

UNITED STATES DEPARTMENT OF AGRICULTURE
NATIONAL ADVISORY COMMITTEE
ON MICROBIOLOGICAL CRITERIA FOR FOODS
(NACMCF)

PLENARY SESSION

Wednesday, September 28, 2005

The Committee met in the Omni Colonnade Hotel at 180
Aragon Avenue, Coral Gables, Florida, at 8:30 a.m.,
Dr. Richard A. Raymond, Chairperson, presiding.

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Members Present:

RICHARD RAYMOND, Ph.D., Chairperson
 ROBERT BRACKET, Ph.D., Vice-Chairperson
 DR. GARY ADES, Member
 DR. KATHRYN BOOR, Member
 DR. SCOTT BROOKS, Member
 DR. PEGGY COOK, Member
 DR. DANIEL ENGELJOHN, Member
 DR. TIMOTHY FREIER, Member
 DR. LINDA HARRIS, Member
 DR. WALT HILL, Member
 DR. MICHAEL JAHNCKE, Member
 DR. LEE-ANN JAYKUS, Member
 MAJ ROBIN KING, Member
 MS. BARBARA KOWALCYK, Member
 DR. JOSEPH MADDEN, Member
 DR. ALEJANDRO MAZZOTA, Member
 DR. JIANGHONG MENG, Member
 DR. DALE MORSE, Member
 DR. DONALD SCHAFFNER, Member
 MS. VIRGINIA SCOTT, Member
 DR. JOHN SOFOS, Member
 DR. STERLING THOMPSON, Member
 DR. IRENE WESLEY, Member
 DR. DONALD ZINK, Member

Attendance by Phone:

MS. EMILLE COLE (for Spencer Garrett)
 DR. PATRICIA GRIFFIN, Member
 DR. ANN MARIE MCNAMARA, Member
 MS. ANGELA RUPLE, Member

Executive Committee Members Present:

DR. LEEANNE JACKSON, FDA Liaison
 DR. DAVID GOLDMAN, FSIS Liaison
 LTC. BRADFORD W. HILDABRAND, Defense
 Department Liaison
 DR. ARTHUR LIANG, CDC Liaison
 MS. GERRI RANSOM, Executive Secretariat
 MS. KAREN THOMAS, Advisory Committee Specialist

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FSIS STAFF:

DR. CELINE NADON
MS. NISHA OATMAN

FDA STAFF:

DR. MARY LOSIKOFF

OUTSIDE PARTICIPANT:

MR. MARK WORTH, Public Citizen

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P R O C E E D I N G S

(8:30 a.m.)

1
2
3 DR. RAYMOND: Good morning everybody.
4 For those of you who don't know me, and most of you do
5 not, I have not met you yet, I am Dick Raymond. I am
6 the new Under Secretary for Food Safety of USDA, and
7 one thing I do believe in is starting meetings on time
8 in respect for those who are able to get here on time.

9 I want to welcome you members and also our
10 guests to this Plenary Session of the 2004-2006
11 National Advisory Committee on Microbiological
12 Criteria for Foods.

13 This is my first NACMCF meeting,
14 obviously, as the NACMCF Chair, but I don't feel
15 foreign to the role that I will play with this
16 Committee. I have served on many Advisory Committees,
17 both State and National, and in fact, the day I got
18 the call that the Senate had scheduled my confirmation
19 hearing, I was in CDC serving on a National Advisory
20 Committee for Pandemic Flu preparations. I have also
21 served on the National Vaccine Advisory Committee for
22 a couple years in my role as State Health Official.

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1 I recognize the value that Advisory
2 Committees bring to Federal Government and State
3 Government, and I do thank you for the time you're
4 going to spend helping us get through some very
5 difficult issues. We will listen to your advice,
6 obviously, and act appropriately.

7 The last six and a half years of my life I
8 was serving as a Chief Medical Officer for the State
9 of Nebraska, chaired many Advisory Committees for the
10 Governor, then Governor Johanns, now Secretary
11 Johanns. And I must have done a decent job during
12 those Committees because he asked me to come to
13 Washington and work with him and Chair this Committee
14 and a few others. So I'm looking forward to the
15 exchange today.

16 I know we've got a lot of work to do and I
17 know we'll do it diligently and openly. Most of you
18 probably know the guy to my right, Dr. Bob Brackett, a
19 whole lot better than you know me. Now Bob's kind of
20 been up and down the last week whether he's going to
21 be with us or not, and I think he felt a little bit
22 nervous about letting me chair the Committee without

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1 him sitting at my right, since this is one of his
2 passions. So I'm really, really glad that Bob was
3 able to shake loose, at least for today, to work with
4 us on this. I'm going to give part of the
5 responsibilities of this meeting to him so I can sit
6 back and watch and learn.

7 Before I go any further though, I do want
8 to say that the USDA Food Safety Inspection Service,
9 the Department of Health and Human Services, Food and
10 Drug Administration and the Centers for Disease
11 Control and Prevention, Department of Commerce,
12 National Marine Fishery Service, and the Department of
13 Defense Veterinary Service Activity are all seeing you
14 as performing a valuable service to help us do our
15 job. NACMCF is providing the scientific advice to our
16 nation's food safety programs, which are several. And
17 on behalf of those sponsoring agencies that I just
18 listed, I would like to thank each of you for your
19 hard work and for sharing your expertise and
20 supporting the activities of this Committee, not just
21 today, but on all subcommittee work that you also do.

22 The three newly formed NACMCF

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1 Subcommittees that met this past July to begin work
2 are the Subcommittee on the Analytical Utility of
3 *Campylobacter* Methodologies, chaired by Dr. Dan
4 Engeljohn, the Subcommittee on Consumer Guidelines for
5 the Safe Cooking of Poultry Products, also chaired by
6 Dr. Engeljohn, and the Subcommittee on Determination
7 of Cooking Parameters for Safe Seafood for Consumers,
8 chaired by Mr. Spencer Garrett.

9 Before I continue, I do want to mention
10 that it's especially unfortunate that Spencer Garrett
11 and also Angela Ruple are unable to be with us in
12 person this week as they were directly affected by
13 Hurricane Katrina at their home base in Mississippi.
14 We are glad that they and their colleagues that serve
15 NACMCF are safe and sound and getting back up to speed
16 after the storm damage that they suffered and their
17 institution suffered. I think Angela is going to be
18 with us, if not already on the phone, and we're not
19 sure about Spencer. We certainly wish them and all of
20 our other colleagues along the coastal states well
21 during the time of rebuilding, and we will miss our
22 National Marine Fishery Services folks during this

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1 week's meetings especially.

2 Filling for Spencer Garrett today as
3 Subcommittee Chair is Dr. Lee-Ann Jaykus of the North
4 Carolina State University. We are grateful to Dr.
5 Jaykus for taking on this responsibility on such a
6 short notice. Thank you, Lee-Ann for your willingness
7 to take on the work for the Seafood Subcommittee this
8 week. I think we probably are in good hands, at least
9 that's what everybody tells me.

10 Now, this morning our Subcommittee Chairs
11 will report their progress to us on each of the
12 important food safety projects. As a matter of fact,
13 the *Campylobacter* group intends to wrap up their work
14 today, hopefully, and they have submitted their
15 document to the Full Committee for consideration of
16 adoption today. This *Campylobacter* methods project is
17 very important to us at FSIS as it will provide us
18 with NACMCF guidance for establishing a *Campylobacter*
19 method for an upcoming broiler rinse baseline study.

20 We will also hear reports on the poultry
21 cook and seafood cook discussions. Both these
22 projects will greatly benefit consumers and our

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1 Federal agencies with the most current information on
2 safe cooking parameters for these products on related
3 food safety issues.

4 Also at this morning's sessions,
5 fortunately, Bob Brackett is here, and he will be
6 introducing a concept for a new FDA work charge
7 for NACMCF; that being the assessment of the food
8 safety importance and public health significance of
9 *Mycobacterium avium* subspecies *paratuberculosis*.
10 That's a mouthful. So Bob, I'm glad you're here to
11 introduce it; I don't have to.

12 Before we have Committee members introduce
13 themselves so I can start putting names to faces, I'd
14 like to turn the floor over to our Vice Chair, Dr. Bob
15 Brackett.

16 DR. BRACKETT: Thank you, Dick.

17 First off, I would like to welcome on
18 behalf of the Committee too, Dr. Raymond to this role
19 as Chair, and I think that you will find it not only
20 interesting, but actually quite rewarding to
21 participate. And also, I'd like to welcome everyone
22 to the Plenary Session this morning. I'd like to

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1 thank the members for volunteering their time and the
2 expertise and the support of the activities of this
3 Committee. As you know, your participation and effort
4 will allow us and the Committee here to move forward
5 on a number of important public health protection and
6 food safety initiatives. And so I do really look
7 forward to what is often very insightful discussions.

8 At this time I would like to stop and
9 allow you all to introduce yourselves. So we'll go
10 around the tables. And make sure that you speak into
11 the microphones since this is being recorded, state
12 your name and your affiliation. And I'll guess we'll
13 start with Tim Freier.

14 DR. FREIER: Hi. Tim Freier with Cargill.

15 DR. ZINK: Don Zink with FDA, Center for
16 Food Safety and Applied Nutrition.

17 DR. THOMPSON: Sterling Thompson, The
18 Hershey Company.

19 DR. COOK: I'm Peggy Cook with Safe Foods
20 Corporation.

21 DR. ADES: Gary Ades, Independent
22 Consultant.

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1 DR. BOOR: Kathryn Boor, Cornell
2 University.

3 DR. BROOKS: Scott Brooks with E & J
4 Gallo.

5 DR. HARRIS: Linda Harris, University of
6 California, Davis.

7 DR. JAHNCKE: Michael Jahncke, Virginia
8 Tech.

9 DR. SCHAFFNER: Don Schaffner, Rutgers
10 University.

11 DR. MADDEN: Joseph Madden, Neogen
12 Corporation, Lansing, Michigan.

13 DR. HILL: Walt Hill, formerly FSIS, now
14 a free agent.

15 (Laughter.)

16 DR. WESLEY: Irene Wesley, U.S.
17 Department of Agriculture, National Animal Disease
18 Center in Ames, Iowa.

19 DR. MAZZOTTA: Alejandro Mazzotta with
20 McDonald's Corporation.

21 DR. MORSE: Dale Morse, New York State
22 Department of Health and Counsel State and Territorial

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1 Epidemiologist.

2 DR. JAYKUS: Lee-Ann Jaykus, North
3 Carolina State University.

4 DR. ENGELJOHN: I'm Dan Engeljohn with
5 USDA's Food Safety and Inspection Service.

6 MS. SCOTT: I'm Jenny Scott with the Food
7 Products Association.

8 DR. SOFOS: John Sofos with Colorado
9 State University.

10 MS. KOWALCYK: Barbara Kowalcyk, Safe
11 Tables Our Priority.

12 DR. MENG: Jianghong Meng, University of
13 Maryland.

14 MAJOR KING: Robin King, Department of
15 Defense.

16 DR. LIANG: Art Liang, CDC Food Safety
17 Office.

18 LTC. HILDABRAND: Brad Hildabrand,
19 Department of Defense Veterinary Service Activity.

20 DR. GOLDMAN: David Goldman with the
21 Office of Public Health Science at FSIS.

22 DR. JACKSON: LeeAnne Jackson, FDA,

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1 Center for Food Safety Applied Nutrition.

2 MS. RANSOM: Gerri Ransom, Food Safety
3 Inspection Service and NACMCF Executive Secretariat.

4 At this time could we phase over to the
5 phone and have those folks who are hooked in by phone
6 introduce themselves?

7 DR. McNAMARA: Ann Marie McNamara,
8 Silliker.

9 DR. BRACKETT: Ann Marie, we didn't quite
10 hear you and our court reporter isn't hearing that.
11 Could you try speaking a little bit louder and we'll
12 see if that is any better.

13 DR. McNAMARA: Ann Marie McNamara,
14 Silliker.

15 DR. BRACKETT: It was Ann Marie McNamara
16 from Silliker Labs. I'll just repeat it so that our
17 reporter can hear it.

18 MS. RUPLE: Angela Ruple, NOAH Fisheries.

19 DR. GRIFFIN: Patricia Griffin, Centers
20 for Disease Control.

21 DR. RAYMOND: Is John Kvenberg on the
22 line?

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1 (No response.)

2 DR. RAYMOND: Okay, I think that's all
3 that we have for now. At this time I'd like to turn
4 the floor back over to Gerri Ransom of our Executive
5 Secretariat, who can provide you with some other
6 additional information that you'll need.

7 MS. RANSOM: Okay. Good morning everyone
8 and welcome again. I wanted to take care of one more
9 introduction today. To my left we've got Dr. Celine
10 Nadon who is a Food Safety Fellow at our office who is
11 going to be helping us with our *Campylobacter*, and
12 also with our seafood work in the next couple of days.

13 As always, if anyone needs any assistance,
14 please don't hesitate to contact me or Karen Thomas if
15 you should need anything. I also wanted to mention
16 for any guests today who wish to make public comment,
17 to please sign up outside with Sally. You are limited
18 to ten minutes for each public comment, so please get
19 on the list if you'd like to do that.

20 I also wanted to point out to our guests
21 that we do have a table out front with NACMCF related
22 documents. So feel free to pick up any materials that

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1 you would like. Also, if you would like to distribute
2 any materials, please see Sally about that.

3 Okay. Related to NACMCF business, I have
4 a couple of things I wanted to mention. At this
5 point, we're just about halfway through our 2004-2006
6 NACMCF term; time flies. This current Committee and
7 Charter will run through September 23, 2006. And very
8 shortly Karen and I will be initiating the long ream
9 of paper work that we have to go through to renew the
10 Committee. So we've got that in mind and we will be
11 working on that.

12 I also wanted to mention that the week of
13 March 20, 2006 is being looked at as our next week of
14 meetings. I know a couple of you do have a conflict
15 with this time, so we may be looking at another week
16 in March or beyond. But please get in touch with
17 Karen or I and let us know how this week in March
18 looks for you, and other weeks in March as well.

19 On a minor note, I wanted to remind
20 everybody, please look under Tab 3 in your notebook on
21 the address list and let us know if there's any
22 changes that need to be made to your contact

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1 information.

2 And finally, most importantly, I wanted to
3 mention to you, make sure that you're pretty prompt in
4 getting Karen your information for reimbursement for
5 travel, because we are at the close-out of our fiscal
6 year so she's under the gun to get the travel
7 information in to reimburse you. So please see her if
8 you have any issues with that.

9 And also I wanted to say, we do apologize
10 if you've had any trouble related to hurricane Katrina
11 and getting reimbursed for the last trip, because that
12 did cause us some problems.

13 I'm looking forward to working with you
14 for the rest of this week, and so far we've had good
15 meetings. At this time I'm going to turn the floor
16 back over to Dr. Raymond.

17 DR. RAYMOND: Thanks, Gerri. And you'll
18 note we're now fifteen minutes ahead of schedule. So
19 now we're going to get into the work part of this
20 Committee, and the first is going to be Analytical
21 Utility of *Campylobacter* Methodologies, and we'll
22 follow that with the Determination of Cooking

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1 Parameters for Safe Seafood for Consumers, and follow
2 that thirdly with the Consumer Guidelines for Safe
3 Cooking of Poultry Products.

4 So now, with no further ado, I'll call
5 upon Dr. Dan Engeljohn to lead our *Campylobacter*
6 discussion. Dr. Engeljohn will explain the document
7 and then Dr. Brackett will lead the discussion for
8 adoption.

9 First, who just joined us on the phone?

10 MS. COLE: Emille Cole, National Marine
11 Fisheries Service.

12 DR. RAYMOND: Thank you, Emille.

13 Is there anybody else that's joined us
14 that we didn't hear?

15 (No response.)

16 DR. RAYMOND: I didn't think so.

17 Okay, Dan?

18 DR. ENGELJOHN: Thank you very much. I
19 was honored to be the Subcommittee Chairperson for the
20 *Campylobacter* work that we've done this past year. I
21 had twelve members assigned to this Subcommittee. We
22 had additional members of the Full Committee who

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1 joined us in helping to address the questions that
2 FSIS specifically asked the Committee to address.

3 If I could, I'll just walk through and
4 give an overview of what we did and where we stand
5 today, and then some housekeeping things, because we
6 have a couple of changes to the document that were
7 submitted to me earlier so that we could get them
8 typed up, and we'll pass them around to the
9 Subcommittee and Full Committee members so that you
10 can review those written changes in advance.

11 And then I have two documents that were
12 submitted that were asked for as part of the
13 Subcommittee's work. We'll also identify what those
14 documents are.

15 There were six questions that FSIS asked
16 the Committee to address with regards to
17 *Campylobacter*.

18 I'm sorry, Gerri, did you have a question?

19 MS. RANSOM: I just wanted to say the
20 handouts are in the process of being copied and
21 they're going to be emailed to the folks on the phone.

22 DR. ENGELJOHN: Thank you. And I have

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1 them here, Gerri, if I can get some help in passing
2 them around, that would be helpful, while I'm talking.
3 Just do the overview. *Campylobacter* has been an issue
4 that this Committee has dealt with over the years. In
5 1993 the Committee actually worked on the issue and
6 published a journal article about *Campylobacter*. FSIS
7 then came back to the Committee to ask questions twice
8 in the past. In 1999 we were specifically asked to
9 address *Campylobacter* and its ability to be used as a
10 performance measure in addition to *Salmonella* in raw
11 classes of meat and poultry.

12 At that time the Committee did work on the
13 issue but did not come to conclusions, in that it
14 believed it needed more information from the Agency
15 before it could actually address the issue of
16 establishing a performance standard for *Campylobacter*.

