean that you
25 have to perform just one. If more than one

1 particular testing method is appropriate--for
2 example, microbiological and chemical contamination
3 are appropriate--then it would be then appropriate
4 to use more than one testing method.

5 One of the most difficult to
6 understand--not necessarily to understand, but for
7 what we've had the most questions on in the
8 proposed rule deals with this particular section,
9 which is the establish and following laboratory
10 controls; to select and use appropriate validated
11 testing methods.

12 FDA interprets this to mean that the test
13 is appropriate for--suitable for the test being
14 made, or the measurement being made. So, for
15 example, if you were using a balance to measure the
16 UV spectrum of a particular chemical, that would be
17 not appropriate for the test being used; and also
18 that it be validated. And by "validated" we mean
19 that the method is validated according to
20 guidelines. And these may be from any of a number
21 of organizations, such as FDA, or any other
22 internally accepted guidelines, such as ISO 17025.

23 We've included in the rule some sources
24 for validated methods--or just methods in general.
25 They may be the AOAC, the USP, or any other

1 compendia that is commonly used for these types of
2 methods. They may include peer--reviewed journals,
3 or they may be in--house or proprietary methods for
4 which you've developed and validated for your
5 particular product.

6 Regardless of the source,
7 however--regardless of whether you've got a fully
8 collaboratively studied validated method that
9 you're using, you must validate that method in your
10 particular laboratory and show that it demonstrates
11 the result and meets the criteria for which you've
12 specified in your origination of those products.

13 We've had a number of questions already
14 concerning commonly used test practices, and ones
15 that would not apply in this particular
16 rule--proposed rule. One of the biggest ones deals
17 with suppliers or laboratory certificate of
18 analysis for a shipment that's not supported by
19 testing of all specifications. So simply accepting
20 the certificate of analysis from a supplier without
21 any kind of investigation by your quality assurance
22 unit--or quality control unit--and no validation of
23 that testing results would be inappropriate for
24 this particular rule.

25 Skip lot testing--this is where you've

1 determined that a particular lot has met your
2 testing criteria and you've done all the
3 appropriate tests, and then you accept the next two
4 or three batches without any testing at all, and
5 then randomly test in between those batches--within
6 the guidelines of this proposed rule, skip lot
7 testing as that definition applies would not be
8 acceptable.

9 And single test certification of a
10 supplier or an ingredient manufacturer, in this
11 case you would have performed the appropriate
12 testing on one particular lot, certified that
13 manufacturer, and then not tested any other
14 batches. The rule is very specific, in that it
15 specifies that all batches must be tested.

16 And, finally, then, for all tests that are
17 performed, you must keep laboratory tests and
18 examination records of finished dietary ingredient
19 and dietary supplements tests, or components,
20 dietary ingredient or dietary supplements received,
21 and any in--process materials, where specified in
22 the master manufacturing record, and water, once
23 again, the test results from that, to assure that
24 it conforms to the EPA national primary drinking
25 water requirements.

1 And the specifications do--the proposal
2 does say that they must include documentation of
3 all examination and testing records performed.

4 Thank you. And that concludes my portion
5 of the talk.

6 **Public Comment Period and Next Steps**

7 MS. STRAUSS: Throughout the proposal we've
8 asked for comment on many, many, many issues. And
9 there are some in particular that we've asked for
10 comment on--and I'll identify some of these, and
11 then I'll describe the kind of information that
12 will be useful to us, in addition to, or as part of
13 a comment.

14 We've asked--if you'll look at the
15 handouts that you received that was a portion of
16 the proposal. What is included there is the
17 "highlights" section, and that really parallels
18 some of the information that we've given in this
19 presentation. It also gives some additional
20 information on the comments that we've requested,
21 in particular, and then what kind of information
22 would be necessary for us to change something that
23 we've proposed.

24 We've asked for comments on whether there
25 should be certain additional personnel records: for

1 example, training records, consultant records. We
2 have not included any written procedures. The only
3 written procedure that might be required under the
4 proposed rule would be for calibration. If you
5 look at the calibration section, option, there as
6 far as whether a written procedure is developed and
7 then used as the documentation, or whether just the
8 calibration procedure itself is documented. But we
9 have asked for comment on whether there should be
10 SOP written procedures.

11 Expiration dating and relating
12 testing--we've, as I mentioned earlier, not
13 included it as a requirement, but perhaps we
14 should. Perhaps there should be expiration dating
15 for certain dietary ingredients and not for others;
16 for example, for vitamins, but not for botanicals.

17 Then we asked for comments on whether
18 there should be specific requirements for
19 animal--derived dietary ingredients, especially
20 those that might be related to the importation of
21 material that might be animal--derived that might
22 be associated with BFC, or mad--cow.

23 So look at that highlights section in
24 particular for those places that we've asked for
25 comments.

1 We also have excluded persons who handle
2 raw agricultural commodities. That's just the
3 harvesting and transporting. If there's any drying
4 or chopping, those kinds of operations would be
5 considered manufacturing operations. Unless those
6 are something that occur before it actually comes
7 to a manufacturer's warehouse--and perhaps there's
8 an area there where we need to make some more
9 clarifying detail.

10 Now, what kinds of information would be
11 needed if you submit a comment to us? If you
12 submit a comment, for example, that says the final
13 rule should not include a particular requirement,
14 you need to tell us why or how, in the absence of
15 that requirement, we could achieve the goals that
16 we're wanting to achieve with the CGMP. How could
17 we prevent adulteration? How could we ensure the
18 identity, purity, quality, strength and composition
19 of the dietary ingredient and dietary supplement
20 without that particular requirement? Or how could
21 we ensure an enforceable regulation? FDA's not
22 on--site 100 percent of the time, so we rely on
23 records for efficient enforcement of the Act, so
24 that the inspector can tell whether or not the
25 CGMPs are implemented over a long time period, not

1 just what's happening that particular day.