17 And then in 2002 FSIS presented
18 information about a baseline that we had completed,
19 but had concerns about the methodology. And so
20 really, since 2002, FSIS has been specifically looking
21 as to what methodology should be used in order to
22 standardize that methodology and begin conducting a

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1 formal baseline study that could be used to inform
2 risk management.

3 Did someone just join us on the telephone?

4 DR. BRACKETT: Or did someone just leave
5 us?

6 DR. ENGELJOHN: All right. With that,
7 then I'm not going to read the six questions, because
8 I think there is a need to go through the document.
9 Dr. Raymond or Dr. Brackett, are you going to walk us
10 through? Okay.

11 We'll go through the document, I believe
12 paragraph by paragraph, or at least page by page for
13 substantive changes. As I said, there will be three
14 documents that are going to be handed around that
15 contain some suggested changes with wording that the
16 Committee does need to review.

17 And with that, I think I'll stop there and
18 begin the process.

19 DR. BRACKETT: Okay, thank you, Dan. And
20 again, did someone else join us on the phone? Right
21 now I have Patty Griffin, Ann Marie McNamara, Angela
22 Ruple and Emille Cole. Is there anyone else on the

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1 phone?

2 (No response.)

3 DR. BRACKETT: The way that we have done
4 these before, and I think we'll work this way too, as
5 Dan said, we'll go through page by page. With each
6 page we'll ask for any comments or questions about the
7 document. When you do ask, the procedure we have used
8 in the past is to take your table tent (card), bring
9 it up like a flag, and state your name and affiliation
10 for the reporter when you do ask your questions.

11 So I guess, first of all, we'll start
12 actually on Page 2 to make sure there's nothing that
13 anyone sees in this. That's just the Table of
14 Contents. Actually getting into the text, Page 4, the
15 Executive Summary.

16 Ann Marie McNamara?

17 DR. McNAMARA: (Inaudible.)

18 DR. BRACKETT: Ann Marie, could you hold
19 on. We're going to put a microphone up to the speaker
20 phone so that we can hear for the court reporter.

21 All right, sorry, could you start all over
22 again, including name and affiliation?

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1 DR. McNAMARA: Okay, I'll try again.

2 This is Ann Marie McNamara from Silliker.

3 And I wanted clarification under the third bullet
4 point in what was meant by the Committee. It says
5 "FSIS must clearly state the objectives and potential
6 use of the baseline data and determine data collection
7 from a single carcass rinse for the analysis of *E.*
8 *coli*, *Salmonella* and *Campy* data that would be
9 beneficial for the evaluation of an indicator organism
10 for the industry and agency."

11 And I am confused about what the benefit
12 for the evaluation of an indicator organism is,
13 because the only indicator organism there is *E.coli*.
14 You're really looking at *Salmonella* and *Campylobacter*
15 as pathogens.

16 DR. BRACKETT: Okay, Dan?

17 DR. ENGELJOHN: This is Engeljohn with
18 FSIS.

19 On that particular issue, I think the
20 Agency as well as looking at not just the pathogens
21 that may serve as a means by which the Agency could
22 look at progress with regards to sanitary dressing and

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1 the level of exposure of pathogens on products, but
2 we're also looking at process control. And presently
3 the Agency is working on a project partnering with the
4 Agricultural Research Service in which we're looking
5 at nonpathogenic indicators of process control in the
6 slot of operation.

7 And so we broadly stated indicators
8 because we didn't want to limit ourselves to just
9 pathogens.

10 DR. McNAMARA: Okay, thank you for that
11 clarification.

12 DR. BRACKETT: Lee-Ann Jaykus?

13 DR. JAYKUS: Lee-Ann Jaykus, North
14 Carolina State University.

15 Just a wording suggestion on the third
16 paragraph, second -- actually third, fourth line from
17 the bottom, "prevalence and numbers," since you're
18 talking about enumerative data.

19 DR. BRACKETT: Prevalence and numbers of
20 *Campylobacter* is what you're saying?

21 DR. JAYKUS: Correct.

22 DR. BRACKETT: Dan, did you have any

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1 comments? Do you have any comments about that
2 suggestion?

3 DR. ENGELJOHN: I'm sorry?

4 DR. BRACKETT: Do you have any comments
5 about that?

6 DR. ENGELJOHN: Oh, no, it sounds great.

7 DR. BRACKETT: Okay, so we can include
8 that.

9 And just to go back, Ann Marie, did Dan's
10 explanation answer your question?

11 DR. McNAMARA: He did answer the
12 question. I don't think it's very well stated, but I
13 understand where he was going.

14 DR. ENGELJOHN: If I could, Ann Marie,
15 Barbara Kowalcyk has actually offered some change
16 later in the text with regards to this particular
17 issue, I think. And so maybe with her new language,
18 we can possibly adjust that particular bullet based on
19 what she submitted.

20 DR. McNAMARA: That would be fine, Dan.

21 DR. BRACKETT: So we'll need to come back
22 to this bullet then.

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1 Any other questions or comments on Page 4?

2 (No response.)

3 DR. BRACKETT: Page 5?

4 (No response.)

5 DR. BRACKETT: Page 6?

6 MS. KOWALCYK: Barbara Kowalcyk.

7 I had a question on Page 5, second
8 paragraph. Just for statistical purposes, in the last
9 sentence it says, "In that report a broiler was
10 defined as a young chicken of either sex usually under
11 thirteen weeks of age, and FSIS has proposed to reduce
12 that age requirement to under ten weeks."

13 For statistical purposes, I would hate to
14 see the study to later have apple to orange
15 comparisons, and I would recommend as a statistician
16 that there be a clear-cut definition of what a broiler
17 chicken is at the onset of the study.

18 DR. ENGELJOHN: This is Engeljohn. I'll
19 offer an explanation to that.

20 This wording actually was taken directly
21 from the previous report that the Committee worked on
22 with regards to performance standards for broiler

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1 carcasses. So we took the wording from that
2 particular document. And it was really intended to
3 provide some clarity to the Committee members as to
4 what a broiler is.

5 In practice, what is considered a broiler
6 by industry is consistent. But there is a regulatory
7 definition that is not consistent with current
8 practices.

9 So in reality, when we actually do conduct
10 the baseline or we do refer to broilers in practice,
11 that is a consistent application. It's just how we
12 define it in the regulatory text that's different.
13 And we're in the process of changing that in the
14 regulation. It won't change in practice what birds
15 are actually offered as broilers.

16 DR. BRACKETT: Page 6? No comments on
17 Page 6.

18 Page 7? Lee-Ann Jaykus.

19 DR. JAYKUS: Lee-Ann Jaykus, North
20 Carolina State University.

21 I'd like some clarification on the last
22 sentence of the second paragraph to the bottom

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1 regarding the surveillance research project.

2 DR. BRACKETT: This is on Page 7, second
3 from the bottom paragraph, last sentence?

4 DR. JAYKUS: Correct.

5 DR. ENGELJOHN: This is Engeljohn. If I
6 could, I'll attempt to answer this, and if any of my
7 Committee members can provide any additional help,
8 that would be great.

9 I would also point out that Dr. Patty
10 Griffin from CDC has provided a change which you got
11 this morning. And maybe that will also help answer.
12 But the Agency did want to insure that, and the
13 Committee wanted to insure that when we conduct this
14 baseline study that we just don't focus on the two
15 species that we believe to be of greatest public
16 health concern, because there may in fact be others.

17 I think in our discussions by the
18 Subcommittee, Dr. Irene Wesley actually identified
19 some issues with regards to turkeys coming to
20 slaughter and that possibly we should be concerned, or
21 at least looking into, whatever species we might need
22 to be looking at.

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1 So I think the real issue was we should
2 not just blindly go into a study and look at just the
3 two that we know to be a problem, but to also try to
4 get a sense for what other pathogens, related
5 *Campylobacters* should be looked at.

6 DR. BRACKETT: Is there a comment on the
7 phone? Background noise?

8 Dr. Hill?

9 DR. HILL: Walt Hill, unaffiliated.

10 In the second full paragraph on Page 7,
11 the word thermophilic is used twice, and I'm not a
12 classical microbiologist, but I think maybe thermo-
13 tolerant is the more commonly accepted term there
14 because *Campylobacter* really doesn't grow well above
15 forty-five degrees.

16 DR. GRIFFIN: Could that comment be
17 repeated for the people on the phone? This is
18 Patricia Griffin.

19 DR. HILL: Sorry, no one's accused me of
20 speaking more softly usually.

21 The word thermophilic is used twice in
22 that paragraph, and I think the word thermotolerant is

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1 more accurate there.

2 DR. BRACKETT: So your recommendation is
3 to change reference to --

4 DR. HILL: Yes, the first line in that
5 paragraph and in the third to last line, change
6 thermophilic to thermotolerant.

7 DR. BRACKETT: Heads are shaking around
8 the table that that's correct. Any opposition to
9 that?

10 (No response.)

11 DR. BRACKETT: Okay, we'll do that.

12 Oh, Irene?

13 DR. WESLEY: I'm going to back up all the
14 way to Page 4 and I'm going to use the idea that
15 coming from the Midwest I'm an hour behind you folks
16 on the east coast.

17 (Laughter.)

18 DR. WESLEY: I just wanted to look at
19 Page 4, third bullet statement up from the bottom.
20 The question I'm raising concerns the statement, "with
21 modifications as indicated throughout the report."

22 I would like to know if someone could

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1 insert, perhaps the Chair could insert, how
2 modifications would be relayed to the Committee.
3 Would it be relayed to you? Would it be relayed to
4 the folks actually doing the work in the FSIS lab?
5 But if there are modifications or developments that
6 are made, what is the best avenue for making sure that
7 these are sent to you? What is the channel for doing
8 this?

9 DR. ENGELJOHN: If I could get some
10 clarification, Irene. Which -- I'm not sure that I
11 understand what changes. You mean in terms of if the
12 methodology changes it would be changed in the lab?

13 DR. WESLEY: If there are modifications
14 that are coming after this group has finished their
15 work, what is the channel, if any, for getting further
16 -- if there are further developments in the field?
17 How do we get these to you?

18 DR. ENGELJOHN: With regards to
19 laboratory methodology?

20 DR. WESLEY: Right, exactly.

21 DR. ENGELJOHN: I think, if I could, I
22 would just opine that FSIS will assess what changes

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1 could or should be made. Because this Committee has
2 worked on this issue, at an upcoming meeting we'll
3 likely just inform you of those changes. We haven't
4 done that in the past, but I don't see that as being a
5 problem. For those of you interested that
6 participated on the Subcommittee, as the Chairperson I
7 would feel comfortable just sending out information to
8 you to let you know what changes we made and possibly
9 get feedback from you.

10 DR. BRACKETT: And that was one question
11 that Ann Marie McNamara mentioned before, that we are
12 going to come back to later in the document, that
13 particular bullet point. So before we move forward,
14 should we ask if anybody from the west coast wants to
15 go back to Page 1?

16 (Laughter.)

17 DR. BRACKETT: So we're on Page 7. Any
18 other changes, aside from what was noted earlier?

19 (No response.)

20 DR. BRACKETT: Page 8? And I think this
21 is the question that Patty Griffin had, is that not
22 the one?

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1 DR. ENGELJOHN: No, I think Patty's is on
2 Question 4.

3 DR. BRACKETT: So we have Page 12. And
4 this is the insert that you had handed out at the
5 beginning, Dan, Question 2?

6 DR. ENGELJOHN: No. I have inserts that
7 are going to affect Question 4 on Page 12, and inserts
8 I handed out that -- oh, I'm sorry, I didn't have that
9 sitting in front of me. Yes, and Barbara Kowalcyk is
10 who submitted that question.

11 MS. KOWALCYK: On Page 8 though, before I
12 get to that, on Page 8 in the last sentence of the
13 second paragraph --

14 DR. BRACKETT: Barbara, could you speak a
15 little louder?

16 MS. KOWALCYK: Barbara Kowalcyk.

17 On Page 8 in the second paragraph under
18 Question 2 in the last sentence, "The Committee also
19 recommended that FSIS be in consultation with other
20 entities to correlate *Campylobacter* methodologies when
21 possible."

22 Would it be possible to add an example or

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1 scientific entities? It kind of was unclear to me
2 what entities you were talking about.

3 DR. ENGELJOHN: Well, we could add
4 information. I think as the Subcommittee dealt with
5 this issue, we know that our European counterparts are
6 in fact working on Campy methodology, as well as
7 around the world, and then in particular in the states
8 we have the ARS researchers, many of whom are working
9 on different methodologies, and then there are
10 research institutions dealing with that.

11 So if I could suggest a change then maybe
12 to address that? The Committee also recommended that
13 FSIS be in consultation with other entities, such as
14 European, Government officials, and other research
15 institutions. Would that address your issues?

16 MS. KOWALCYK: Yes.

17 DR. RAYMOND: Dan, may I -- Dick Raymond.
18 May I suggest that when you say "would include,"
19 instead of saying European, why don't we say other
20 national governments, or whatever the right language
21 would be, instead of limiting it to European, other
22 Federal agencies, and other private and state

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1 institutions doing research, or something to that.

2 DR. ENGELJOHN: That's a good point.

3 DR. BRACKETT: Irene?

4 DR. WESLEY: Irene Wesley.

5 I have two documents that I shared with
6 the Chair that I think are probably perhaps just left
7 in the hands of the Chairperson. One of them is an
8 Audit Committee on Food Analysis, and this is their
9 April, 2005 protocol for detection and enumeration in
10 foods.

11 The second document that I shared with Dr.
12 Engeljohn is a draft of the technical specifications
13 for an EU monitoring scheme for Campy in broiler
14 chickens.

15 I bring this to the Committee because one,
16 both of them use the guidelines of the Gooden
17 laboratory protocols for detailing all of the
18 conditions for analysis, and I think that that detail
19 should also be incorporated in the protocol that's
20 ultimately adopted by FSIS for their baseline.

21 I also bring them here because they're
22 current and they do show the desire of this Committee

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1 to look to the other side of the Atlantic Ocean for
2 potential comparison of methods.

3 DR. ENGELJOHN: And I think with that,
4 possibly we could add a footnote to reference these
5 two documents. Irene had promised to bring the
6 documents to the Committee for our review. And what I
7 intend to do is, when we get this document done, and
8 we'll be sending out a revised version to the Full
9 Committee, in that document we will also include
10 copies of this. So we'll scan them into a file and
11 make sure everyone has a copy of it.

12 But I would note that they are in fact,
13 and would be quite help to FSIS in the design of our
14 program. So we will incorporate them.

15 DR. BRACKETT: And where would you
16 propose to put the footnote on the document?

17 DR. ENGELJOHN: I think in that actual
18 sentence where it says, "The Subcommittee also
19 recommended that FSIS be in consultation with other
20 entities, such as other national governments, Federal
21 agencies, and private institutions," what we just
22 added, and then add a footnote there with these two

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1 documents.

2 DR. BRACKETT: Okay.

3 Walter?

4 DR. HILL: I'm Walt Hill.

5 I have a couple of comments on that large
6 paragraph in the middle of the page about a third of
7 the way down. And I also suggest in the future maybe
8 we could number the lines to facilitate these kind of
9 indications.

10 Is it true that the Committee would like
11 to reference the creation of a performance standard at
12 this point, talking about regulatory policies and risk
13 assessments? Is it the intent of the Subcommittee and
14 also the Full Committee then to have this data perhaps
15 support some kind of performance standard? That's a
16 question.

17 And also the word "in relation to
18 indicator organisms," perhaps we really mean the
19 utility of indicator organism?

20 DR. BRACKETT: Walter, where are you
21 looking specifically?

22 DR. HILL: I'm right about in the middle

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1 of that large paragraph on Page 8 where it starts,
2 "The Committee also suggested that FSIS has considered
3 *E.coli*, *Salmonella* and *Campylobacter* from the same
4 carcasses rinse to obtain information in relation to
5 an indicator organism."

6 I believe that the intent is to use *E.coli*
7 as an indicator organism and that data would support
8 the utility of that conclusion.

9 DR. BRACKETT: Dan?

10 DR. ENGELJOHN: That sounds very good.
11 Thank you.

12 DR. BRACKETT: And that relates back to
13 what Ann Marie mentioned.

14 DR. HILL: Yes. And then finally, right
15 after that, we're talking about relative -- I'd like
16 to make a comment about relative sensitivities of
17 qualitative versus quantitative methods, especially
18 when you're looking for indicator organisms.

19 FSIS got into a little bit of a difficulty
20 with the previous study where they were looking at the
21 utility of generic *E.coli* as an indicator of O157, and
22 the methods they used had different sensitivities. So

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1 you end up with a sample being negative for generic
2 *E.coli*, but still having a positive enumeration for
3 O157, which doesn't really make any microbiological
4 sense.

5 So in any design of the study when you're
6 looking to compare these organisms, presence, absence
7 or quantification, you need to use the same method
8 sensitivity in order to have those results
9 meaningfully comparable.

10 DR. BRACKETT: How would you, or do you
11 propose changing the language in that particular
12 sentence or that paragraph?

13 DR. HILL: Well, I just think that maybe
14 there could be a sentence inserted, that to make sure
15 that these data and utility in terms of looking at the
16 possibility of indicator organisms, that method
17 sensitivity be addressed. Or you could spell it out
18 in even more detail, that methods of equal sensitivity
19 must be used.

20 DR. BRACKETT: Dan, did you have any
21 suggestions or response to that?

22 DR. ENGELJOHN: I tried to write down

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1 what Walt was saying, which I'm fine with adding that
2 as guidance. So, let's see, I guess before the
3 sentence that says "The Committee stated that FSIS,"
4 before that we'll add a new sentence that says, "To
5 insure that data have utility for use of indicator
6 organisms, methods sensitivity must be assessed to
7 assure that they are of equal sensitivity to those
8 used for the pathogens."