2 If you thought we included a requirement
3 that should have been there but we didn't include
4 all the reasons, it would be helpful to know if
5 there are reasons we didn't include in our preamble
6 discussion.

7 And, then again, as I mentioned earlier,
8 if you wonder why we proposed something, go back to
9 the preamble. If you look at a particular
10 requirement, it has a number associated with it,
11 we've talked about that particular requirement. So
12 go back and look at it, and see if it helps you
13 understand.

14 The next steps are to analyze the public
15 comments. By Federal law we're required to look at
16 all of the public comments and consider them in
17 making changes to the final rule. But then they
18 need to tell us the why's as well; convince us that
19 the requirement should be added or revised or--let
20 us know if something's not clear.

21 Then we will prepare a final rule. We
22 expect that it will be a final rule and about a
23 year after the public comments close, it will be
24 published in the Federal Register, just as a
25 proposal. What we're proposing is one year after

1 it's published for the implementation of large
2 businesses, and we proposed a three--year phase--in
3 for small businesses. And these are proposed. And
4 depending on what comments are received, whether or
5 not it will be this or something else.

6 There is one more event that we are
7 having: the May 9th satellite downlink. There is
8 information on the table. Also, if you want a copy
9 of the proposal electronically, there's the
10 website, under "What's New," just in the same
11 places that you get all the documents, the
12 backgrounders. You can pick up a copy of the
13 electronic version of the proposal.

14 I'll leave this up while we answer
15 questions, and this indicates that there's a
16 90--day comment period ending June 11th. But, as I
17 mentioned, there's an extension request with FDA
18 that is being considered. Comments can be sent
19 either electronically or by mail. And the address,
20 both electronically and the mail address is on this
21 slide.

22 And, at this point, we will have a break,
23 and Janet will give us some information. And then
24 following the break, we'll have the presentations
25 by Peter Vardon. And then after that we will

1 answer the questions or address comments.

2 MS. McDONALD: I just want to let you know
3 that we are, during the break, try to get rid of
4 this static in the microphone. So we will try to
5 do it. I won't make any promises, but we are going
6 to work on that.

7 Also, for those of you who came in late,
8 there is a cafeteria on the fifth floor in the
9 South Tower. We are in the North Tower. There's a
10 bridge that connects the two towers. You can take
11 either the elevators right outside the auditorium
12 up to the fifth floor and head to the center
13 corridor, turn left, and cross the bridge, and
14 you'll find the cafeteria on the left--or you can
15 go to the main bank of elevators that you came up
16 on, and take that to the fifth floor, and proceed
17 to the cafeteria.

18 And we're going to try and be back here by
19 11 o'clock to resume this morning's presentation.
20 Thank you.

21 And, remember, no food or drink in the
22 auditorium.

23 [Off the record.]

24 **Economic Impact Analysis**

25 MR. VARDON: Okay. Well, why don't we get

1 started. Thank you all for coming today.

2 As you might have guessed, the underlying
3 theme of this public meeting is that this is a
4 draft document that merely reflects our best
5 understanding at the time the document was
6 published.

7 But the purpose of the comment period is
8 so that you can provide reason and evidence to
9 fight city hall, as it were; that we can be
10 persuaded, where to amend the document, to revise
11 the document, to reflect your concerns. And that
12 is particularly important with the economic
13 analysis. One of the beset ways to provide reason
14 and evidence to make a better document is through
15 the economic analysis. If you can show that
16 benefits can be achieved without the same
17 compliance cost, then clearly that would benefit
18 everybody.

19 So as I go through the economic analysis,
20 think of ways that you think either you can provide
21 evidence or data that would strengthen the economic
22 analysis.

23 A large staff of the FDA economists and
24 epidemiologists conducted the analysis, and the
25 analysis was conducted with Executive Order 12866,

1 which requires, essentially, a cost--benefit study.
2 And based on the cost--benefit study, we're
3 required to select the approach that maximizes net
4 benefit.

5 And we determined that rule, if adopted,
6 would be significant--that it would have a
7 significant impact on the economy, which means an
8 impact greater than \$100 million on the economy.
9 And we felt that it would be significantly large
10 than \$100 million.

11 And we also felt, based on our analysis,
12 that it would have a significant impact on small
13 businesses. And because it's going to have a
14 significant impact on small businesses, we looked
15 at regulatory options for those small businesses.

16 The economic rationale for the proposed
17 regulation is that there is a market failure; and
18 by that we mean, consumers cannot take control of
19 their own choices; that there are hidden product
20 defects that aren't detectible through observation,
21 and consumers can't know what they're buying. They
22 can't know whether the product's adulterated or not
23 merely from observation. And there are private
24 incentives now to adopt sufficient controls to
25 prevent adulteration. And controls are costly, and

1 so those firms that do adopt preventative controls
2 would be at a competitive disadvantage if they're
3 done voluntarily.

4 We looked at several regulatory
5 options--we looked at six regulatory options, in
6 fact, to see if there is an alternative to the rule
7 that we propose. And the first regulatory option
8 that we looked at was no new regulatory option, and
9 that would mean the voluntary adoption of stricter
10 standards as an alternative. And from survey
11 evidence, though, we determined that 48 percent of
12 very small firms, and even 11 percent of large
13 firms now don't follow any GMP model. So we didn't
14 feel this regulatory option would be a real
15 option--or a better alternative.