9 Is that what you're suggesting, Walt?

10 DR. HILL: Essentially, yes.

11 DR. ENGELJOHN: Okay. Clearly, I will
12 need some help on editing that sentence.

13 DR. BRACKETT: If we could read that
14 again, just for the people on the telephone.

15 DR. ENGELJOHN: It says, "To insure that
16 data have utility for the use of indicator organisms,
17 method sensitivity must be assessed to make sure that
18 they are of equal sensitivity to those used for the
19 pathogens."

20 DR. BRACKETT: Any other comments about
21 that insertion?

22 DR. ENGELJOHN: I would add that if in

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1 fact we find that we can word that better when we're
2 editing the document, if we could have the license to
3 just make those -- get the intent there, but make it
4 more pretty and understandable, we will certainly work
5 on that.

6 DR. BRACKETT: Walter, did you have
7 anything more?

8 DR. HILL: Not on that page, no.

9 DR. BRACKETT: And Kathryn, I saw your
10 flag was up. Did you have a comment?

11 DR. BOOR: Just to reiterate what Walt
12 and Ann Marie said. I wanted clarification of the
13 fact that *E.coli* and *Salmonella* were the indicator
14 organisms in question for *Campylobacter*.

15 DR. BRACKETT: So this addresses your
16 concern as well?

17 DR. BOOR: Yes.

18 DR. BRACKETT: Okay. Any other comments
19 on Page 8? Joe Madden?

20 DR. MADDEN: Joe Madden, Neogen
21 Corporation.

22 On the paragraph that begins,

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1 "Specifically, the Committee suggested that FSIS
2 consider," at the end of that it says, "inspected
3 plants to ascertain if regulatory policies are
4 successful."

5 Are we talking regulatory policies or
6 intervention strategies here?

7 DR. ENGELJOHN: I'm sorry, Jim.

8 DR. BRACKETT: This would be the sentence
9 above the one we just talked about.

10 DR. GRIFFIN: This is Patricia Griffin.

11 I can't hear at all, and also I think
12 someone on the phone doesn't have their phone muted.

13 DR. BRACKETT: Yeah, that's a good point.

14 People on the phone, unless you're speaking, if you
15 could put your phones on mute that would be helpful.

16 MS. COLE: Well, you know, some of us are
17 on cell phones here in hurricane land and we can't do
18 that.

19 DR. BRACKETT: Sometimes you can mute
20 cell phones with Star 6. I don't know if that's
21 universal.

22 Joe, would you state this again for the

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1 people on the phone and try to yell out in the
2 microphone?

3 DR. MADDEN: Joe Madden, Neogen
4 Corporation.

5 I'm questioning the second paragraph after
6 Question 2. The second sentence begins,
7 "Specifically, the Committee suggested that FSIS
8 consider such things as" -- and going on.

9 What I am specifically questioning is,
10 that "of products in the inspected plants to ascertain
11 if regulatory policies are successful," do we mean
12 regulatory policies there or intervention strategies,
13 is the question I have?

14 DR. ENGELJOHN: And I think it's a good
15 suggestion, Joe. Intervention strategies would be
16 fine to modify that to.

17 DR. BRACKETT: So replace regulatory
18 policies with intervention strategies.

19 Other comments or questions on Page 8?

20 Irene?

21 DR. WESLEY: On Page 8, the third
22 paragraph down, around sentence number 4, and I concur

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1 with Walt Hill that numbering the lines would really
2 have been helpful, there's a phrase "multiple points
3 along the poultry processing line."

4 Would it be appropriate for this Committee
5 to state when the carcass will be sampled during
6 processing?

7 DR. BRACKETT: Same paragraph, Dan,
8 fourth line down.

9 DR. ENGELJOHN: I'm sorry, Irene. The
10 wording you wanted to add was what?

11 DR. WESLEY: Just clarification to the
12 Committee. Would it be appropriate for this Committee
13 to specify at what point carcasses would be sampled?

14 DR. ENGELJOHN: The issue of multiple
15 points along the processing line was intended to mean
16 that we would pull samples other than as our current
17 practice, which is to only pull a sample in one
18 location, such as post-chill. The intention would be
19 to pull samples similarly or modified from what we're
20 doing in the ARS/FSIS study that's under way right
21 now, in which we're pulling two samples, one at re-
22 hang and one at post-chill. And this Committee has in

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1 the past in the previous report on performance
2 standards for broilers suggested that FSIS should in
3 fact be taking samples at multiple points, so that you
4 may take it at re-hang, post-chill, pre-grinding and
5 on whole parts.

6 And so the Agency has not yet identified
7 at which points it would pull those, but would in fact
8 be looking at expanding it from just taking one sample
9 per establishment.

10 So is it my understanding then "at
11 multiple points" does not convey that?

12 DR. WESLEY: Multiple points is fine.
13 The question is, somewhere in this document do you
14 feel it's appropriate once perhaps the comparisons are
15 completed by the ARS/FSIS group in Athens, to
16 stipulate that these samples are going to be pulled at
17 a point?

18 DR. ENGELJOHN: I'm not sure I know how
19 to answer your question.

20 MS. RANSOM: Do we want to collect data
21 to determine what points we should be sampling at?

22 DR. WESLEY: Perhaps that would be

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1 appropriate. But I think if you want to lock this
2 down and define it, that somewhere along the line you
3 have to indicate at what point samples will be pulled,
4 and as Gerri commented, if you want to say that the
5 final point where carcasses will be sampled will be
6 based on on-going studies, that's fine. But I would
7 like to see clarification.

8 MS. KOWALCYK: This is Barbara Kowalcyk.
9 I had similar concerns throughout the
10 document, and that's why -- I don't know if we want to
11 jump ahead to the paragraphs that I wanted to insert,
12 but I really feel that there should be some sort of
13 sampling and data collection protocol developed that
14 would outline that, so that you do not in the end have
15 an apples to orange comparison, so that all -- you
16 know, when you're conducting the study, that you do
17 draw from the same points, you do sample in the same
18 method from plant to plant, from instance to instance.

19 DR. ENGELJOHN: This is Engeljohn.

20 I would point out that before FSIS
21 actually designs the baseline study and implements it,
22 it will create a document that will fully describe the

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1 precise points and the locations, the times, anything
2 at all that needs to be captured would be put into a
3 written document and then training to our FSIS
4 employees in pulling those samples would occur. So
5 there will be a very detailed document pulled. But
6 the Committee itself was not -- the Subcommittee in
7 particular, nor this Committee, was specifically asked
8 to define for FSIS where those points would be. FSIS
9 will, through a series of types of assessments, make
10 that determination, document that, and the baseline
11 then would remain consistent as we go through it.

12 DR. BRACKETT: And I might point out sort
13 of with relation to this, for the Committee members to
14 keep in mind that the purpose of this Committee is to
15 look at the scientific basis of the questions here and
16 that any kind of policy decision should not be
17 recommended.

18 DR. GRIFFIN: This is Patricia Griffin.

19 Would one way around that be to say, "The
20 Committee's understanding is that," and then just
21 quote the previous speaker's very nice description of
22 what FSIS would do?

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1 MS. KOWALCYK: This is Barbara Kowalcyk
2 again.

3 In my subsequent paragraphs that have been
4 handed out, I do address that and specifically say
5 that FSIS should develop a design and a sampling and
6 data collection protocol and that that should be
7 actually brought back before the Committee, because
8 the statistical -- the sampling and data collection
9 methods are very important statistical aspects of the
10 data, which will really greatly affect the validity,
11 the generalizability, and the interpretability of any
12 results from these studies. And given that FSIS does
13 have funding for continuous on-going baseline studies,
14 this should be addressed very, you know, rapidly.

15 DR. ENGELJOHN: I would say if maybe we
16 could look at what Barbara has rewritten, which would
17 be on the next page when we get to that.

18 DR. BRACKETT: John had a comment about
19 this page?

20 DR. SOFOS: John Sofos.

21 Similar language exists in the previous
22 document, the broiler document, and I was on that

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1 Subcommittee and I think the intent is that the place
2 of sampling would be selected such that would allow
3 comparison of the affects of interventions, as we say
4 there, whether they work or not. And because the
5 Subcommittee didn't know at that time exactly what
6 interventions are used throughout the industry, they
7 determined that FSIS would figure out exactly which
8 points should be tested in a way that the
9 interventions would be evaluated whether they work or
10 not. And I think that's what the intent of this is
11 also here.

12 DR. BRACKETT: So what I'm hearing is
13 that it was the intent of the Subcommittee to keep it
14 general with the understanding that more detailed
15 documents would be forthcoming?

16 DR. SOFOS: Right.

17 DR. BRACKETT: Dan, any other comments?

18 Walter Hill?

19 DR. HILL: Yes. Walt Hill.

20 Is there the intention that the Agency
21 would bring this protocol before the Committee, or
22 would they just issue it as their intent and proceed

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1 without further review?

2 DR. ENGELJOHN: The intent of the Agency
3 at this time is to develop that protocol and test it
4 once this document is adopted as a guidance document,
5 and then begin the baseline studies as quickly as
6 possible after the beginning of the year.

7 The Agency would in fact come back to this
8 Committee either with the design and present it to
9 them so that they have access to it, but as Barbara
10 had mentioned as well, there will be on-going
11 baselines for which the opportunity to come forward
12 with the design of baselines in general would be
13 something that the Agency may consider asking for a
14 new charge from this Committee to look at.

15 So I think the issue would be to go ahead
16 and get started with a baseline, but because we are
17 going to be doing on-going baselines, at some point
18 the Agency should come back to this Committee with an
19 actual design of a baseline and ask for in-input
20 specifically on that, since we've not had this
21 Committee do that before, other than for the ground
22 beef baseline. This Committee did look at that

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1 protocol in terms of the design that we were going to
2 do.

3 So we will be coming back possibly with a
4 new charge at a later meeting on this particular
5 issue.

6 DR. BRACKETT: Other comments Page 8?

7 (No response.)

8 DR. BRACKETT: Okay, we'll move forward
9 to Page 9. The one comment we already have is with
10 the handouts that were sent out, Question 2, one was a
11 paragraph to be inserted at the last paragraph on
12 Question 2.

13 Dan, did you want to respond about this?

14 DR. ENGELJOHN: And this is one all of
15 you should have a copy of it. It's one that Barbara
16 has put together. And it is intended to address the
17 issue that because in fact the Agency is going to be
18 doing on-going baseline studies, it would be on the
19 recommendation of this Committee to bring back the
20 design features of those programs. I think people do
21 need a chance to read.

22 The first one, which says "Question 2

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1 insert at the end of last paragraph."

2 DR. BRACKETT: Does everybody on the
3 phone -- does everybody have access to this document?

4 UNKNOWN SPEAKER: No, we don't.

5 DR. BRACKETT: I will read this comment
6 for you, but you should have it in print as well. I
7 think it was e-mailed to them; is that right?

8 MS. RANSOM: Yeah, it should be in
9 cyberspace somewhere, but we better read it.

10 MS. RUPLE: This is Angela. I did
11 receive it.

12 DR. BRACKETT: I'll read it for those on
13 the phone who have not heard it. The page says,
14 "Question 2, insert following at the end of the last
15 paragraph," and that's on Page 9.

16 "NACMCF is aware that FSIS has received
17 funding for on-going baseline studies and that FSIS
18 intends to begin a broiler baseline study in January,
19 2006. In any scientific study the sampling and data
20 collection methods employed, as well as the study
21 design parameters, are critical in assessing the
22 validity, interpretability and generalizability of the

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1 results. Therefore, in addition to addressing study
2 parameters, it is important that NACMCF address
3 statistical and data collection issues that should be
4 considered in designing any future baseline studies.
5 NACMCF recommends that the Agency come back with a
6 charge to the Committee to broadly and continually
7 review the statistical aspects as well as the data
8 collection methodologies of any future baseline study
9 designs."

10 And that paragraph would be inserted at
11 the end of the other discussion for Question 2 on Page
12 8.

13 Any other questions? Kathryn?

14 DR. McNAMARA: This is Ann Marie. I have
15 a question.

16 DR. BRACKETT: Okay.

17 DR. McNAMARA: Can you hear me?

18 Seeing as I don't have it in front of me,
19 maybe Barbara can clarify this for me. It seems that
20 the directive for paragraph states that in new and up-
21 coming baselines they should be brought before the
22 Committee for review, not necessary that this one has

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1 to come back to us.

2 MS. KOWALCYK: Correct. Because this
3 study, it's my understanding, would start in January,
4 2006, and there would not be sufficient time. But
5 this would address some of the issues that have
6 already been brought up this morning, insuring that
7 the sampling and data collection methods are
8 consistent and appropriate so that these results from
9 this and other studies, I guess I should say future
10 studies, would be generalizable to the entire
11 population.

12 DR. McNAMARA: Thank you. I appreciate
13 that comment and I concur.

14 DR. BRACKETT: Kathryn Boor.

15 DR. BOOR: Kathryn Boor.

16 Moving on now to the top paragraph on page
17 9 where there is in my opinion some conflicting
18 information that's presented that's not entirely
19 reconciled, and I think that some referencing would be
20 appropriate in this paragraph so that we see who the
21 principal investigator is whose data currently
22 suggests that a back-up enrichment would not be

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1 recommended, since that would only increase positive
2 samples by one to two percent, whereas previous
3 research had indicated that a back-up enrichment in
4 conjunction with a larger rinse size would increase
5 positives by eighteen percent.

6 I'd like to see that reconciled so that we
7 know which research led to which decision and then how
8 we've come to the conclusion that a back-up enrichment
9 is not necessary.

10 DR. BRACKETT: Dan, did you want to
11 address that?

12 DR. ENGELJOHN: I would respond by saying
13 when we ask our research advisor, and we had four
14 research advisors from the Agriculture Research
15 Service, who work on *Campylobacter* methodology to come
16 and make a presentation to this Subcommittee, and it
17 was the work of one of those researchers that actually
18 dealt with the issue of the one to two percent
19 positives versus the FSIS data from previous work that
20 we had done where there was a higher percent
21 positives.

22 So we can find a way to make that more

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1 specific.

2 DR. BRACKETT: Lee-Ann?

3 DR. JAYKUS: Lee-Ann Jaykus, North
4 Carolina State University.

5 Just a second on sort of what Kathryn
6 said. I think it needs to be clear that they're
7 intending that -- that you guys are intending on using
8 a 100 ml rinse, because there's not a real clear
9 statement of that.

10 And second of all, in the first full
11 paragraph, smack dab in the middle of Page 9, that
12 paragraph talks about Campycefex media throughout, but
13 at the second to the last line of that paragraph the
14 document states modified Cefex agar. And I think
15 that's confusing to a reader.

16 DR. BRACKETT: I'm going to take one step
17 back here.

18 Is the previous statement by Kathryn, is
19 that settled now? Are you comfortable with how that's
20 going to be handled? Okay, so you're going to
21 reference it?

22 DR. ENGELJOHN: I'm going to reference

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1 one of our ARS researchers who provided that as a
2 comment to the Subcommittee as a research advisor.

3 DR. BRACKETT: Okay. And then to Lee-
4 Ann's question about whether it is in fact modified or
5 if it is the original formulation.

6 DR. ENGELJOHN: I believe we are talking
7 about modified where we are now, and so I'm not
8 understanding what would help clarify that though,
9 Lee-Ann.

10 DR. JAYKUS: Lee-Ann Jaykus again, North
11 Carolina State University.

12 The entire paragraph just talks about
13 Campy Cefex and there's never any indication of a
14 modification to that product or to that formulation.
15 Okay, sorry. That's modified CCDA, not modified
16 Cefex.

17 DR. BRACKETT: Jenny, you had a comment?

18 MS. SCOTT: Yes. I think that the
19 modified Campy Cefex is the Oyarzabal medium and I
20 think that that does need to be clarified.

21 DR. BRACKETT: Would you have a
22 suggestion as to how to best clarify that?

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1 MS. SCOTT: I think I'd have to go back
2 to the Oyarzabal paper and determine how they
3 described the media that they used, and then when
4 referencing the Oyarzabal paper we can specifically
5 refer to that medium and then fix the last sentence.
6 The last sentence, I guess we can just call it
7 modified Campy Cefex agar, and then when we mention
8 the Oyarzabal paper, make some reference to the fact
9 that he modified Campy Cefex.

10 DR. ENGELJOHN: If I understand it, if we
11 could just add how the method was modified, that would
12 answer your question?

13 DR. JAYKUS: Correct. Lee-Ann Jaykus.

14 Or else if you just did as Jenny said,
15 reference to Oyarzabal method as a modified Campy
16 Cefex. As it currently reads it's not clear.

17 DR. COOK: Dan?

18 DR. BRACKETT: Peggy?

19 DR. COOK: This is Peggy Cook.

20 I actually looked this paper up this
21 morning for the very same reason. And if I remember
22 right from the original meeting, the conversations

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1 were centered around Campy Cefex, exactly how you
2 stated, and then we went to the modified Campy Cefex
3 upon doing the paper due to cost and the documentation
4 in the paper of recovery of Campy is equal to the
5 Campy Cefex. So it probably does need some
6 clarification if it is in that paper.

7 DR. BRACKETT: So for the purpose of
8 approving this document, how should the language be
9 changed?

10 Jenny?

11 MS. SCOTT: In looking how this is
12 written, could we in the last part of the sentence
13 say, "The Committee ascertained that modified Cefex
14 agar (Oyarzabal et al., 2005) would be a sensitive
15 cost effective choice."