16 We also looked at the option for fewer
17 requirements for vitamin and mineral manufacturers
18 than for the other dietary supplements
19 manufacturers, such as plant-- and animal--derived
20 dietary supplements. And we thought that might be
21 an important option, because there may be greater
22 variation in product quality with plant-- and
23 animal--derived products than with
24 synthetically--derived products. And the advantage
25 of an option like this is that would be fewer

1 products and firms that would be affected so the
2 total compliance cost would be less. But the
3 disadvantage is that we don't have any evidence at
4 all that there's a difference in health risk
5 between synthetic and naturally manufactured
6 dietary supplements.

7 So we looked at a third option of more
8 restrictive regulations, and we looked at the
9 possibility of product quality testing for each
10 shipment lot, in addition to the finished product
11 testing. And we looked at mandatory written
12 procedures for each provision. But we felt the
13 disadvantage of this would be that it would be
14 costly and difficult to link to health benefits.

15 As a fourth regulatory option, we looked
16 at HACCP, and we defined this as the hazard
17 analysis and critical control point option, where
18 manufacturers would determine how best to eliminate
19 or control hazards. But we felt the disadvantage
20 of this option is that it wouldn't create uniform
21 minimum product quality across the industry. And
22 we, as you'll see soon, that we found that there's
23 a major benefit in having minimum product quality
24 standards.

25 We looked at a fifth regulatory

1 option--final product testing only--without all the
2 other provisions; just finished product testing.
3 But we felt the disadvantage is that not every
4 finished product has a test that confirms the
5 identity, purity, quality, strength and
6 composition. So finished product testing can't
7 ensure the discovery of all contaminants when there
8 are hot spots or false negatives. So we felt the
9 other provisions were important.

10 And, as a sixth regulatory option, we
11 looked at just regulating high--risk products, or
12 high--risk hazards. But the disadvantage is that
13 we just don't what those high--risk products or
14 hazards are. There's significant under--reporting;
15 FDA just doesn't have a bird's--eye view of real
16 the real harms are, where the real hazards are.
17 And what may have been reported may not actually be
18 the highest risk. So we felt that this regulatory
19 option wasn't feasible.

20 To conduct our economic analysis we did a
21 survey of the industry, and the survey was
22 conducted in 1999. And it's entirely possible some
23 of you participated in the survey. And the survey
24 was based on a database of firms that were
25 developed from several sources. We used FDA's

1 official establishment inventory, and we were given
2 the names of the firms from various trade
3 organizations, and then we also had electronically
4 databases-- privately published electronic
5 databases, especially InfoUSA, which is a database
6 like Standard & Poor's, which collects business
7 information.

8 And we found, based on these various
9 sources, that about 1,566 firms would be covered by
10 this rule--are some way related to the manufacture
11 of dietary supplements. And those covered firms
12 are those firms that manufacture, package, or are
13 dietary ingredient suppliers or repackers or
14 holders. But the large majority, as you can see
15 from the slide, are manufacturers. And we found
16 also that most firms are small, as classified by
17 the Small Business Administration, which means
18 firms with 500 or fewer employees.

19 And we sent our survey to about 966 firms,
20 and we received about 240 responses. So, from
21 those responses, we were able to derive
22 statistically significant results,

23 We also looked just at what's happening to
24 the consumer market. And we found, largely from
25 industry sources, that there's significant growth

1 in the market, which means that there are also very
2 large competitive pressures. But we found that the
3 growth rate is about 10 percent per year for the
4 last decade. So this is a growing industry, and
5 per capita consumption is growing; the number of
6 units per U.S. resident--as measured by the number
7 of units per U.S. resident shows about a 3 percent
8 growth in consumption for the last decade also.
9 And the industry size from about two years ago,
10 it's about \$15 billion per year.

11 We use the survey to look at producers'
12 manufacturing practices today, and we stratified
13 the survey by product type and by size. The
14 product types we looked at are those manufacturers
15 that make vitamins and minerals, is one strata.
16 And we looked at those that manufacture and herbal
17 products as a second strata. And we looked at
18 those that manufacture amino acid, proteins and
19 animal extracts as their primary product, as a
20 third strata. And we looked at all others as a
21 fourth strata.

22 And then we also stratified our results by
23 firm size. WE looked at those that have more than
24 500 employees, and we defined those as being large
25 firms. We looked at those that are small, and we

1 defined those as between 20 and 500 firms, and we
2 looked at those that are very small, which we
3 defined as those that have 20 or fewer employees.
4 And looking at those that have 20 or fewer
5 employees is important, because this industry is
6 characterized by many very small firms. We found
7 the median firm actually only has about eight
8 employees, which is astonishing. And as we've gone
9 to other meetings--somebody didn't really believe
10 that. But that has been the results of our
11 analysis.

12 And we also found that there's a very
13 large turnover in this industry; that about 20
14 percent of industry enter every year and about 20
15 percent leave every year. So there's a great deal
16 of change in the industry, too, as people come and
17 go. And so there's a quite a bit of uncertainty
18 because of that change.

19 And, maybe the most startling thing about
20 our survey results was that as many as 35 percent
21 in the industry have told us they don't follow any
22 GMP model--including food GMP.

23 We felt the advantage of adopting this
24 rule as it's currently written, is that consumers
25 would enjoy better health. If you can reduce the

1 adulteration, consumers are less likely to consume
2 contaminated products and they'll enjoy better
3 health. And some of the risk from contamination,
4 as Karen mentioned, are that--we found from our
5 recall evidence, that there's a reduced risk of
6 glass fragments, and salmonella, and selenium
7 poisoning, and super--potent zinc and iron
8 poisoning--among many of the things that we found,
9 actually, in the products that have been recalled.
10 And those risks were identified by FDA
11 epidemiologists from our recall data.

12 We also felt the second benefit to
13 consumers would be that consumers would spend less
14 time searching for safely manufactured products.
15 With standardization, or with uniform quality
16 standards, consumers can spend less time shopping.
17 They can spend less time worrying about whether
18 this product's adulterated or whether that
19 product's adulterated. And so they don't have to
20 go to a website to see which manufacturers are
21 better than other. They don't have to read
22 literature. They don't have to spend----less time
23 comparing labels. There's a greater assurance.
24 And if you can just reduce that amount of time--a
25 small amount of time across the adult consumer

1 population in the U.S.--I mean, to spend a few
2 minutes every year across--if you can save
3 consumers a few minutes every year across the
4 entire adult population, you can save an enormous
5 amount, actually, for the entire population. And
6 we found that that is a significant source of the
7 consumer benefits from this rule.

8 And we also felt that by adopting these
9 rules we'd also just have fewer product recalls.

10 The major cost, through, from adopting
11 this rule--if it were adopted in its current
12 form--is that firms that currently were not
13 maintaining records would now have to keep records,
14 and that's potentially a significant cost. And
15 they would also have to adopt final product testing
16 if they weren't already doing that. Of course, we
17 recognize that there are a whole range of other
18 costs associated with this. There will be capital
19 improvements to your building, or you may have to
20 buy new laboratory equipment and other things. But
21 we felt the major costs are from product
22 testing--the final product testing and the
23 record--keeping.

24 Now, I'll just mention a little about how
25 we actually estimated the health benefits from the

1 rule. And we should acknowledge that it is very
2 difficult to estimate the health benefits. There's
3 just a great deal of uncertainty.

4 But we estimated the cost--or the health
5 benefits, by reducing the cost of illness for a
6 variety of types of illnesses that we found are
7 associated with poorly manufactured dietary
8 supplements. And we looked at the severity of
9 those illnesses, and we used a technique know as
10 "quality adjusted life day" to assess the cost, per
11 day, for each type of illness that are associated
12 with--the illnesses that we found are associated
13 with poorly manufactured products.

14 And we looked at the loss of
15 functionality. If somebody had lead poisoning,
16 they wouldn't, perhaps, be able to walk up and down
17 the stairs. So there would be a cost associated
18 with that loss of functionality. But also they
19 wouldn't be able to go to work, perhaps, for a few
20 days as they recover. And so there's that loss in
21 productivity. And then also there would be the
22 direct medical cost associated with the loss from
23 lead poisoning, let's say.

24 And then those losses would all be
25 associated for a number of days. So, let's say

1 they're in the hospital for two weeks with whatever
2 illness they have, then the loss would be over that
3 two week period.

4 And we tried to estimate what all those
5 losses would be, and we came up with an estimate.
6 And so we'd very much like your opinion on whether
7 you think those estimates are plausible or not.

8 We feel that there would be a considerable
9 consumer benefit from reduced search costs, because
10 consumers will spend less time searching for
11 quality products. But, more precisely, they would
12 spend less time shopping for purchase, which means
13 they'd spend less time reading product labels and
14 other literature, and comparing one product with
15 other products, and less time searching on the
16 internet or examining the product itself, or
17 thinking about the product, or second--guessing
18 their final decisions. And that's very difficult
19 to actually measure. And so we had to rely on
20 studies that were conducted in other
21 closely--related industries, but still different
22 industries.

23 And so we looked at the drugstore model,
24 and the literature associated with shopping for
25 pharmaceuticals. And we also looked at the

1 literature and models associated with consumers as
2 they shop in the grocery store. And we looked at a
3 series of use--of--time studies to derive our
4 estimates.

5 And there was some convergence from these
6 various sources, about how much time consumers
7 would likely spend shopping for dietary
8 supplements. But, in the end, there's still quite
9 a bit of uncertainty, and so we relied on a
10 technique known as Monte Carlo simulations to help
11 us characterize that uncertainty. And we found
12 that if consumers spend between saving 1 percent of
13 their time shopping and 50 percent of their time
14 shopping--I should say we felt the truth is
15 somewhere between these
16 boundaries--between--consumers would spend less
17 than 1 percent of their time shopping, and between
18 50 percent less, with the most likely amount of
19 about 33 percent less time shopping. And that's
20 also based on the expert opinion of pharmacists.
21 Apparently there was a study done, while we were
22 doing our own analysis, that showed the consumers
23 would be likely to spend about a third less time
24 shopping if we adopted these rules as they're
25 currently written.

1 But we'd very much like your comments on
2 that.

3 So this slide summarizes our analysis. We
4 felt if this rule were adopted as it's currently
5 written, we'd have about \$105 million in fewer
6 illnesses; about \$109 million in fewer--in the
7 reduced consumer search; and about \$3 million less
8 in product recalls.

9 And I know these numbers are precise, but
10 don't let that precision fool you. We recognize
11 that there's a great deal of uncertainty about
12 that, and that although these numbers are
13 presented, what they really reflect is the mean
14 estimator of the true value. And so I wouldn't let
15 these few numbers provide a false precision. We
16 recognize there's a great deal of uncertainty in
17 our analysis.