16 That takes you back to the Oyarzabal paper
17 to find out the specific modification to the agar.

18 DR. BRACKETT: Everybody else okay with
19 that? Irene?

20 DR. WESLEY: I had a question. Since the
21 Athens group I would assume is modifying their Campy
22 Cefex agar and Oyarzabal was merely citing that

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1 modification, perhaps it's appropriate to go back to
2 the source; namely, the Athens group, and ask them if
3 they have a publication that details their current
4 modified Campy Cefex agar protocol.

5 DR. BRACKETT: Joe?

6 DR. MADDEN: Joseph Madden from Neogen
7 Corporation.

8 I have the Oyarzabal paper here and they
9 refer back to the original publications where that
10 medium is described. So I think if those references
11 were added, that would take care of the issue we've
12 got here.

13 DR. BRACKETT: Okay, good, thanks. Very
14 good.

15 Any more of the questions on the paragraph
16 that's going to be inserted at the end there?

17 (No response.)

18 DR. BRACKETT: Everybody's okay with
19 that.

20 Any other questions or comments about
21 anything on Page 9?

22 (No response.)

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1 DR. BRACKETT: Very good. We'll move to
2 Page 10. And again, in the handouts there is offered
3 a replacement paragraph for the first paragraph under
4 Question 3. Dan, did you want to address that?

5 DR. ENGELJOHN: I would add that this too
6 was presented by Barbara, and would you like for me to
7 read it as you did the last time?

8 DR. BRACKETT: Please.

9 DR. ENGELJOHN: And I would point out
10 that -- at least Barbara has something to add. She
11 believes that we could provide greater clarity to the
12 paragraph that we had there.

13 And so what is being suggested, replacing
14 the first paragraph then on Page 10, would be, "As
15 discussed previously, sampling and data collection
16 methods are critical in assessing the validity,
17 interpretability and generalizability of the study
18 results. Therefore, in determining the sampling and
19 data collection methods used in the baseline studies,
20 several statistical considerations should be
21 addressed. Foremost, the study objective or
22 objectives should be clearly stated, the population of

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1 interest should be identified, and the sampling unit
2 selected should be representative of that population.

3 Sampling methods should also take into account other
4 potential factors, such as seasonal and regional
5 differences, as well as inter-flock and inter-plant
6 correlation. In addition, there should be some
7 statistical justification to the sample size selected
8 for the study. The Committee recommends that FSIS
9 consider the statistical power in selecting the number
10 of plants, number of carcasses and frequency of
11 sampling for the baseline study and FSIS should create
12 a power calculation matrix to determine the optimal
13 sample size. Further, samples should be randomly
14 selected and the sampling and data collection methods
15 should be consistent throughout the study.
16 Specifically, FSIS should define how carcasses will be
17 randomly chosen at establishments for rinsing and at
18 what point or points in the process they will be
19 selected. Handling factors such as rinse method;
20 i.e., type of neutralizing diluent rinsate, shipping
21 temperature conditions and microbial testing
22 procedures, should be specified and consistent for all

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1 samples throughout the study. To assure consistency
2 in sample as well as data collection, it is
3 recommended that a sample and data collection protocol
4 is developed and those involved in carrying out the
5 protocol are trained at a centralized location."

6 DR. BRACKETT: Any comments on the
7 recommended insertion, replacement really? Barbara,
8 did you have a comment?

9 MS. KOWALCYK: Just a general comment. I
10 tried to -- in reading the document, I tried to --
11 several themes seemed to come up in particular. So I
12 tried to really kind of capture that in one
13 statistical -- in one paragraph that really got into
14 some statistical issues that seemed to be cropping up
15 throughout the paper.

16 Please forgive me. I don't really have a
17 great microbiological background, so in the handling
18 factor sentence I took a real stab at that. I don't
19 know if I used the right terminology and would like
20 help on that.

21 But the idea here is the way you -- I
22 repeat this again -- the way you sample and collect

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1 your data greatly impact the results of the study, and
2 they need to really be outlined and addressed in all
3 the baseline studies.

4 DR. BRACKETT: Don Zink?

5 DR. ZINK: I think she's made some good
6 statistical recommendations. I think there has to be
7 kind of a reality check, because in doing this, FSIS
8 is going to run into issues with, you know, plant
9 schedules, inspector duties, things like that. In
10 other words, complete randomness is not always
11 achievable in practice.

12 And so I think there has to be some
13 caveat, or at least everybody has to know, whether we
14 modify words in here, everybody has to know that this
15 is the ideal we're striving for here. But in reality
16 there may be limiting factors in how you can collect
17 this data. So I think maybe just a phrase "insofar as
18 practical" be included in here.

19 The other thing is about training at a
20 centralized location. I think we really mean that
21 they would have a common training program. These
22 don't necessarily have to be a central location.

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1 DR. BRACKETT: Barbara, do you want to
2 respond to that?

3 MS. KOWALCYK: Yes. Barbara Kowalcyk

4 I agree. I guess in clinical research,
5 which is what my background is in, there is only so
6 much you can do and there are always protocol
7 deviations that you need -- you know, you need to deal
8 with at the end of the study. But it is a good idea
9 to come up with some sort of protocol and, you know,
10 look at the factors that will affect that protocol and
11 it will be built into it.

12 But I just wanted to make it clear that
13 there would be a protocol developed, an actual
14 protocol, and that some randomness to the extent
15 possible would be introduced. As I said, in clinical
16 research frequently there is bias built right into it.

17 You do the best you can. You really cannot ever get
18 truly random.

19 DR. BRACKETT: Do we have any changes to
20 the language, per se?

21 DR. ENGELJOHN: I would -- this is
22 Engeljohn to address Don's issue and -- both issues,

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1 actually.

2 About halfway down where the sentence
3 begins, "Further, samples should be randomly
4 selected," if we insert what Don said, which was
5 "insofar as possible, samples should be," I think that
6 will take care of that issue.

7 And then in the last line on the
8 centralized location, since FSIS no longer does
9 centralized training, I think if we just substituted
10 "at a centralized location" with the words "with a
11 common format," that would address those issues.

12 MS. RANSOM: Can I move us back to one
13 area? Lee-Ann, you had mentioned the issue of the 100
14 versus 400 ml rinse. Were you going to say anything
15 further on that?

16 DR. JAYKUS: Yes. Lee-Ann Jaykus.

17 Yeah, I was, because the acid sensitivity
18 is entirely dependent upon the volume of rinsate. And
19 it does state here that -- this is the second
20 paragraph from the bottom, the second to the last
21 sentence, "Researchers conducting the present ARS/FSIS
22 Broiler Rinse Study determined a 100 ml volume of BPW

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1 was sufficient." But I think we need a stronger
2 statement, such as, "and this is what NACMCF
3 recommends be consistently used," or something like
4 that.

5 MS. RANSOM: I know we had a lot of in-
6 house concerns about a comprehensive -- of the
7 external as well as internal areas of the carcass, and
8 looking at a 100 versus a 400 ml rinse. Now we don't
9 have data, and there may be logistical concerns about
10 even collecting that data. We did have some concern
11 about the 100, because we typically use the 400.

12 DR. JAYKUS: This is Jaykus again.

13 And my point is, I think you have to be
14 consistent with the volume you use. And I think
15 that's an extremely important consideration for the
16 baseline study.

17 DR. BRACKETT: What are the recommended
18 changes to the document, if any?

19 DR. JAYKUS: Jaykus again.

20 If the Committee recommends 100 ml
21 rinsate, then it needs to be clearly stated with
22 perhaps something -- a statement to that effect at the

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1 end of that sentence, "and the Committee recommends
2 use of this volume of rinsate."

3 I think Gerri's point, however, is that --
4 is 100 milliliters even sufficient?

5 MS. RANSOM: Gerri Ransom.

6 What would be the basis of selection of
7 100 ml? I'm not sure that that has been validated
8 against anything.

9 DR. BRACKETT: Irene, you've got a
10 comment?

11 DR. WESLEY: Excellent point, again
12 addressing that first paragraph. I'm going to assume
13 that this study that's been conducted in the rinse
14 pilot has thoroughly evaluated and has a statistical
15 basis for coming up with 100 mls. 100 mls is not
16 much, and I think we've already mentioned previously
17 that there's going to be a variation in the size of
18 the birds that are going to be sampled.

19 On Page 8 there's a reference to increased
20 sensitivity if you go with 400 mls. I'm very
21 reluctant to agree on 100 mls considering it's not
22 much liquid, it's not much rinsate. This, I'm going

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1 to assume, has been cited that there is statistical
2 validation of the data, and I think before we go into
3 determining or agreeing to 100 mls, that we -- that
4 either a reference in a peer review journal be cited,
5 if there's an in-house study, that that be
6 statistically validated.

7 In following up on the volume, which I
8 think 400 is probably more legit considering my
9 experience with bird carcasses, I don't think 100 is
10 going to do it. I think I'd like to back up to the
11 statement, about halfway through, about Line 10, when
12 there's a statement made about using buffered peptone
13 water or sterile tap water; folks, a sterile tap water
14 is going to cause Campy to become immobile. And when
15 Campy is immobile it's pretty well dead. So again, if
16 there is a reference in there that shows that sterile
17 tap water is not going to compromise the validity or
18 the viability, excuse me, of Campy, then hunky-dory.
19 But I would really like to see that reference and have
20 it validated.

21 There is a comment in the Nordic
22 procedures that I shared with Dr. Engeljohn. In the

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1 English translation there is a comment made about
2 suspending Campy in water and the consequences of
3 that, and the Nordic Committee does recommend some
4 type of a nutrient or buffered broth.

5 DR. BRACKETT: Do we have any other
6 response to that at all, first from anyone on the
7 Committee?

8 Walter Hill and then Peggy.

9 DR. HILL: I think the key word here is
10 validation, and I didn't see that enough throughout
11 the document that we review.

12 The issue of a smaller rinse volume is to
13 concentrate the cells of *Campylobacter* to improve the
14 sensitivity. Unfortunately, you also concentrate
15 inhibiting substances and interfering substances that
16 may be present on the carcass. So the only answer to
17 that is validation of the different rinse volumes, and
18 there has to be a comparative study to show that
19 you're not increasing one factor and then decreasing
20 it by another one.

21 So the question is, you need science to
22 answer it.

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1 DR. BRACKETT: So what would be a
2 recommendation to the document, if any? Dan?

3 DR. ENGELJOHN: Jenny actually has a
4 change, and if she doesn't get it in her change, I
5 also have a suggestion.

6 MS. SCOTT: My suggestion, given all the
7 comments that were made about this, is that we insert
8 a sentence that says "FSIS should determine the
9 specific volume of rinsate to be used and provide a
10 scientific basis for the volume selected."

11 DR. BRACKETT: And where would that be
12 inserted?

13 MS. SCOTT: It could be inserted after
14 the statement that said, "Researchers conducting the
15 present ARS/FSIS broiler rinse study determined a 100
16 ml volume of BPW was sufficient."

17 DR. BRACKETT: The third full paragraph
18 down?

19 MS. SCOTT: Yes.

20 DR. BRACKETT: On Page 10. Irene, you
21 had another comment?

22 DR. WESLEY: Not only the volume of the

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1 rinsate, but let's get away from distilled water. I
2 can see someone looking at this and saying, "Oh,
3 distilled water is just as good as buffered peptone
4 water," and coming up with zip Campy's. That's one
5 way to lower the level of Campy on carcasses since you
6 used distilled water. So not only volume, but also
7 describe the rinsate.

8 DR. BRACKETT: Dr. Raymond had a
9 question.

10 DR. RAYMOND: In my naivete, my newness,
11 I have a question that I think is a very serious
12 question, however. This is the Scientific Advisory
13 Committee to FSIS. I'm not sure as the Under
14 Secretary I'm comfortable having the advice from the
15 Scientific Advisory Committee saying we should develop
16 a protocol. Because if we develop a protocol and we
17 get zip Campy or whatever, then we are wide open to
18 criticism again, and I'm calling upon you folks to
19 advise us, not to tell us to go develop the best
20 protocol. You should tell if it's 100 or 200 or 400,
21 if it's peptone, if it's distilled water. That's what
22 the Advisory Committee does do.

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1 Now we take your advice and we can adjust
2 it if we think we have a damn good reason to change
3 it, but I guess I want to hear from -- the statement
4 is here that ARS Committee, the researchers at Athens
5 have decided 100 mls is satisfactory. I want to know
6 how confident the Committee is. They put it in the
7 report. I want to know -- I mean is the Committee
8 confident enough on what they saw at Athens? I'm not
9 say yeah or nay. It's in here. I want to know how
10 confident that Committee is or do you need more time
11 to do more research?

12 Dan, as Chair of the Committee, what was
13 the feeling of the Committee on the 100 versus the
14 400?

15 DR. ENGELJOHN: Well, the issue on 100
16 versus 400 was that when we brought in the research
17 advisors from ARS who were conducting the study and
18 developing this methodology, presented what they had.

19 We did not look at the data that ARS had used to
20 establish the 100 ml. So that was not something as we
21 as a Subcommittee looked at.

22 DR. McNAMARA: This is Ann Marie on the

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1 phone. May I jump in?

2 DR. BRACKETT: Go ahead.

3 DR. McNAMARA: Ann Marie from Silliker.

4 When the Committee evaluated the different
5 methods that were out there, like the modified MDCCA
6 and the Campy line agar and the Norm Stern method,
7 what we were doing was evaluating these methodologies
8 based on the scientific literature and the fact that
9 they had been used in multiple surveys. Therefore, it
10 being used in multiple surveys, is also a way of
11 validating methodologies.

12 So you know, we're kind of referencing --
13 we're jumping around to different points here saying
14 this diluent can be used or that diluent can be used,
15 but really in my estimation what we were looking at
16 was the Norm Stern modified Campy Cefex media using
17 all their parameters, which was 100 mls, using the
18 modified media, using their diluent, and trying to
19 assess whether that would be sufficient for FSIS to
20 use in a baseline.

21 There was a lot of considerations that
22 went into the choice of that particular method, but in

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1 my estimation we were evaluating it based on the
2 method that was used by ARS using their specific
3 parameters and the fact that that methodology has been
4 used repeatedly in surveys to give it validity.

5 DR. BRACKETT: Kathryn, you've been
6 waiting.

7 DR. BOOR: Kathryn Boor.

8 Just to follow up on Ann Marie's point. I
9 think that that makes an excellent point, which is
10 that in this report we never come right out and say,
11 "and this is the method." And I think that that's
12 what she's saying. And I think we can make that point
13 more strongly.

14 Actually, I have just a minor point in the
15 third paragraph on that page, just to define BPW as
16 buffered peptone water, the first time it's used.

17 DR. BRACKETT: Good point.

18 DR. ENGELJOHN: So if I could then,
19 Celine, did you add what Lee-Ann Jaykus had suggested,
20 which is "and NACMCF recommends use of this volume of
21 rinsate"? Did that get added to the document?

22 DR. BRACKETT: The first question, does

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1 the Committee agree that 100 mls is right? Walter?

2 DR. HILL: Well, in deference to the
3 Under Secretary, I think that the questions being
4 asked has no definitive scientific data to support the
5 comparison between those two sampling volumes. And
6 like any other good choice that scientists would make,
7 they show me the data. And I think that we have to --
8 in lieu of not having that data available, it's
9 directly applicable to answer the question; we have to
10 recommend that that data be obtained.

11 DR. BRACKETT: So is that something you
12 could put into the language here to address that?

13 DR. HILL: That there should be
14 scientific justification for whichever volume in this
15 case is chosen. There's a lot of variables that need
16 to be examined.

17 DR. BRACKETT: Peggy:

18 DR. COOK: I was going to say in
19 reference to what Walt is commenting on, if the
20 terminology was changed that NACMCF recommends this
21 volume of rinsate be validated, because we have not
22 been able to look at data at this point.

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1 DR. BRACKETT: Don?

2 DR. ZINK: At the outset of this, we all
3 agree there were so many methods that have been
4 examined, so many permutations of them, virtually none
5 of which have ever been in a head to head comparison.
6 I think we went into this, at least it was my
7 understanding, that we were going to have to sort
8 through a bunch of unlike information and unvalidated
9 information and make a sort of an expert call, if you
10 will, on what procedure FSIS should go forward with
11 for a baseline.

12 It's a true statement that the question of
13 100 ml versus 400 ml, or for that matter 200 or 300,
14 hasn't been rigorously validated. I think we have to
15 step back and say, are we going to make a call here on
16 a method for FSIS based on validated scientific
17 studies? If that's the case, well, we better outline
18 what needs to be done and give ourselves a year or
19 more to do those studies. Or, are we going to make a
20 best guess expert opinion call here as to what we
21 should go forward with?

22 I felt fairly comfortable hearing the

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1 researchers on their comfort level with 100 mls. But
2 it has not been rigorously validated and I don't think
3 that we can change that fact.

4 DR. BRACKETT: Would it be reasonable to
5 suggest that in the language here that you put
6 something to the effect that the methods be described
7 and be resubmitted to the Committee to be accepted?
8 Because it sounds like it's kind of up in the air as
9 to what people are going to accept in the document
10 here.

11 DR. ENGELJOHN: FSIS is in fact going to
12 be conducting validations in and of itself in terms of
13 its methodology. And so it will in fact establish why
14 it's doing what it's doing and why it made the
15 selection that it did. I do not think it would be
16 prudent to say that that has to be prior approved
17 before the Agency starts the study.

18 In this case, I think we have enough
19 information to go forward. We've had a project under
20 way for this past year in which we have used this
21 particular methodology and are quite pleased with how
22 it is in fact working out. But again, I think that we

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1 are intending to do some validation between now and
2 January when we begin the baseline, and then we
3 certainly do and likely will come back to this
4 Committee with the protocol that we had used. But I'm
5 not looking to ask this Committee to prior approve
6 that protocol.