18 But the total social benefits amount to
19 about \$217 million per year. And we feel the
20 average industry compliance cost per year will be
21 about \$86 million per year. So we believe that the
22 social benefits exceed the social costs; but that
23 the impact to small firms, and to other firms, is
24 potentially quite large. And we feel the average
25 very small firm will incur an annual cost of about

1 \$38,000 per firm, and the average small firm will
2 incur a cost of about \$61,000 per firm, and the
3 average large firm will incur about \$47,000 per
4 firm.

5 And at previous meetings several have
6 mentioned that these costs seem very low; that you
7 can't even hire one person, and that this rule will
8 probably require you to either hire several or fire
9 several. But we have to recall that this is an
10 average cost, and we have survey evidence that
11 shows many, many firms are actually following many,
12 or most--or all--of the proposed provisions, and
13 that this compliance cost would really be--would
14 fall on those who aren't following most of those
15 provisions. So if you're following most of the
16 provisions now--and we have survey evidence to show
17 that most are, then these costs will be
18 considerably less. This is just an average cost,
19 per firm.

20 The key sources of uncertainty in our
21 analysis is that those firms that currently aren't
22 following the practices will now have to--must now
23 comply. Which means that to comply with the
24 physical plant requirements, if they don't
25 currently have floors and walls that are smooth and

1 hard, then they'll have to adopt those smooth, hard
2 surfaces. If they don't have equipment and
3 instrumentation controls that are required, then
4 they'll have to get them. And if they don't have a
5 quality control unit--and we have survey evidence
6 that shows about 85 percent of all firms have a
7 quality control unit, and would therefore comply
8 with the rule; 15 percent do not. And so, for
9 those 15 percent that don't already have a quality
10 control unit, they'll have to incur the cost of
11 adopting a quality control unit.

12 But the key sources of uncertainty in our
13 analysis are the number and cost of tests per batch
14 for product quality testing. We have some survey
15 evidence of how much is done now, but we'd be very
16 interested in your opinion--or getting information
17 about how many you would have to do. The number
18 and cost of contamination testing per batch, the
19 cost of creating and using new records, and the
20 cost to investigate consumer complaints for adverse
21 health events that are associated with the
22 manufacturing practices.

23 As I've mentioned, we do believe the
24 requirements are going to be significant to many of
25 you. And to estimate the number of firms that are

1 at risk of going out of business, we looked at
2 those that have revenues of \$500,000 or less. And
3 we felt if those firms incur an average--or higher
4 cost of compliance, they would be at significant
5 risk of not being profitable, and they would go out
6 of business. And we determined that several
7 hundred are actually at risks of that.

8 So, because it is going to have a
9 significant impact on a very large number of small
10 firms, we looked at the regulatory options. And
11 it's based on that analysis, we determined that
12 giving small firms a three--year compliance period
13 would reduce the compliance cost to them.

14 But--I'm going to repeat a couple of
15 slides--or I'm going to mention a couple of slides
16 now that I'm going to repeat this afternoon where I
17 go into a more lengthy explanation about the
18 small--business impact, but I know not everybody's
19 staying for this afternoon. So for those who will
20 leave, I'm going to go through the next couple of
21 slides.

22 We'd be very interested in hearing your
23 comments about the need for the rules. We
24 identified it as a market failure; that voluntary
25 controls aren't sufficient, in that consumers can't

1 distinguish between adulterated and
2 non--adulterated products. We'd be very interested
3 in hearing your comments about that. Do you agree
4 with that basic premise? And we'd be very
5 interested in knowing what it will cost you to
6 comply with the rule. If you could provide data to
7 us--just the hard data--what does it cost you to
8 test? What does it cost you to maintain records?
9 That would be very helpful for our analysis.

10 And we'd also be very interested in
11 hearing your opinion about whether you think the
12 rule will accomplish the goal--if we adopt the
13 rule. Will there still be significant quantities
14 of adulterated products? Will there not be? Does
15 this rule work as it's intended, or are there other
16 ways to accomplish the rule that are less costly
17 and do more? And are there other regulatory
18 options that we neglected? Let us know that.

19 But just to conclude this section--with a
20 few do's and don't's--do send specific numbers if
21 possible. Don't send unsupported opinions. If you
22 think the rule stinks, just saying that won't help
23 us at all. We really need reason and evidence.

24 But do send comments in on time--and the
25 current closing period is June 11th, but there is a

1 recommendation to extend that for another 60 days.
2 And that's being considered at the highest level.
3 But until you hear otherwise, I would rely on that
4 June 11th closing date.

5 Do send comments to the docket, not to
6 those of us on the panel. And do, if possible,
7 send combined comments through the associations.
8 IF you have survey evidence of a change in
9 practices--whether people are adopting practices
10 voluntarily--let us know that. That would be very
11 interesting to us.

12 And don't send sensitive information. If
13 you have proprietary information that you don't
14 want to be released to the public--because whatever
15 you send us is potentially open to the public
16 through the Freedom of Information Act. So,
17 although we're very interested in knowing how this
18 is going to change your profitability, or whether
19 it's going to change your hiring practices, we
20 don't need to know that you're going to fire John
21 Smith because of this rule.

22 So, with that, I'll turn it over to the
23 next group. Although let me just say a little
24 about this afternoon's public meeting, also.

25 We're going to have breakout sessions for

1 small business owners, and we recognize
2 that--because we recognize that this rule is going
3 to have a significant impact on you, we want you to
4 have an opportunity to discuss it with yourselves.
5 And unlike past breakout sessions, we actually want
6 you to try to formulate a comment--in the breakout
7 sessions. And so we do ask that you stick around
8 for the afternoon session, because it might be very
9 productive.

10 Thank you.

11 **Question and Answer Session**

12 MS. STRAUSS: If someone can help me with
13 this screen, I'd like to put the--Janet? Janet?
14 Could you help me get this slide presentation up.
15 I want to put the docket address up for people.

16 [Pause.]

17 MS. STRAUSS: What we'll do now is we'll go
18 through the cards that you've given us, and what I
19 have put back on the screen is the address for
20 docket.

21 The comments that you wrote on the card
22 are not official comments until you've sent them in
23 writing to the FDA docket. So it's real important
24 that you do that. Don't rely on the discussion
25 here to get your comment addressed in the--in any

1 final rule.

2 And what we'll do now is we'll respond to
3 what's written on cards. And if you were the
4 writer, and you feel that you want to follow--up
5 with another question or ask for clarification, if
6 you would indicate, by raising your hand, then
7 someone with a mike will come around so that you
8 can speak into the mike, either here--I guess I'll
9 leave it to Janet to decide where--so that the
10 transcriber can also hear your request for
11 clarification.

12 I'll start with some questions, and then
13 we'll just kind of take turns here.

14 One question says that we've modeled it
15 after the CGMP for foods, and asks if we have
16 looked further at, for example, the legislative
17 history to see if "modeled after" was also
18 discussed there. And this is not discussed in the
19 legislative history. In fact, there's minimal, if
20 any, legislative history on the Dietary Supplement
21 Health and Education Act.

22 But when we looked at "modeled after," we
23 also looked at other requirements that would be
24 necessary to fulfill the Dietary Supplement Health
25 and Education Act--specifically, in order to have

1 an accurate label, you do need to know the identity
2 and the quantity. So there would be some different
3 kinds of requirements than would be required for
4 conventional foods.

5 Another question is asking about
6 slides--that they're a good summary. Would there
7 be a copy of the slides possible? And we expect
8 that the slides will be on the CFSAN website at
9 some point, after all of our presentations have
10 been completed.

11 'The proposed rule focuses on
12 manufacturing and purity issues. When will focus
13 begin on the requirements of gardeners, brokers or
14 growers to assure a safe source of supply, both in
15 the U.S. and imported?"

16 We could consider requirements for
17 agricultural--for the gardeners, if that's a
18 comment. Do you think that we should consider
19 those? Let us know through a comment to the
20 docket. That's one of the things we specifically
21 want to know: whether we should include the farms.

22 If there's processing that occurs, such as
23 milling, at the grower's location, that's part of
24 manufacturing. That's--whatever beyond the growing
25 and harvesting, if there's some processing that

1 happens, that's part of CGMP.

2 Someone else want to address the comment?

3 MR. MUSSER: I think what I'd like to do
4 is jump in with certificates of analysis, since
5 most of this stack here deals with certificates of
6 analysis.

7 MS. STRAUSS: Can I say something first?
8 Just about--to kind of clarify.

9 MR. MUSSER: Please.

10 MS. STRAUSS: To kind of clarify where the
11 misunderstanding is occurring.

12 In the preamble--and, first of all, we
13 have flexible testing requirements. And usually
14 certificates of analysis are included for incoming
15 material. And if it's flexible and you can't test
16 the finished product, testing would be required of
17 incoming materials.

18 In the preamble we've said when incoming
19 material testing is required, a certificate of
20 analysis is not appropriate, because that would be
21 the only testing time, other than in--process
22 testing, to substantiate label claims. So there is
23 a problem there.

24 At the same time, we say that if you use a
25 contractor for any process, that contractor must

1 also comply with the CGMP. So if someone is using
2 a contractor to perform the label--I mean, to
3 perform the testing of incoming, it's like you're
4 using a contractor. And that contractor would need
5 to comply with what we have--would have in a final
6 rule for testing of incoming. So it would mean
7 that it would need to be tested to just ensure that
8 all the specifications were met.

9 And in all likelihood, we would use some
10 other term, instead of "certificate of analysis" in
11 any final rule dealing with this particular issue,
12 because the certificates of analysis currently in
13 use are not reliable--from advice that we've
14 received. So, just with that little preface--and
15 then, Steve, take it away.

16 MR. MUSSER: So, there are a couple of
17 issues that we feel need to be addressed with this
18 particular rule.

19 Certificates of analysis--sort of very
20 ambiguous in this particular field. In
21 pharmaceutical testing they're often referred to as
22 "validated certificates of analysis," and the
23 CGMPs, they're used for drug testing, do allow
24 validated certificates of analysis, along with
25 another test. And so these regulations are not

1 really out of compliance, or stricter, or requiring
2 more than what is already required in our Food and
3 Drug law.

4 So, what we were trying to prevent
5 are--what is widely used--and that is just a
6 manufacturer supplying an analysis without any
7 traceable information attached to it; in other
8 words, we know, for example, on some occasions
9 firms have simply photocopies certificates of
10 analysis from previous shipments and batches. And
11 what we're looking for is an actual testing record
12 of that particular batch, and the analytical
13 results, and that the specifications have met those
14 analytical results--or those criteria for which
15 you've already specified.

16 In many cases, certificates of analysis
17 that are not--that are currently in use now do not
18 address many of those issues. And that's where we
19 are trying to--what we're trying to address by not
20 allowing certificates of analysis without testing.