7 DR. BRACKETT: Walter?

8 DR. HILL: Just one other comment. It
9 was made in the document that it was observed that
10 FSIS also samples for *Salmonella* on broiler carcasses
11 and that is a 400 ml method. So if you won't accept
12 the 100 ml method, you have to ask FSIS to rethink
13 their sampling for *Salmonella* as well.

14 DR. ENGELJOHN: And those are the issues
15 for which the Agency is in fact looking into. Is
16 there enough to be able to do that kind of
17 documentation, pull an additional sample? Those are
18 the kind of things that we are in fact intending to do
19 between now and the start-up of the survey in order to
20 answer those questions. We have a need to be able to
21 compare data from one year to another, recognizing
22 that things change over time.

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1 And so I think the Agency's intention is
2 in fact to look at this issue and determine whether or
3 not we have enough information to go forward, and then
4 how that will effect what we do in comparison for
5 future years.

6 DR. BRACKETT: So again, back to the
7 language that's on the screen right now. We have
8 actually two recommendations up there. One is to
9 delete reference to distilled water. And I'm hearing
10 that you want to leave that in, Dan?

11 DR. WESLEY: Do you have a reference on
12 it?

13 DR. BRACKETT: Or provide a reference for
14 it?

15 DR. ENGELJOHN: I don't have -- again, I
16 would go back to the ARS researchers who provided us
17 the in-put on the protocol that they used, and use
18 that in terms of the documentation the Agency would
19 rely upon.

20 DR. BRACKETT: Does that answer your
21 concern with ARS reference? Irene?

22 DR. WESLEY: If you could somewhere

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1 insert on the question of volume, which is going to be
2 critical, either some kind of a document that you
3 folks have reviewed statistically to show there's no
4 difference between 100 and 400. I think that would
5 also add credibility to the ultimate selection of a
6 volume.

7 If you have studies that were done before
8 the 100 ml was adopted, that would be appropriate as
9 long as they've been statistically validated so that
10 this baseline, if it goes forth with 100 or goes forth
11 with 400, will not be criticized at the end because
12 the volume of rinsate was not correct.

13 DR. BRACKETT: What's your pleasure, Dan?

14 DR. ENGELJOHN: Again, I think as the
15 document is written now in terms of the method being
16 used, FSIS should determine the specific volume of the
17 rinsate to be used and provide scientific
18 justification for that volume chosen.

19 And you're adding that we also need to
20 deal with the issue of the distilled water as part of
21 that. So we can modify the sentence to deal with both
22 in terms of the method, the volume of rinsate and the

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1 use of distilled water, as two things that we will
2 specifically be providing justification for.

3 DR. BRACKETT: Could you just say volume
4 and type of rinsate?

5 DR. ENGELJOHN: Yes.

6 DR. BRACKETT: Any other comments about
7 what's up here? And I will read this for the sake of
8 the people on the phone.

9 So right now the way it stands, what would
10 be acceptable to the Committee is on the third
11 paragraph, last sentence on Page 10, which would
12 state, "Researchers conducting the present ARS/FSIS
13 Broiler Rinse Study determined a 100 ml volume of BPW
14 was sufficient, and NACMCF recommends that this volume
15 of rinsate be validated. FSIS should determine the
16 specific volume and type of the rinsate to be used and
17 provide scientific justification for that volume
18 chosen, including referencing studies and documents
19 statistically validated that compares 100 mls versus
20 400 mls."

21 Yeah, this may need to be prettied up as
22 you stated before too, but that's the -- that's the

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1 essence and intent of this.

2 Irene?

3 DR. WESLEY: If we can go back to Page
4 10, the opening comment, "The choice of," may we
5 insert the word "a choice of validated diluents"?

6 DR. BRACKETT: This is the second
7 paragraph?

8 DR. WESLEY: This would be -- yeah, the
9 second paragraph that begins, "The choice of." Just
10 pop in "validated" in there.

11 DR. GRIFFIN: I have another comment on
12 the third paragraph, the last sentence where it says,
13 "Rinse buffers should be at four degrees before
14 rinsing and rinsate should be put on ice as soon as
15 possible."

16 I'm imagining a situation in a poultry
17 plant and I don't know what "as soon as possible"
18 means. I think it would be good to put some sort of a
19 time requirement on that.

20 DR. BRACKETT: Okay, and that's Patty
21 Griffin.

22 DR. ENGELJOHN: This is Engeljohn with

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1 FSIS.

2 Within the protocol itself we direct the
3 inspectors on how they pull these samples. And
4 traditionally they are either in the operation with an
5 ice container for which they're putting them on. But
6 the protocol does in fact spell out how they should do
7 this. We don't actually have a time specifically in
8 which that has to be done, but we do in fact in the
9 instructions for previous studies have in fact used
10 ice containers that go on to the floor and you put the
11 diluent into that.

12 MS. RANSOM: Gerri Ransom.

13 I've seen it written as "immediately place
14 on ice."

15 DR. GRIFFIN: This is Patricia Griffin.

16 That would work, if what you're saying is
17 they're there with something on ice and that's how
18 it's done, then we can convey that. Otherwise, I
19 could imagine that in, you know, ten percent of plants
20 a sample is obtained and put on a counter some place
21 and put on ice after lunch.

22 DR. ENGELJOHN: Then I would suggest we

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1 make that modification to say "should be immediately
2 placed on ice."

3 DR. BRACKETT: Okay.

4 DR. ENGELJOHN: If I could go back to the
5 top of that paragraph. I'm not sure if we got it
6 typed in as suggested. I think it was intended to
7 say, "the choice of validated neutralized diluent" is
8 what the suggested wording was.

9 DR. WESLEY: On Page 10.

10 DR. ENGELJOHN: So it should be "a choice
11 of validated" --

12 DR. WESLEY: I'm looking at Page 10 on
13 the hard copy and I don't see the same terminology up
14 there.

15 DR. ENGELJOHN: It's because she typed in
16 "a choice of validated." If you would just remove
17 that and put between -- before the word "neutralized"
18 put "validated." And I believe that addresses --

19 DR. WESLEY: Right. I just want to
20 emphasize the spirit of validation in this. Because
21 this document is going to have ultimately
22 international -- you know, folks will see it all over

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1 the place, and I think it's important that we use the
2 word "validated" so that if someone else picks up this
3 protocol, they know that someone else has taken the
4 time for the comparisons.

5 DR. BRACKETT: Barbara?

6 MS. KOWALCYK: Barbara Kowalcyk.

7 I have a comment on the second paragraph,
8 probably third sentence, where it says, "If samples
9 are taken after a chemical treatment there is need to
10 outline the specific agents and to record those
11 intervention treatments on the sampling form."

12 Just to kind of reiterate even what Irene
13 said, in the spirit of this, really, if the -- in
14 designing the baseline studies and carrying them out,
15 it is important that the Agency define the study
16 objectives, both primary and secondary objectives, and
17 if the objective is to assess the efficacy of
18 interventions, that should be laid out. I guess I
19 just don't like the terms "if the samples are taken
20 after a chemical treatment." That kind of leaves it,
21 you know, maybe they will be, maybe they won't be,
22 we'll just see.

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1 DR. ENGELJOHN: This is Engeljohn.

2 I would point out that in practice each
3 establishment uses different methodologies for
4 intervention treatments. There is no standardized
5 method. And so the intent was to document what
6 interventions are in place at the time that we pull
7 the samples. So that is what that message conveys.
8 It's not giving the plant the choice to do this. This
9 is their practice. We pull a sample at a given point
10 within that operation and we believe that there may be
11 some impact on what treatments are in place in that
12 plant. We want to capture what are the treatments.

13 MS. KOWALCYK: Barbara Kowalcyk again.

14 Just to make sure though that the Agency
15 and the plants understand that that is a secondary
16 objective of the study and the study would likely not
17 be powered sufficiently to detect any differences or
18 any effectiveness of interventions.

19 DR. ENGELJOHN: Yes. It is not the
20 intention of the baseline study to actually determine
21 the differences between interventions. It's to
22 identify what interventions actually are used and may

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1 impact the analysis.

2 MS. KOWALCYK: Okay. I just wanted to
3 clarify that because I've seen lots of misuse of data
4 from that type.

5 DR. BRACKETT: Walter?

6 DR. HILL: Walt Hill.

7 Don't the interventions have to be
8 properly noted in order to determine which
9 neutralizing protocol will be used when the sample is
10 collected?

11 DR. ENGELJOHN: Yes. This is Engeljohn
12 with FSIS.

13 The issue is that the Agency doesn't
14 actually have a list of what all is used in the
15 plants. And so there will be a period of time in
16 which the Agency will need to make some decisions as
17 to how we're going to have prior knowledge as to
18 what's being used in plants so that we can insure that
19 we're using the proper diluents and types of
20 methodology in that plant. So there's going to be a
21 need to have a process in place to address that
22 without having that prior knowledge.

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1 DR. BRACKETT: Okay. Irene?

2 DR. WESLEY: Just a question then. So
3 you will be taking two samples from the plant if
4 you're looking to evaluate the effectiveness of
5 intervention strategies?

6 DR. ENGELJOHN: And we are not -- FSIS is
7 not going to be evaluating the effectiveness of
8 intervention strategies. We will be doing -- the
9 intent really is to get a baseline, the national
10 prevalence of these organisms in the process
11 throughout the chain, not at this time to make a
12 determination about the effectiveness of one
13 intervention over another. That will likely not be
14 the intention of this baseline study.

15 DR. BRACKETT: Barbara?

16 MS. KOWALCYK: Barbara Kowalcyk.

17 And I might recommend changing that
18 sentence if samples are taken, because it certainly,
19 when I read it, led me to believe that there was an
20 objective, even if it was secondary, to determine the
21 effectiveness of interventions.

22 DR. ENGELJOHN: Would changing the word

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1 "if" to "when", would that address the issue?

2 MS. KOWALCYK: Yes.

3 DR. ENGELJOHN: Okay. If you could
4 change the word "if" to "when". Thank you.

5 DR. BRACKETT: Walter?

6 DR. HILL: Dan, without trying to second
7 guess the Agency to any degree, if such data is
8 collected, won't there be a lot of interest or
9 tendency or desire to at least see what's going on
10 between these different samples to look what the
11 effect of interventions might be, at least
12 unofficially, if not officially?

13 DR. ENGELJOHN: Certainly. This is
14 Engeljohn with FSIS.

15 There's a number of needs for data within
16 the Agency to inform risk management. And the first
17 is to find out what the national prevalence is of the
18 organisms, the levels and what's there. There is also
19 an intention to have on-going baselines, for which we
20 may in fact design studies specifically to look at
21 interventions to see if in fact we need to be pursuing
22 one intervention over another in terms of

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1 recommendations. But that would be a different type
2 of study.

3 The intention here with this particular
4 baseline is to find out what the national prevalence
5 is in industry with the practices used today.

6 DR. BRACKETT: Barbara.

7 MS. KOWALCYK: Barbara Kowalcyk.

8 Just as long as I'm clear that the Agency
9 -- I'm just concerned about misuse of data, and it is
10 important that the Agency consider clarifying in the
11 design of the baseline studies that there may be a
12 secondary objective of looking at interventions that
13 would be exploratory only in nature.

14 DR. BRACKETT: Dan, did you want to think
15 about how to --

16 DR. ENGELJOHN: I don't know how to
17 answer that, other than a protocol design will be
18 explicit as to what our intention will be. If in fact
19 at another time the Agency is going to be looking at
20 intervention effectiveness, that would be a likely new
21 study. I don't envision that it's going to be a part
22 of this on-going baseline for this particular project.

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1 DR. BRACKETT: But if I'm hearing Barbara
2 right, you would like something inserted to make it
3 clear that that is going to happen?

4 MS. KOWALCYK: Well, that they're going
5 to collect the data. The Agency is going to collect
6 data on interventions, okay. And what you don't want
7 to have happen is that later on it is misinterpreted
8 that you can use this data to come to a conclusion
9 about interventions. So typically what you will do
10 is, you will state something like we are collecting
11 this data for exploratory purposes only, and is not
12 intended -- it's intended to be used to develop a
13 future study. It's just something that you can
14 clarify so that someone down the road doesn't misuse
15 the data.

16 DR. BRACKETT: Do you have a suggestion
17 for how we could insert something in this?

18 MS. KOWALCYK: Let me work on that for a
19 minute and come up with a sentence.

20 DR. McNAMARA: Could I make an
21 interjection here that I think would clarify it? This
22 is Ann Marie.

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1 DR. BRACKETT: Yes, Ann Marie.

2 DR. McNAMARA: This is Ann Marie McNamara
3 from Silliker.

4 I think everyone on the Committee would
5 agree that if we wanted to do a specific baseline
6 looking at interventions, especially by different
7 chemical treatments, it would be a totally different
8 design. And I think that all this paragraph was
9 getting at is that there should be some attempt to
10 take note of the chemical treatments being used and
11 the correct diluent -- to insure the correct diluent
12 is being used in the plant so that the neutralization
13 of the chemical would occur for sample integrity
14 purposes only.

15 I don't think that FSIS can use this data
16 for any other reason except to insure that the
17 chemicals are properly neutralized and that the sample
18 was collected properly. I don't think that any
19 scientist would then try to extrapolate the data
20 collected to say that an intervention was appropriate
21 or not, because it's a totally different design that
22 needs to be used.

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1 Does that help clarify it?

2 DR. GRIFFIN: Patricia Griffin. May I
3 make a comment?

4 DR. BRACKETT: Patty?

5 DR. GRIFFIN: I think we're hearing both
6 things, that this is not the reason that we're getting
7 this information, and yet the information is going to
8 be there, and it's hard to keep scientists back from
9 looking at information while being aware of the
10 circumstances under which it was collected. And I
11 think the idea that was put forth that it could be
12 used for hypothesis generation for another study is
13 very good.

14 Our Agency is under a horrible budget
15 crunch in the coming year. If your Agency faces the
16 same problem, there may not be that future study for a
17 long time and people may really want to look at data
18 that's not great to get a sense of what might help.
19 Industry might want to know. You know, what does the
20 data show? What are our hypotheses about what might
21 work or not, even though the data was collected in a
22 not statistically wonderful way because the study

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1 wasn't designed for that?

2 So I think that we can do both. And my
3 suggestion is that on that sentence, in the middle of
4 that paragraph, that begins, "If samples are taken
5 after a chemical treatment," I would at the end of it
6 say, you know, "on the sampling form using
7 standardized language." Because if they're willing to
8 just write it in in handwriting and one person calls
9 it a chemical X treatment and another person calls it
10 an X chemical treatment, nobody's ever going to be
11 able to look at it. And I think there are certain
12 treatments that tend to be used and they could be --
13 to the language used to report them.

14 DR. ENGELJOHN: And I think that is a
15 helpful suggestion inserting the words "standardized
16 language."

17 And then to get at the other issue, a new
18 sentence following that, possibly, "Information
19 related to chemical treatments is being collected to
20 insure sample integrity, not to measure the
21 effectiveness of the treatment, but may be used to
22 assess future study design related to interventions."

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1 Maybe if we added that, that would be much
2 more clear?

3 DR. GRIFFIN: Could I make a suggestion?
4 You last read "may be used for generating
5 hypotheses," and then I forget the rest of your text.

6 DR. BRACKETT: The current text as Dan
7 suggested is "Information related to chemical
8 treatments is being collected to insure sample
9 integrity."

10 Oh, Dan has more.

11 DR. ENGELJOHN: And then following that,
12 "not to measure the effect of the treatments, and may
13 be used for generating hypotheses in the design of
14 future studies related to interventions."

15 I see some nods. I think we can work on
16 that language to make it better.

17 DR. BRACKETT: Okay. Any other comments
18 on the phone? Patty or Ann Marie?

19 DR. GRIFFIN: No, that's fine.

20 DR. McNAMARA: I'm fine.

21 DR. BRACKETT: Okay. So we're still on
22 Page 10 with the additions that have been put on the

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1 screen.

2 Are there any other questions or concerns
3 about Page 10?

4 Irene?

5 DR. WESLEY: Irene Wesley.

6 Page 10, the second paragraph from the
7 bottom that begins, "The Committee discussed micro-
8 aerobic." It's a minor change. There you go, micro-
9 aerobic and we're in good shape.

10 DR. ENGELJOHN: Page 11.

11 DR. BRACKETT: Oh, wrong page. Okay.

12 DR. WESLEY: Thank you. That's it.

13 DR. BRACKETT: Anything else on Page 10?

14 (No response.)

15 DR. BRACKETT: Okay, we'll move on to
16 Page 11. Now Irene, your comment goes in there.
17 Second paragraph on Page 11. First paragraph on Page
18 11.

19 Jenny?

20 MS. SCOTT: I would like some
21 clarification on the statement that says, at the end
22 of that paragraph that "FSIS should take into account

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1 the adjudication issues around these methods."

2 I have no idea what that means.

3 DR. COOK: This is Peggy Cook.

4 I believe again from the Committee meeting
5 that what that was referring to was that there are
6 different ways of achieving the incubation condition
7 and that those once again should be validated to
8 determine what is the proper way to incubate samples
9 upon collection and so forth.

10 MR. RANSOM: Gerri Ransom.

11 One concern was if you're using anything
12 other than a tri-gas incubator, you have to have a
13 concern about uniformity of the incubation conditions.

14 So I don't know if that needs to be worked in.

15 DR. BRACKETT: Jenny, can you think of
16 any other clearer language than "adjudication", or
17 others on the Subcommittee?