21 It doesn't mean that the laboratory can't
22 provide you the laboratory results as specified and
23 call it something other than a certificate of
24 analysis, such as "testing results" or something
25 else--as long as you can inspect them and see that

1 they have conformed to your requirements or your
2 specifications. They can act--your supplier can
3 act just like a contract laboratory in this regard.
4 But they would have to provide you the actual
5 testing result, not just the summary of the
6 analytical results.

7 I hope that clears it up. And if someone
8 would like additional clarification on that
9 particular issue, now would be the appropriate time
10 to ask that.

11 MR. : I just want to make sure
12 I'm clear.

13 MR. MUSSER: Can't hear him? Okay. I'll
14 repeat the question.

15 MR. : If a supplier is going to
16 provide a certificate of analysis, are you saying
17 that that is totally not appropriate, or is it
18 their responsibility to document behind it the
19 analysis. I mean, do they have to provide the
20 analysis with the certificate of analysis, or do
21 they just have to maintain it to provide proof that
22 they have done that.

23 MR. MUSSER: That's going to be hard to
24 repeat. Can you say it just in a more concise way,
25 so I can repeat it?

1 MR. : I understood you
2 correctly--I'll start at that point--certificates
3 of analysis are not appropriate for documentation.
4 Based on that, now, is the manufacturer not allowed
5 to provide certificates of analysis at all? Do
6 they have to provide the total analysis parameters,
7 or do they just keep that in their documentation
8 for their batch files and things like that? Does
9 that make sense?

10 MR. MUSSER: Okay. So the question is,
11 basically, can the supplier keep the certificates
12 of analysis, or the testing results in their files,
13 such that you would have access to that? And that
14 be appropriate, then, as a certificate of analysis?

15 MR. : No. What I'm asking is do
16 we have to provide the complete set of analysis
17 results, or do they just keep them as
18 documentation.

19 MR. MUSSER: Okay. So can a supplier
20 provide just a summary of the analytical results in
21 the form of a certificate of analysis, or must they
22 supply the complete analytical results?

23 MR. : Exactly.

24 MR. MUSSER: Okay. The way that we would
25 address this is that when we would perform an

1 inspection, those complete records would have to be
2 on the site. So you would have to have the
3 complete analytical results on your site for an
4 inspection; so not just a copy of those results, or
5 a summary of those results. You would need the
6 complete documentation of those--you know, what
7 test was used, what the analytical results were;
8 you know, a representative hard copy of those
9 results--enough so that someone could look at that
10 paperwork and determine that a test was performed;
11 that results were obtained; that a method was used,
12 and not simply the--you know, just a printout of an
13 analytical result or summary of an analytical
14 result.

15 Is that sufficient?

16 MR. MUSSER: It answers--but, if I could,
17 just one more follow--up.

18 The person that has to maintain all that
19 documentation, is it the manufacturer of the
20 ingredient itself--the single component? If Dupont
21 is providing an ingredient, a drug manufacturer is
22 buying that and then they're compounding it into a
23 drug or, you know, a dietary supplement. When you
24 say the complete ingredient result, is that Dupont,
25 the ultimate manufacturer, or is it the dietary

1 supplement manufacturer that has to have those
2 complete results?

3 [Pause.]

4 Sorry.

5 [Laughter.]

6 MR. MUSSER: So, the question is: who
7 maintains the record? The supplier or the
8 manufacturer.

9 In this case, it would be the manufacturer
10 maintaining the records. That's who we would
11 inspect, that's who GMPs would cover. Typically,
12 if you have a supplier, a drug firm, you know, that
13 you're using, you would entail much of the same
14 thing that we're asking here, in that you would
15 inspect--and even if they were an overseas or a
16 foreign firm, you would have some way of looking at
17 their laboratory to make sure that it's
18 appropriate, designing the test for them to use.
19 You would have all that analytical data submitted
20 with each batch that was shipped in for
21 manufacture. And, typically, the manufacturer
22 maintains all of that information--and I say
23 "typically" because there are some exceptions, but
24 in most cases that would be the case.

25 Is there any way we can get a microphone

1 to these people?

2 MS. McDONALD: Those who have further
3 questions will have to come down here a little bit
4 closer.

5 MS. : [Off mike] In essence, the
6 manufacturer--or the buyer--is doing a laboratory
7 operation.

8 MR. MUSSER: I'm sorry, I'm just finding
9 it difficult to paraphrase your questions.

10 MS. STRAUSS: [Off mike] Janet, why don't
11 you just have them come up on the podium
12 [inaudible].

13 MR. MUSSER: From your comments, then, are
14 you suggesting that the manufacturer would have to
15 have a copy of all the records pertaining to the
16 testing, including, perhaps, even copies of the
17 chemists' notebooks, and all of the written records
18 pertaining to the testing?

19 That's generally not required--certainly
20 not specified in this particular regulation that
21 they have that. If you felt that that particular
22 clarification were necessary, or that it was
23 ambiguous in the way that it is currently written,
24 you know we would love to hear about it and--I know
25 that this particular part is very difficult for

1 people unfamiliar with this type of testing to
2 understand, especially with inspections, as well.
3 And so if there is clarification that you feel is
4 necessary, we would love to hear from you, but
5 that's--your particular question: typically, not
6 required.

7 MR. : And, also, with respect
8 to graphs and charts from analytical equipment,
9 would copies of those have to be made available by
10 the manufacturer?