18 MS. SCOTT: I think it comes back to
19 validating the methods you're going to use to insure
20 that they do what you're expecting them to do. I
21 think maybe that we would say something that FSIS
22 should validate the specific protocols for using gas

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1 filled bags, and leave it at that, or the methodology
2 for using gas filled bags.

3 DR. BRACKETT: Everybody seems okay with
4 that.

5 Anything else on Page 11? Barbara?

6 MS. KOWALCYK: Forgive me, as I said
7 before, I don't have a strong microbiological
8 background. But my interpretation, and especially
9 from all the conversation that's happened this
10 morning, *Campylobacter* is very time sensitive.

11 There's been a lot of discussion about incubation time
12 or the need for incubation. What about culture time?

13 I don't know if that's an issue or if that's already
14 been addressed. How long the cultures would have to
15 sit before they would --

16 DR. WESLEY: You mean samples or
17 cultures?

18 MS. KOWALCYK: Well, the samples. How
19 long once you -- forgive me. But once you've put them
20 on the culture how long would they -- or on the plate,
21 how long would they have to sit? I don't know if
22 that's been addressed. I don't even know if that's

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1 important. I'm just asking.

2 DR. BRACKETT: Dan, did you want to
3 respond to that?

4 Peggy?

5 DR. COOK: This is Peggy Cook.

6 You're right. *Campylobacter* is sensitive
7 to sample collection, you know, harvesting the sample
8 back to the lab, incubation and so forth. And there
9 is an incubation time for modified Campy Cefex in
10 here. Right at the moment I'm not flipped over to it.

11 Here it is. At 42 plus or minus one, for 48 hours,
12 on Page 9.

13 DR. BRACKETT: Anything else on Page 11?

14 MS. RANSOM: Gerri Ransom.

15 The classic description for wet mount I
16 believe needs adjustment. The cork screw motility,
17 the spiral organism, type of language, multi-spiral
18 forms and chains, the striking feature of the wet
19 mount's not portrayed there.

20 DR. BRACKETT: Where is this?

21 MS. RANSOM: This is in the third
22 paragraph, Page 11. It says "tumbling motility." The

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1 cork screw motility, pairs of cells that resemble the
2 gull's wing span, the classic view that you see in the
3 wet mount that says you've got *Campylobacter*. That's
4 not portrayed.

5 DR. BRACKETT: So are you suggesting --

6 MS. RANSOM: That some of that language
7 be added.

8 DR. JAYKUS: Lee-Ann Jaykus.

9 Actually, I think that would be
10 appropriate to put in the Appendix, because it does
11 outline the methodology and there are some issues
12 where you could actually provide that detail.

13 MS. RANSOM: Okay.

14 DR. JAYKUS: Perhaps instead of using
15 "tumbling," you could say "*characteristic* motility."

16 DR. BRACKETT: Other comments? Barbara?

17 MS. KOWALCYK: Just a general comment,
18 and I don't know if it's just me being -- sampling
19 methods are used kind of interchangeably throughout
20 the document, and especially since we started talking
21 about statistical sampling methods versus sampling
22 methods such as in the fourth paragraph where "The

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1 Committee recommends that FSIS use consistent sampling
2 methods," probably in the editing there should be some
3 attempt to differentiate between the two, if at all
4 possible.

5 DR. BRACKETT: So what I'm hearing you
6 say is that --

7 MS. KOWALCYK: It's just a general
8 comment.

9 DR. BRACKETT: -- difference should be
10 made from the methods for statistical sampling versus
11 the actual physical sampling?

12 MS. KOWALCYK: Yes. It gets rather
13 confusing, because you keep reading about the sampling
14 methods. They're actually talking about two different
15 things, I think.

16 And then the last paragraph, "The
17 significance of viable non-culturable differences."
18 Is the Committee actually asking that the Agency seek
19 out the advice of -- when it says "not determinable at
20 present but research is needed," is the Committee
21 actually asking that the Agency seek out advice on
22 this? I wasn't really clear on that.

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1 DR. BRACKETT: Dan, did you want to
2 respond?

3 DR. ENGELJOHN: On the first issue, we
4 will go through the document. I made a note that
5 where we can say sample collection methods, we will,
6 versus the statistical. So we'll try to make that
7 more known.

8 On the issue of the research, this was
9 something for which as we typically do in NACMCF
10 reports is to identify research gaps so that it gives
11 a heads-up to those in the research community that
12 this is an area which would help inform us for the
13 future. So this is something we weren't going to wait
14 on. It actually should be done and we're just making
15 that recommendation. When it's done and it informs us
16 as to how we might need to modify things, then we'll
17 take that into account.

18 DR. BRACKETT: Walter.

19 DR. HILL: Walt Hill.

20 With respect to the last sentence in
21 Paragraph 3 on Page 11, "FSIS should address how many
22 colonies per plate to perform a confirmatory test of a

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1 wet mount." I'm not enough of a Campy bacteriologist
2 to address this specifically, but it seems to me that
3 the key you're asking is, what other things are likely
4 to grow up on plates that could be mistaken for
5 *Campylobacter* and how often does this occur. And I
6 would guess that that could be perhaps flock specific
7 or seasonally specific or geographically specific. It
8 would be very difficult to know -- what kind of
9 competitors and what frequency you would mistake them
10 for *Campylobacter*. So it's not easy to pick a number
11 to start with, but perhaps it might even be operator
12 dependent, and maybe we should put some sort of
13 cautionary detail in there about the difficulty of
14 having a rigorous statistically validated procedure to
15 accomplish this.

16 DR. BRACKETT: Dan, you want to comment?

17 DR. ENGELJOHN: I'm looking at you,
18 Walt, for a suggestion of what you would like to add
19 there.

20 DR. HILL: From past experience, I think
21 the issue is training, and the more plates that the
22 analyst can look at and get good feedback on, the more

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1 familiar they'll become with what the limitations of
2 the sampling or the colonial selection procedure might
3 be. And I'm hesitant to put any specific
4 recommendations because I don't know what competitors
5 can pop up. And I assume that that would be quite
6 dependent on the incubation temperature. The lower
7 the temperature the faster everything will grow, and
8 the more colonies you might have to search through in
9 order to find those few illusive *Campylobacters*. And
10 I suppose you could have some kind of sampling
11 requirement where you pick colonies until you're 95
12 percent sure that if *Campylobacter* was present in a
13 frequency of less than ten percent, you would have at
14 least one *Campylobacter* you pick. But then we're
15 talking possibly hundreds of colonies per plate.

16 So I think the key is the Agency should
17 look at analysts' training and make sure that the
18 proficiency of each analyst is sufficient to handle
19 these kinds of samples under varying conditions.

20 The answer is no.

21 DR. BRACKETT: So how do you want to
22 handle the language in the document? What suggestions

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1 do you have?

2 DR. HILL: I just think that we should
3 stress analysts' training and proficiency testing.

4 DR. ENGELJOHN: If we added at the end of
5 the sentence, "FSIS should address how many colonies
6 per plate to perform a confirmatory test of a wet
7 mount and the training of the laboratory technicians,"
8 would that get at your issue?

9 DR. HILL: Well, addressing a number of
10 colonies to pick seems like we're asking them to say,
11 "Okay, if you pick ten colonies you're going to be
12 home free and that's all you need to do."

13 And what I'm saying is that you can't
14 predict really that that will be sufficient and that
15 you have to rely on analysts' expertise to make that
16 judgment. And I know the statisticians' toes curl
17 when those situations come about. But unless we have
18 adequate data describing the relative occurrence of
19 *Campylobacter* on these plates under all conceivable
20 laboratory and sample collection and flock conditions,
21 we can't give them a number.

22 DR. BRACKETT: Walt, your point is well

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1 taken, but how do we change the document to reflect
2 that?

3 DR. WESLEY: I concur with Walt Hill. I
4 have been confused many times looking at Campy. I'd
5 like to suggest a comment as follows: An estimated X
6 percentage of Campy Line colonies are ultimately
7 confirmed as *Campylobacter*. And the reference for
8 that would be to go back to the initial papers that
9 were describing Campy on Campy Cefex and have those
10 folks look at their data and come up with a number.

11 DR. BRACKETT: Don Schaffner had a
12 comment as well.

13 DR. SCHAFFNER: I'm not sure if this has
14 already been addressed with Walt's suggestion at the
15 end of that last sentence in black, but I was just
16 going to suggest that FSIS should consider analyst
17 training and proficiency in addressing how many
18 colonies per plate to perform, blah, blah, blah.

19 DR. BRACKETT: Don Zink.

20 DR. ZINK: I just hate leaving things
21 kind of up in the air and nebulous like this.
22 Everything they've said is true. I mean we know this

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1 is one of the dark corners of microbiology.

2 I think we should put a statement in there
3 that reflects the fact that the experience and
4 training of the analyst as well as the type of non-
5 *Campylobacter* organisms in the sample will affect the
6 -- they're certainly going to affect the results.
7 I'm not sure exactly what word to use here. But
8 they're going to affect the qualify of the data that
9 we get, okay.

10 I think we ought to just go ahead and pick
11 a number, okay. You're going to be doing large
12 numbers of this. I think we ought to pick a number.
13 And if I had to recommend one, I'd say pick at least
14 five colonies, you know, typical colonies from the
15 plate. It's good to have all that language in there
16 about the training and the experience of the analyst,
17 but you know, you're going to do this with what you've
18 got, okay. After you go through some training program
19 and everything else, you're still going to be left
20 with people with varying degrees of experience,
21 varying degrees of ability to eyeball these colonies,
22 and you're going to be left with inevitably some

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1 samples are going to come along that are going to be
2 difficult. You're going to have non-*Campylobacter*
3 organisms that may look similar to some and different
4 than others. The quality of a person's eye differs.

5 I think we ought to just state a number
6 and draw the line there and make a statement in there
7 that these factors will be confounding factors that
8 will affect the efficiency of recovery of the organism
9 no matter where you draw the line.

10 DR. BRACKETT: Joe Madden.

11 DR. MADDEN: Joe Madden from Neogen
12 Corporation.

13 I agree with Don. Generally in *Salmonella*
14 or whatever, we have them pick three to five colonies
15 of typical morphology on the media being used. So I
16 agree, a number should be picked.

17 But I disagree with the use of the word in
18 that last sentence, "confirmatory test." I've worked
19 with *Campylobacter* for years, like Irene, and I've
20 confused tumbling morphology before and it's turned
21 out to be something other than *Campylobacter*. So I
22 don't have a suggestion of what to say unless we say

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1 something like semi-confirmatory or something like
2 that. But later on we talk about PFGE and serotyping
3 and all of that. I do not think tumbling motility can
4 be used as a confirmatory test, is the bottom line.

5 DR. BRACKETT: Lee-Ann?

6 DR. JAYKUS: Lee-Ann Jaykus.

7 A couple things. I think we're getting
8 caught up, and this same issue is again covered in the
9 Appendix, and if you have a fairly detailed protocol
10 in your Appendix, and I don't think it's very detailed
11 in terms of this quote, "confirmatory", or how many
12 colonies to pick. But I think that's an important
13 consideration.

14 I would tend to recommend that we cover
15 most of this information in the Appendix.

16 DR. BRACKETT: Barbara?

17 MS. KOWALCYK: I just wanted to make a
18 comment on the training of the laboratory technicians.

19 In my background, I have -- it is not uncommon that
20 you have a study where you're looking at something
21 that is somewhat qualitative in measure and the person
22 measuring it has to make a judgment call. And usually

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1 the way you try to deal with that is to do some sort
2 of consistent training for all those involved in
3 making the assessments, just to kind of acknowledge
4 that that is an issue and that you did make some
5 attempt to train the participants in the study on how
6 to collect the data so that you're kind of all on an
7 even footing, even recognizing though that that's
8 probably not going to happen out in the field.

9 But I do recommend -- I like the idea of
10 training the laboratory technicians because it does
11 acknowledge that fact.

12 DR. BRACKETT: I'd like to bring this
13 around and sort of finalize the language here.

14 So what we have up here is added after
15 "wet mount", "and the training of the laboratory
16 technicians."

17 And then we have another suggestion, "and
18 estimated X percentage of colonies to confirm there's
19 *Campylobacter* reference to determine X."

20 We've had suggestions for at least five
21 typical colonies on the plate, which I hear Lee-Ann
22 Jaykus is saying may be more details than we need in

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1 this part of the document, to leave this to the
2 Appendix. And the reference to FSIS should consider
3 analyst training and proficiency.

4 So, what language is going to be our final
5 language here?

6 MS. RANSOM: Gerri Ransom.

7 At one point we intended for our method to
8 say "do a wet mount on every colony morphology that
9 you see." There's actually a typo in the method that
10 I have since discovered, but we wanted to try to hit
11 every morphology.

12 DR. BRACKETT: Joe Madden suggested
13 "semi-confirmatory" up there.

14 We need to have something we can agree on
15 here for the language here.

16 Don?

17 DR. ZINK: How about we put a specific
18 number in the Appendix part of it. I agree that
19 details should go in the Appendix, or as Gerri
20 suggested, it's perfectly fine with me if you look at
21 each colony type on there.

22 I still favor putting a sentence in here

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1 that NACMCF realizes that variation in analyst
2 technique, even in spite of training, will result in
3 some differences in recovery. Or you could leave that
4 out. I don't feel really strongly about that because
5 I think everybody knows that.

6 I don't want to leave it up to having FSIS
7 to recommending that -- I don't think it's right for
8 us to recommend that FSIS, if they give thought to
9 this and come up with a number on their own, because -
10 - I mean, for Christ sakes, they came to us for the
11 method.

12 DR. BRACKETT: Subcommittee members, any
13 other resolution? Irene?

14 DR. WESLEY: Okay. Right where your
15 cursor is, let's take "and" and make that "an
16 estimated." Right there, just -- all right. A period
17 after recovery. New sentence, "An estimated," okay.
18 And then after the parenthesis, period. And then
19 "FSIS should consider analyst training and proficiency
20 to achieve," and then come up with a percentage, or
21 "should consider analyst training to achieve
22 proficiency in identifying Campy."

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1 DR. BRACKETT: Walter?

2 DR. HILL: I admire Don for trying to cut
3 the Gordian knot by coming up with a number. But once
4 again, I think we're being a little inconsistent,
5 because we talked about 100 mls of sampling versus 400
6 ml, and I guess the rigorous way to do it would be,
7 let science give us the answer. And we might ask the
8 Agency to validate the number of colonies that they're
9 testing to assure that whatever number they come up
10 with will meet their purposes.

11 I don't think we can second guess the
12 number of colonies they need to look at given the
13 particular sample universe that they'll be looking at
14 over the course of the multi-year study perhaps. So
15 some pilot study in the laboratory might be the best
16 way to come up with a ballpark estimate of the number,
17 and then there would be some data that would support
18 that.

19 DR. BRACKETT: So is that something we
20 can put in there? Dan, did you have a comment?

21 DR. ENGELJOHN: I'm fine with adding the
22 language Walt suggests about FSIS should validate the

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1 number of colonies through a pilot lab study.

2 DR. GRIFFIN: Are we suggesting that FSIS
3 validate the number of colonies before they begin the
4 study in January? Because I worry that that's not
5 achievable, and I wonder if it's something that they
6 could do in the course of the study.

7 DR. BRACKETT: Don?

8 DR. ZINK: Well, I want to say this too.
9 I mean, as scientists, it's perfectly correct for us
10 to say, "Hey, every aspect of this should be
11 validated."

12 But this becomes we're building a wall
13 brick by brick, and I feel like we're almost at a
14 point now where they've come to this Committee for
15 advice and we've advised them to go back and validate
16 every aspect of what methodology we want them to do.
17 And that's fine with me, if we want to do that. It's
18 not a terribly great answer for FSIS, and if that's
19 the case they should probably plan on a year or more
20 worth of research, looking at 100, 200, 300, 400 mls,
21 five colonies, ten colonies, twenty colonies, means of
22 assessing analyst proficiency. It could go on and on.

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1 I think we just have to decide as a
2 Committee how we're responding to this charge and are
3 we responding in a practical usable way so that they
4 can begin the study by January. Maybe we'll tell them
5 they can't begin the study by January.

6 DR. GRIFFIN: I agree with those
7 sentiments, that there are some things they can do and
8 get in place before, but the study is also a great
9 opportunity to have a lot of specimens from which we
10 can learn more. And it could be that they could
11 choose an adequate number of colonies to pick, but in
12 doing that have a sub-set of laboratories do a study
13 to try to figure out what's the ideal number for the
14 future.

15 DR. McNAMARA: This is Ann Marie from
16 Silliker.

17 I also wonder if -- I agree with Don. You
18 know, you can go back and try to validate everything.

19 I did not think that that was what the FSIS was
20 asking us to do. I thought they were asking us to
21 evaluate the different methodologies that have been
22 used out there and make recommendations on which one

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1 would be applicable.

2 So my concern is, does anyone around the
3 table have the Campy Cefex publication and does it say
4 in there in their methodology how many isolates are
5 picked?

6 MS. RANSOM: This is Gerri Ransom.

7 There is a paper put out by those ARS
8 researchers (Line) that does deal with number of
9 colonies and number of non-Campys pulled off plates,
10 et cetera. That is in the literature. I don't recall
11 any conclusions from it, but they did look at that.

12 DR. MENG: Jianghong Meng from University
13 of Maryland.

14 A few years ago we did some study on Campy
15 from Mitchell Meat Products. We picked five colonies
16 from each plate. Our experience is that five are
17 sufficient for our purpose. So I think five colonies
18 should be okay for the study.

19 But when you look at it, there are
20 different species of Campy, so sometimes you feel that
21 you may want to add a few more because you are looking
22 at the temperature factor *C.jejuni* and *C.coli*.

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1 So I think for the Committee to recommend
2 at least five colonies.

3 DR. RAYMOND: You guys wore Brackett out.
4 He left.

5 (Laughter.)

6 DR. RAYMOND: You're here to advise me,
7 not me to advise you. But I want to go with Don's
8 comment and it goes back to Don Zink's. And I would
9 suggest that the Committee consider saying a minimum
10 of five colonies. That gives us some flexibility and
11 latitude as we get into this. But I don't want to
12 waste a year -- I shouldn't say waste. I don't want
13 to spend a year doing a study to figure out how to do
14 a study, because this is too important to take another
15 -- I want to walk out of here from this meeting with
16 guidance.

17 Walt?

18 DR. HILL: I think we have to keep in
19 mind that this is supposed to be a quantitative study,
20 and when you beat around the bush and all you're doing
21 is maybe looking for the first positive colony to call
22 that sample positive, that's fine, if you're doing a

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1 qualitative study. But that's not the intent of the
2 Agency, as I recall. They're looking to enumerate.
3 And that throws a whole additional level of complexity
4 and rigor and resources that must be dedicated to
5 collecting that information. And when you make those
6 kinds of small sample recoveries from a larger
7 population, your sampling error goes up.

8 And if we want to have this data with any
9 meaningful precision, we have to take into account the
10 fact that these small number of positive organisms may
11 be difficult to enumerate, not just detect.

12 DR. RAYMOND: Irene?

13 DR. WESLEY: I have to congratulate my
14 colleague for picking five Campy colonies and having
15 five Campy colonies indeed confirmed. I guess in Iowa
16 we're sort of hokey. I've not had that kind of
17 batting average. So congratulations.

18 DR. JAYKUS: I don't know if this will
19 help. Lee-Ann Jaykus.

20 I put this wording, and I actually stuck
21 it in the Appendix because I think it makes more sense
22 to go there. But something like this may be -- and I

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1 think this might deal with -- "a total of X percent."

2 I would tend to say ten percent. "A total of X
3 percent of typical colonies on a countable plate
4 representing each colony morphology should be picked
5 for semi-confirmatory testing by cellular morphology
6 and motility on a wet mount using phase contrast
7 microscopy. Each isolate demonstrating typical Campy
8 morphology and motility will be further confirmed and
9 speciated by latex agglutination. If FSIS intends on
10 isolating and identifying species other than
11 *Campylobacter jejuni* and *C.coli*, more colonies should
12 be picked and sub-characterized."

13 DR. RAYMOND: Bob, we're on Page 15 now,
14 just for your information. We're going to have to
15 probably get that typed up and pass it around. That's
16 big enough that I think the Committee needs to take a
17 look at that.

18 Irene, how do you feel about the ten
19 percent? You're the one that threw out the X percent.
20 I'm asking you.

21 DR. WESLEY: I think I want to
22 congratulate Walt for bringing this back on target.

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1 If one of the goals is enumeration, all right, then
2 direct plating may not be giving us everything we want
3 it to give us. And I'm going to say this in sort of a
4 disjointed effort. I appreciate the urgency to get
5 this going. I also appreciate what happens if you go
6 into something with not all your horses lined up.

7 So if the point is validation, then that's
8 going to toss us into a whole other ballpark of are
9 the techniques we have for confirming Campy at this
10 point okay for the study. And the question you're
11 asking is, am I comfortable with ten percent?

12 I'm comfortable with any method that will
13 give you the answer that you don't have to at the end
14 of the year say, "Geez, I wish we had done this, this
15 or this." And we come back to the point of
16 validation.

17 DR. RAYMOND: Walt?

18 DR. HILL: Walt Hill.

19 I appreciate Lee-Ann's verbiage there, and
20 I think it does a good job. However, how are we going
21 to interpret the data? Is it for each plate that we
22 find a positive? Are we going to call it essentially

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1 a 4-tube MPN and not count colonies and look at a
2 table for four different plates at that dilution? I
3 think that that might be the end result. And maybe
4 that's not so bad.

5 DR. McNAMARA: This is Ann Marie on the
6 phone. May I jump in again?

7 DR. RAYMOND: Go ahead, Ann Marie.

8 DR. McNAMARA: Ann Marie from Silliker.

9 You know, I congratulate us for all trying
10 to define this, and it may be indefinable. What Lee-
11 Ann is suggesting is ten percent of the colonies, and
12 a countable plate may be up to 300. So just say
13 there's 300 colonies there, the analyst would be
14 picking thirty colonies for confirmation by
15 microscopy. And you know, from being in the
16 laboratory and doing Campy analyses, they're going to
17 be spending an enormous amount of time and it's not
18 going to be practical on large scale analyses.

19 I think in hearing everything that's being
20 discussed, I would go back to what Don is saying and
21 go back to a minimum of five colonies, but also go
22 back to the original papers that were done by Norm

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1 Stern and see what he is advocating in the method that
2 appears to be the one that's going to be used in these
3 baselines based on the recommendations of the
4 Committee. If it's already defined there as one of
5 each morphological type or a number of colonies, then
6 we need to use what's been established in the
7 literature.

8 DR. RAYMOND: I'm going to make a
9 suggestion at this point in time. We were scheduled
10 for break a while back. We could probably spend the
11 whole day on this. I'm going to suggest that we take
12 a fifteen minute break and that we be back in the room
13 here sharply at 11:00. We're going to get Lee-Ann's
14 lengthy paragraph. We're going to type it up and put
15 it on the board up here.

16 My suggestion that I have, trying to
17 remember what Lee-Ann said, but it will give us
18 something to work from. We need something to work
19 from. We need a product. And it might be an
20 Appendix. But we may adjust Lee-Ann's to say, "a
21 minimum of five colonies, up to ten percent." That
22 addresses the 300 colony issue. You don't have to do

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1 thirty, you have to do five. If you've got ten
2 colonies in there, you still got to do five. But up
3 to ten percent; you could do additional, depending on
4 what you want.

5 So Lee-Ann, if you'd get your comment up
6 here, we'll get it on the board, take a fifteen minute
7 break, come back, be prepared to move on.

8 DR. McNAMARA: Can I make one comment?

9 DR. RAYMOND: Say your name and
10 affiliation.

11 DR. McNAMARA: I want to ask if Ann Marie
12 could summarize her suggestion, which I liked, if she
13 and Don could work on a proposed sentence that they
14 like.

15 DR. RAYMOND: We're going to give them
16 fifteen minutes to do that.

17 (Off the record.)

18 DR. BRACKETT: I think we'll get started.
19 We had, as we mentioned, put up some language on the
20 screen. But I wanted to make a couple of comments
21 about the comments from this point forward.

22 We're way behind on this. And it's the

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1 expectation of the Committee that the document has
2 been thoroughly discussed and debated in the
3 Subcommittee and that it's ready to be voted on. Now
4 is not the time to make substantive changes to the
5 recommendation of the Subcommittee.

6 If you make a comment, please provide a
7 suggested correction. Although all the comments are
8 true enough, the purpose here is to approve this
9 document. Anything else related to this should be
10 done separately.

11 So, I guess up on the screen are the
12 comments that I think Lee-Ann Jaykus provided. Is
13 that how you wanted them, Lee-Ann?

14 DR. JAYKUS: In quotes.

15 DR. BRACKETT: And for those of you on
16 the phone who cannot see this, it says, "A total of
17 ten percent of the typical colonies on a countable,
18 parenthesis, or lowest dilutions, close paren, plate
19 representing each colony morphology should be picked
20 for semi-confirmatory testing by morphology and
21 motility on a wet-mount using phase contrast
22 microscopy. Each isolate demonstrating typical

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1 *Campylobacter* morphology and motility will be further
2 confirmed and speciated using latex agglutination. If
3 FSIS intends on isolating and identifying species
4 other than *Campylobacter*, *jejuni* and *C.coli*, more
5 colonies should be picked and further characterized"
6 close quotation. So that's what she has added.

7 And that would have been at the end of the
8 third paragraph on Page 11.

9 Do we have any other comments about that?

10 Jenny?

11 MS. SCOTT: I thought the thinking was
12 that we would say a minimum of five and up to ten
13 percent of the typical colonies would be selected.

14 DR. BRACKETT: That was Dr. Raymond's
15 suggestion.

16 UNKNOWN SPEAKER: No, but Jenny's stating
17 that.

18 MS. SCOTT: I would suggest that change.

19 DR. BRACKETT: That's fine. Don Zink?

20 DR. ZINK: I can live with just about
21 anything that's definite. In looking over this at the
22 break, the reason I thought just leaving it at the ten

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1 percent, is that makes the math a whole lot easier
2 when you're trying to calculate, as Walt has said,
3 back some quantitative result from this. If you look
4 at ten percent of the colonies, trying to get all
5 colony types in there, and three of them turn out to
6 be *Campylobacter*, well, then you can adjust the total
7 plate count accordingly rather easily.

8 DR. BRACKETT: It is my understanding,
9 Dan, that the bottom paragraph, "a total of X" is
10 going to be deleted. So we'll take that off.

11 Don?

12 DR. ZINK: Why don't we put in a total of
13 -- A minimum of five, up to ten percent, in
14 parenthesis, whichever is greater"?

15 DR. BRACKETT: And that's in the new
16 paragraph?

17 DR. GRIFFIN: This is Patricia Griffin,
18 CDC.

19 I didn't think we wanted "whichever is
20 greater" because it could end up requiring people to
21 test thirty colonies.

22 DR. BRACKETT: That was a comment.

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1 Lee-Ann Jaykus?

2 DR. JAYKUS: Lee-Ann Jaykus.

3 I defer to Irene on this. Our experience
4 has been that very infrequently, certainly on a direct
5 plating, that you have a plate that has 300 colonies.
6 But if you did, you would really want to get that
7 quantitative data. And I think the only way you're
8 going to be able to do that is by picking ten percent
9 of those colonies.

10 Now, with that said, I don't think that
11 that's going to happen all that often.

12 DR. BRACKETT: So you're comfortable
13 leaving this the way it is?

14 (No response.)

15 DR. BRACKETT: Okay. Well if that's the
16 case, we will do that, and then upon voting take that
17 into consideration.

18 So we're trying to finish up Page 11. Are
19 there any other comments or questions on Page 11?

20 DR. GRIFFIN: Patricia Griffin, CDC.

21 The very last paragraph, I had trouble
22 with the first sentence, figuring out what it meant

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1 with the two words "significance." Would this
2 different phrasing convey the same thing? "The
3 possible importance of viable non-culturable strain is
4 not known. This topic could be brought before the
5 Committee," et cetera.

6 DR. BRACKETT: Okay, would you repeat
7 that again slower for our -- "The possible importance"
8 --

9 DR. GRIFFIN: "The possible importance of
10 viable non-culturable strain is not known. This topic
11 could be brought before the Committee", dah, dah, dah.

12 DR. BRACKETT: Okay. Everybody
13 comfortable with that?

14 (No response.)

15 DR. BRACKETT: It appears so. Thank you,
16 Patty.

17 All right. So that brings us to the
18 conclusion of Page 11, finally.

19 Irene?

20 DR. WESLEY: Since this document is
21 really focusing on carcass rinses, I'd like to
22 recommend that we delete the paragraph for ground

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1 product. It is inappropriate.

2 DR. BRACKETT: Dan?

3 DR. ENGELJOHN: It's not inappropriate
4 since the Agency may chose to do ground product. We
5 haven't defined yet which products we're actually
6 going to test. And this Committee previously
7 recommended that we should be sampling all products
8 for which we regulate.

9 So I think it needs to stay.

10 DR. BRACKETT: Let's move on to Page 12.

11 First of all, anybody here in the room?
12 Jenny?

13 MS. SCOTT: At the end of the second
14 paragraph on Page 12 where it says, "In certain
15 circumstances where PFGE is not appropriate, MLST has
16 been used successfully,"

17 I'm wondering if "not appropriate" is the
18 correct wording, whether that should say, "In certain
19 circumstances where PFGE has not provided useful
20 information, MLST has been used successfully." And
21 maybe Patty could help with that.

22 DR. BRACKETT: Any comments, Patty

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1 Griffin?

2 DR. GRIFFIN: I don't think I have any
3 helpful comments on that. But there was a suggestion
4 that I had, remember, when somehow the e-mail I sent
5 you with my suggestions got lost in cyberspace, and
6 then I was asked to give some sentences. And it
7 appears in this e-mail that I was sent today that
8 gives several suggestions. And that goes either on
9 Page 11 or 12.

10 DR. BRACKETT: We have it here, Patty. I
11 was going to get to it.

12 Kathryn?

13 DR. BOOR: Kathryn Boor.

14 I have two comments on that second
15 paragraph on Page 12. The first one is a more global
16 comment, which is that I don't believe that we ever
17 really come to a conclusion with regard to which
18 subtyping strategy we should apply or which we would
19 recommend. I think we sort of hedge a little bit
20 there with that last sentence about "if PFGE is not
21 appropriate, MSLT has been used successfully." So
22 where do we start and which way do we go?

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1 The second thing is that the comment about
2 "PFGE being more readily available" -- now this is the
3 fourth line down in that paragraph. I certainly agree
4 with that. But the part about "easier to perform", I
5 think a matter of opinion. We did both in our lab
6 head to head, and I think that each one has its pros
7 and its cons, and I think it's probably fair to say
8 it's more readily available, but I think the next few
9 words are probably best left out.

10 DR. BRACKETT: Are you suggesting first
11 of all delete "easier to perform"?

12 DR. BOOR: Yeah, I think that would do
13 it.

14 DR. BRACKETT: You have some problem with
15 that? Okay, and you're first -- what was your first
16 comment, the MLST?

17 DR. BOOR: The first comment was more
18 global, which was I don't believe that we ended up
19 saying, so what do we recommend?

20 DR. BRACKETT: How would you recommend --

21 DR. BOOR: Well, I think the Subcommittee
22 needs to say, "So we recommend PFGE with a follow-up

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1 with MLST," if that's the way it needs to be.

2 DR. BRACKETT: Don?

3 DR. ZINK: Don Zink, FDA.

4 I think we should recommend both PFGE and
5 MLST.

6 DR. McNAMARA: This is Ann Marie from
7 Silliker.

8 I thought our conclusion was in the final
9 paragraph on Page 12 that the Committee recommends
10 further research on the methods and that we only
11 obtain isolates from the baseline. I thought our
12 conclusions in our discussions were we weren't going
13 to recommend any particular subtyping method at this
14 time.

15 DR. GRIFFIN: This is Griffin, CDC.

16 That's where the comment that I've
17 inserted comes in, because I consider resistance
18 testing as a method of subtyping.

19 DR. BRACKETT: Walter Hill?

20 DR. HILL: The first paragraph on the
21 printed version on Page 12, to me it gives the
22 impression that there's data that processing

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1 establishments have on *Campylobacter* subtyping. And I
2 suggest that we just delete the words "processing
3 establishment", so that "recognize that *Campylobacter*
4 isolate subtyping data could be used to link."

5 DR. BRACKETT: So your suggestion is "The
6 Committee recognizes that *Campylobacter* isolate
7 subtyping data"?

8 DR. HILL: Correct.

9 DR. BRACKETT: Okay. And we still have
10 the open question about --

11 DR. GRIFFIN: This is Griffin, CDC.

12 I actually -- I think that "processing
13 establishment" has a role in that sentence. It may be
14 difficult to understand as it's written, but I think
15 the idea was that the Committee recognizes that
16 *Campylobacter* subtyping data from isolates obtained in
17 processing establishment could be used, dah, dah, dah.

18 DR. HILL: Could we just substitute "FSIS
19 *Campylobacter* data for processing establishment"?

20 DR. BRACKETT: That's fine. Barbara?

21 MS. KOWALCYK: Barbara Kowalcyk.

22 The one question that popped into my mind

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1 when I read this is, it can be done, but is it done,
2 and if it is not done, is the Committee recommending
3 that it be done?

4 DR. BRACKETT: What is the "it"?

5 MS. KOWALCYK: Well, that the data can be
6 linked to track human illness. Okay, is that
7 currently done, and if it is not, is the Committee
8 recommending that it be done to track human illness?

9 DR. BRACKETT: Ann?

10 DR. McNAMARA: This is Ann Marie from
11 Silliker.

12 And I'm recommending that that whole
13 paragraph just be omitted, because the baseline
14 studies that we're asked to evaluate are not going to
15 be able to provide this type of data linking
16 establishments to epidemiological or veterinary data,
17 et cetera. I think this was just a general
18 introduction that someone put in there about what uses
19 or value could data of subtyping nature have. But the
20 conclusion of the Committee was that we were not going
21 to recommend, in the final paragraph, we weren't going
22 to recommend a method and we were going to suggest

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1 that further research be done and we only collect
2 isolates for further use to define that research.

3 DR. BRACKETT: Jenny, is that your
4 comment?

5 MS. SCOTT: That was it exactly.

6 DR. BRACKETT: Okay. So the
7 recommendation on the floor, just to delete that whole
8 first paragraph.

9 DR. GRIFFIN: Griffin, CDC.

10 I was not involved in writing that first
11 paragraph, but I think it's important and I would like
12 it to stay in.

13 DR. BRACKETT: Barbara?

14 MS. KOWALCYK: This is Barbara Kowalcyk.

15 I mean, I'm hoping that ultimately the
16 purpose of the study is to reduce human illness, and I
17 think it's important that that stay in. But I would
18 like clarification on -- I mean, it just kind of hangs
19 out there, that it can be used and it begs the
20 question of why, you know, what are we going to do
21 with it and why don't we use it?

22 DR. BRACKETT: Dan, do you want to

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1 comment on the intent?