11 MR. MUSSER: By "graphs and charts" do you
12 mean calibration and performance specifications?

13 MR. : No, just the testing
14 itself--say, an HPLC.

15 MR. MUSSER: Oh, HPLC chromatograms? Oh,
16 yes. Yeah. I mean, that would be--if I were an
17 inspector, and one of your criteria was that it's
18 95 percent pure by HPLC, I'd want to be looking at
19 the HPLC trace and see an integration for that.
20 That would be impossible for me to determine in any
21 other way.

22 MR. : Just to clarify something
23 from the Dupont hypo about who would be required to
24 actually have the test result documentation--you
25 said it would be the manufacturer. But would the

1 answer actually also be "whoever's being
2 inspected?" So it could be the manufacturer, it
3 could be the supplier, as well. So Dupont would
4 have to have that as well, if you all went into
5 Dupont's plant as a supplier? Right or wrong?

6 MR. MUSSER: Yes, I think if we are
7 inspecting the supplier, yes, you would have to
8 have that--undoubtedly. Yes.

9 I think we'll take this question and hope
10 that this clarifies most--please--but in the
11 interest of answering more questions, we'll try and
12 move on after this one.

13 MS. : I just want to clear up
14 something. I think the earlier question on
15 hermatographic charts--and you responded "yes," but
16 you did say that that is when we're trying to show
17 percentage of impurity. I do not think that you
18 meant that for the potency testing. Because then
19 that would be horrendous amount of records you're
20 going to be imposing on the manufacturer of the
21 finished product.

22 I think, if I may say this--I think your
23 intent is that's to make sure that we don't have a
24 typical analysis and represent that as a C of A;
25 that perhaps something like a laboratory summary,

1 wherein we say--given a test, let's say, vitamin A,
2 and say what is the methodology used, and say what
3 was the actual result, signed by an analyst or the
4 laboratory--would that work?

5 Because right now, the drug--Part 210 to
6 11, allow you to use such. And in other words--and
7 as long as we validate that supplier, that raw
8 material supplier on how they come up with those
9 analyses. In other words, like you said, use them
10 like our outside laboratory. But we don't need to
11 have the details of the report of the laboratory,
12 but we need to have a signed certificate--

13 [Technical difficulty.]

14 MR. MUSSER: In fact, I don't think that
15 that is entirely correct. The data--the raw data
16 used in any testing must be available for an
17 inspection. And this is very consistent throughout
18 our rules. And the rule implies that all of that
19 data must be available on the site for testing, or
20 for inspection. Is that correct, Karen? Yes?

21 MS. STRAUSS: I'm sorry?

22 MR. MUSSER: The information must be
23 available on site for inspection.

24 MS. STRAUSS: Yes.

25 MR. MUSSER: Yes--and that all of that

1 information would need to be on--site.

2 If you feel that it's unclear, or that the
3 rule is deviating from that information which is
4 already allowed, or is more stringent, or we're
5 requiring something which is unnecessary, we would
6 like to hear from you in a written comment to the
7 docket.

8 [Pause.]

9 I think we'll move on to Peter, then.

10 MR. VARDON: I have a few questions this
11 time, and I'll go through two or three--how's that?

12 MS. STRAUSS: Sure.

13 MR. VARDON: How does a three--year
14 enforcement moratorium on small business lower the
15 costs of what you identified as ongoing?

16 I think what the questioner is asking is:
17 what good does the three--year compliance
18 allow--how does that reduce the compliance cost on
19 small firms? And it does it in a couple of ways.

20 By giving a small firm three years to
21 comply, they can get whatever training is
22 necessary. If they buy new equipment, they can
23 amortize it over a three--year period, so that the
24 annual cost is reduced for them.

25 But, primarily, is--or, if they need to

1 formulate, or if they need to do other
2 things--whatever they have to do to comply, they
3 can do it over a three--year period instead of over
4 a one--year period. And so the amortization period
5 is over three years.

6 But, primarily, it's also for training.
7 Our thinking is that many of these small firms,
8 with eight people, may not have the sophistication
9 of the large firms. So they may actually have to
10 go to school, or they may have to--if--may have to
11 find out, "How do I prepare records? I've never
12 done it before." But our thinking is that with
13 three years, they'll have an opportunity--a greater
14 opportunity.

15 Yes?

16 MR. : [Off mike] I think you can
17 all hear me.

18 MS. STRAUSS: But the transcriber--please
19 come up.

20 MR. : [Off mike] I'll try to be
21 brief and a little clearer [inaudible].

22 Specifically, the question was meant to
23 address items that you've identified clearly as
24 ongoing costs--i.e., the hiring of additional
25 personnel. And it's unclear to me how additional

1 staffing is minimized by a three--year moratorium
2 on enforcement as a direct example.

3 MR. VARDON: Well, you're right. If it's
4 ongoing, then it's not. It's really for those
5 capital improvements and other things.

6 Another questioner asked: if you're aware
7 that 35 percent of companies don't follow GMPs, why
8 not actively enforce 21 CFR § 110 for those 35
9 percent?

10 The significance of the statistic of 35
11 percent isn't that they're not doing anything.
12 They actually may have sanitary facilities, or they
13 may do the other things that are required by 110.
14 The point is that they may not be consciously
15 following a food GMP model--just not aware of it.
16 And so it's just a measure of, perhaps, the
17 ignorance in the industry.

18 And I'll try to answer one more question:
19 in your economic assessment, how do you justify
20 having CGMPs drop dietary supplement recalls to
21 essentially zero?

22 That's an excellent question, and we've
23 been asked that a lot, including by OMB. But our
24 premise is that if you actually follow these rules,
25 and you follow them faithfully, and comply with all