2 DR. ENGELJOHN: Again, it was meant to be
3 an introductory paragraph for how the data could be
4 used in the future to explain the process. It didn't
5 have any substantive content there to direct anything,
6 other than this is what may be done with the data as
7 we generate it. We react to data today that in fact
8 is from CDC that may be linked to a plant.

9 So it was just meant to provide some
10 clarification. I don't think it matters one way or
11 another whether or not it's there, in this document.

12 DR. McNAMARA: This is Ann Marie from
13 Silliker again. Maybe I can clarify my comment.

14 The part that bothers me is that you can't
15 use the data that's coming out of the baseline survey
16 that USDA is proposing to do, and try to link that up
17 to epi data or vet data. That would be a totally
18 different design study. And that's why I have
19 objection in that first paragraph.

20 There's potential ways to use subtyping
21 methodology, but you wouldn't want to take say the
22 1200 results that you get out of this nationwide

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1 survey and then try to link it back to epidemiological
2 data or vet data; that has to be collected off the
3 farm, which is CDC. It's not appropriate for the
4 baseline as stated.

5 DR. BRACKETT: Any other comments?

6 (No response.)

7 DR. BRACKETT: So what are the wishes of
8 the Committee? Do we keep that paragraph or get rid
9 of it? We need to vote on this.

10 Okay, all those on the Committee who are
11 in favor of keeping the existing first paragraph on
12 Page 12, if you could raise your hands so we could get
13 a count. And then tell me on the phone too who wants
14 to keep it.

15 DR. GRIFFIN: This is Griffin.

16 I want to keep it. And I agree with the
17 sentiment expressed earlier, that what are we doing
18 all this work for, and the whole purpose of this work
19 is to figure out where these organisms are coming
20 from, why there's so much contamination and to reduce
21 it. And I think that putting -- this paragraph helps
22 to put that into context and I think it's important.

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1 DR. BRACKETT: I'll take that as a yes.

2 Anybody else on the phone want to keep it?

3 (No response.)

4 DR. BRACKETT: Those who would like to
5 delete it, please raise your hands so we can count.
6 Who's counting?

7 MS. RANSOM: I think we have seven
8 wanting to keep and nine wanting to eliminate.

9 DR. BRACKETT: And those on the phone, I
10 presume that those other than Patty would like to
11 delete it; is that correct?

12 DR. McNAMARA: I would. This is Ann
13 Marie.

14 MS. RUPLE: This is Angela. I would also
15 like to delete it.

16 MS. RANSOM: Eleven to delete, seven to
17 keep.

18 DR. BRACKETT: Delete.

19 Moving on. Now we get back to Patty
20 Griffin had submitted another change, which is to have
21 a paragraph, which will now replace the one we just
22 deleted. And you should all have that. If you don't,

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1 let me know; we'll make sure that you get that.

2 Does everybody on the phone have Patty's
3 recommendation?

4 MS. RANSOM: This is Gerri Ransom. It's
5 the page that starts out, "The Committee recognizes
6 that processing establishment," and Patty's paragraph
7 is the second one that's underlined, "because
8 antibiotic resistance among *Campylobacter* species,"
9 that's the paragraph?

10 DR. BRACKETT: And it says Page 12 on the
11 bottom of that.

12 DR. McNAMARA: I apologize. This is Ann
13 Marie. I don't have it. Could you read it for me?

14 MS. RANSOM: "Because antibiotic
15 resistance among *Campylobacter* species is a public
16 health problem and there are inter-agency agreed upon
17 protocols for resistance testing, the Committee
18 recommends that a defined subset of isolates be tested
19 so the results can be used in an analysis to help
20 understand how resistant *Campylobacter* species enter a
21 facility and move through production lines and whether
22 some resistant strains are maintained in facilities."

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1 DR. BRACKETT: Any comments on suggested
2 inclusions?

3 DR. McNAMARA: It's Ann Marie again, from
4 Silliker.

5 You know, again, it all depends on how you
6 study -- how you establish the design of the study.
7 And I agree with Patty, that those are uses for
8 antibiotic resistance, but you're not going to be able
9 to trace patterns through a plant unless you use
10 multiple sites and use multiple collection of isolates
11 from a plant. This is a nationwide survey in which
12 you're taking one sample periodically over a year
13 period, capturing seasonality, et cetera.

14 So I just -- I don't mind the paragraph as
15 long as it's tailored in a way that doesn't suggest
16 that the data from this study is going to accomplish
17 those objectives.

18 DR. BRACKETT: Do you have a suggestion
19 how to tailor it that way?

20 DR. McNAMARA: I'm really at a loss
21 because I don't have the papers here and I'm not at
22 the meeting. I'm trying to do my best. But I think

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1 that you can say something about antibiotic resistance
2 being a public health issue and perhaps a sub-set of
3 the data might be tailored in such a way to, you know,
4 be useful.

5 But to make claims about being able to
6 trace it through a plant or to look at different
7 things, that would require a much different design.
8 And I think that's what happens when FSIS designs a
9 study and then the industry or public health
10 officials, et cetera, try to use that study for
11 multiple purposes for which it wasn't designed. And
12 that's all I'm getting at.

13 DR. RAYMOND: This is Dr. Raymond.

14 Ann Marie, it does say that the analysis
15 will help understand. It doesn't say it will create
16 an action or a solution or a province. It will help
17 understand. I think it is important to help
18 understand how these bacteria resistant species do
19 enter a facility, move through the production lines,
20 and by doing the testing at periodic points in
21 production lines, I think it will help us understand.

22 DR. McNAMARA: If the study design is one

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1 that has multiple points.

2 DR. RAYMOND: Right.

3 DR. McNAMARA: From what we've said in
4 this document, we've only said FSIS should consider
5 that.

6 DR. GRIFFIN: This is Griffin, CDC.

7 Ann Marie, thanks for your comment. I'd
8 be comfortable softening the statement, replacing the
9 word "understand" with the words "developed hypotheses
10 about."

11 DR. RAYMOND: It does say "define sub-
12 sets of isolates," Ann Marie. I know without having
13 it in front of you it's difficult to have somebody
14 read it once, but it is a defined set of subsets which
15 would help us develop a hypothesis about.

16 DR. McNAMARA: Okay. I like that change.
17 Thank you, Patty.

18 DR. GRIFFIN: And I would make that
19 "develop hypotheses," plural, "about."

20 DR. RAYMOND: Jenny Scott?

21 MS. GRIFFIN: It's Griffin, CDC.

22 While I'm getting into grammar, at the

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1 bottom of Page 11, the third sentence, "The Committee
2 recognized that PFGE is more readily available and
3 easier to perform." We took out that whole paragraph,
4 didn't we?

5 DR. BRACKETT: Yep.

6 MS. SCOTT: All right. Never mind. You
7 don't have to fix the grammar.

8 DR. BRACKETT: Jenny Scott.

9 MS. SCOTT: Jenny Scott.

10 I have a question. Maybe Patty can answer
11 this. About how the antibiotic resistant testing,
12 which I don't have any objection to, would determine
13 whether strains are maintained in facilities? To me
14 that seems to imply doing some environmental testing
15 as well, and I don't think that that is part of the
16 study.

17 DR. GRIFFIN: This is Griffin, CDC.

18 I'm comfortable taking that out. I think
19 it's meant to be a general statement rather than
20 suggesting specific hypotheses.

21 DR. ENGELJOHN: This is Engeljohn.

22 Just to clarify, in the Subcommittee

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1 discussion, we did talk about the issue that there may
2 in fact be environmental harborage contaminants within
3 facilities. So the Agency hasn't ruled out that we
4 may in fact be looking for future studies to look at
5 the environment.

6 So I would like to just leave the language
7 as it is, because I think we are going to be looking
8 more at the environment in the future.

9 DR. BRACKETT: Do we have the final
10 language on the screen here? Is this what we want to
11 do?

12 (No response.)

13 DR. BRACKETT: For those of you on the
14 phone, I will read what it says now. It says,
15 "Because antibiotic resistance among *Campylobacter*
16 species is a public health problem and there are
17 inter-agency agreed upon protocols for resistance
18 testing, the Committee recommends that a defined set
19 of isolates be tested so that results can be used in
20 analyses to help develop hypotheses about how
21 resistant *Campylobacter* species enter a facility and
22 move through production lines and whether some

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1 resistant strains are maintained in the facilities."

2 Everybody okay with that?

3 DR. GRIFFIN: Griffin, CDC. Dan, the
4 word analyses is plural, right?

5 DR. BRACKETT: Correct.

6 Anything else on Page 12?

7 DR. GRIFFIN: This is Griffin.

8 That grammar thing was not on a paragraph
9 that was deleted. So on that same page that we're
10 looking at, that add-in page, the next paragraph, the
11 fifth line, "easier to perform than," it's spelled
12 T-H-A-N.

13 DR. BRACKETT: Okay. Thank you.

14 Anything else?

15 (No response.)

16 DR. BRACKETT: Okay, move on to Page 13.

17 DR. ENGELJOHN: There was one suggested
18 change that Barbara did submit on the page. On the
19 conclusion, I believe she's asking to add a final
20 paragraph, I believe. Is it a stand-alone paragraph,
21 Barbara, your conclusion there "to insure validity,
22 interpretability and generalizability of the study

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1 results, the sampling and data collection methods
2 should be evaluated and a method protocol should be
3 developed"?

4 Is that a final sentence that you wanted
5 to add?

6 MS. KOWALCYK: I should say the last
7 sentence in the second paragraph, as opposed to the
8 last paragraph.

9 In addition, I would like to recommend
10 changing in the first sentence in that second
11 paragraph, "In designing the upcoming *Campylobacter*
12 enumeration from broiler rinse samples, baseline
13 studies and any future baseline studies, FSIS must
14 clearly state the objectives."

15 DR. BRACKETT: Any other questions or
16 comments about 13?

17 (No response.)

18 DR. BRACKETT: The next sections are
19 after the references. These I would hope would be
20 more editorial than anything, that if you have
21 suggestions, give them to Dan. If you think there are
22 references that are missing, those also need to be

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1 included in there.

2 DR. ENGELJOHN: There will be two that
3 are added, at least, that were handed out this
4 morning.

5 DR. GRIFFIN: This is Griffin, CDC.

6 I'm sorry, are we finished with Page 12?
7 I had another comment.

8 DR. BRACKETT: Well, we were. We were on
9 13.

10 DR. GRIFFIN: I'm sorry. That's what I
11 mean. Are we finished with 13?

12 DR. BRACKETT: Yes.

13 DR. GRIFFIN: Can I make another comment?

14 DR. BRACKETT: Go ahead.

15 DR. GRIFFIN: I had trouble understanding
16 the next to the last sentence. "This method would be
17 widely available to industry constituents and easily
18 used with high volume sampling rather than previous
19 MPN methods." And it just may be me. I had tried
20 changing it in the edits that I sent you, that perhaps
21 you didn't get. And maybe this is incorrect how I
22 phrased it, but I said, "This method would be widely

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1 available to industry constituents and easily used
2 with prime numbers of samples that is impractical with
3 MPN methods."

4 DR. BRACKETT: And where are you? Where
5 was this supposed to be?

6 DR. GRIFFIN: The next to the last
7 sentence on Page -- on the conclusion.

8 DR. BRACKETT: Okay.

9 MS. RANSOM: Could you repeat that for
10 us, Patty, one more time? This is Gerri.

11 DR. GRIFFIN: "This method would be
12 widely available to industry constituents and easily
13 used with prime numbers of samples that is impractical
14 with MPN methods."

15 DR. BRACKETT: That's what it says now.
16 Did you have a change?

17 DR. GRIFFIN: No, I guess that is the
18 change. I'm okay.

19 DR. BRACKETT: 13 is completed.

20 14, there will be two references added,
21 and they are what, Dan?

22 DR. ENGELJOHN: These would be the

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1 references that Irene provided this morning on the
2 Nordic Committee on Food Analysis with their
3 *Campylobacter* enumeration in foods and the draft
4 technical specifications for an EU monitoring scheme
5 for *Campylobacter* in broiler chickens. So we'll add
6 those as references.

7 DR. BRACKETT: Okay. Jenny?

8 MS. SCOTT: Jenny Scott.

9 In addition, when going through the
10 references, I found one reference in the text that was
11 not cited here, and one cited reference that I didn't
12 see appear in the text. So I'll be looking to fix
13 that.

14 DR. BRACKETT: Appendix 1, Page 15.

15 MS. RANSOM: This is Gerri Ransom.

16 I think the word -- this is towards the
17 end of the last paragraph in Appendix 1, the word
18 "confirmed and characterized" are interchanged. It
19 should be that the "organisms are characterized with
20 wet mount," and then "confirmed with the serology." I
21 think those two words are interchanged.

22 DR. BRACKETT: Any other comments on Page

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1 15?

2 (No response.)

3 DR. BRACKETT: Okay, moving right along,
4 Page 16.

5 DR. ENGELJOHN: I did want -- this is Dan
6 Engeljohn.

7 I did want to add that Dr. Berrang from
8 ARS also participated in the meeting. Although he
9 wasn't an invited speaker, he did come offer in-put at
10 the Subcommittee, and so I'd like to add his name to
11 the list of research expert consultants that met with
12 us.

13 UNKNOWN SPEAKER: And he paid his own way
14 also.

15 DR. BRACKETT: Okay, we can add that. So
16 that would be in Appendix 3, Page 16, Dr. Mark Berrang
17 from ARS.

18 Okay, I think that's it. Did we address
19 everything that we were supposed to?

20 DR. ENGELJOHN: There was one other hand-
21 out that FSIS did provide, which is in terms of some
22 of the validation that the Agency is in fact

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1 undergoing now as we prepare to start up the baseline,
2 we had a series of things that our laboratory is
3 looking into to validate the methodology, and so we
4 provided that just as an indication this is what we're
5 going to do and then ask if the Committee had any
6 suggestions or modifications to that. But we're
7 intending to just go ahead and do these things based
8 on the comments received today about the additional
9 things to look into. We will in fact address those as
10 well.

11 DR. BRACKETT: Our next order of business
12 is actually to adopt this whole document, but it needs
13 to be understood that once the changes and edits are
14 all made this will be circulated to the entire
15 Committee again to make sure that everything has been
16 done.

17 At this time, what we need is a motion to
18 adopt the document, including the suggestions
19 discussed today.

20 DR. WESLEY: I so move.

21 DR. BRACKETT: Irene Wesley, move.
22 Second?

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1 DR. MADDEN: Second.

2 DR. BRACKETT: Joe Madden. Okay, so the
3 motion has been made and seconded to adopt this
4 document that we have been discussing, including
5 suggestions discussed today. We'll circulate that to
6 the Committee.

7 Any discussion about this?

8 (No response.)

9 DR. BRACKETT: All those in favor, aye?

10 (All responded with "aye".)

11 DR. BRACKETT: Any opposed?

12 (No response.)

13 DR. BRACKETT: Okay, we'll pass this
14 document. So we're done with this part. Thanks, Bob.

15 Thanks, Dan, for the report. And thanks to the
16 Committee for the work. I really appreciate the fact
17 that you were able to get this done quickly for us
18 because it is such an important issue at FSIS to get
19 this study moving along the way. So I appreciate the
20 hard work you guys have put in as a Subcommittee to
21 bring this to us today.

22 With that, we'll take a change of pace and

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1 I'd ask Dr. Lee-Ann Jaykus to give a report on her
2 Seafood Cook Subcommittee.

3 DR. JAYKUS: I'm actually representing
4 Spencer Garrett who is the Chair of this Committee,
5 but has been detained because of Hurricane Katrina
6 issues.

7 We met during the last general meeting of
8 NACMCF. We have not met since. At that time we were
9 given seven questions in the charge. The Committee
10 consisted of ten members. Eight of those members were
11 there for the entire meeting and two of them kind of
12 floated in and out, depending upon other requirements.

13 And Mary Losikoff back here was also very, very
14 helpful in our meeting.

15 We basically did on a very cursory level
16 address all seven of the questions, which you should
17 be able to refer to. But I'll go ahead and tell you
18 them very quickly.

19 1) What pathogens and parasites are of
20 concern in seafood purchased by consumers? 2) Do
21 cooking methods differ in their ability to eliminate
22 the identified organisms? 3) Do the cooking

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1 requirements differ by type of seafood, e.g., fin
2 fish, mollusk and shellfish or crustaceans? 4) What
3 effect if any does the condition of the seafood have
4 when purchased (raw, cooked, frozen) on the cooking
5 treatment required? 5) Is there a single temperature
6 that will insure food safety for seafood? 6) Are
7 there consumer methods of preparing seafood that need
8 to be addressed, or other consumer methods; for
9 example, some consumers believe that the lime juice
10 used in cerviche will, quote, "cook the product"?
11 And, 7) Should consumer advice vary based on any
12 susceptible at risk populations?

13 The Committee did spend a fair amount of
14 time discussing how to define cooking. The NACMCF
15 document on pasteurization was very helpful in that
16 regard, and we will continue those deliberations
17 today.

18 We also did provide some answers and some
19 data to these various questions on one or more levels,
20 given the confines of being at this location.

21 Kathryn Boor, Joe Madden, and myself
22 worked pretty hard in trying to put a draft document

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1 together in some form, and that was circulated to the
2 Committee in August, I believe, late August. And
3 Emille and Spencer have since worked on that document
4 to a certain extent, and we do have a working document
5 to go with.

6 I have two questions for clarification,
7 Bob, if you can provide those. The first is that the
8 Committee felt that we would prefer to address the
9 questions in a slightly different order. Is there a
10 problem with that?

11 DR. BRACKETT: I don't have any problem
12 with that.

13 DR. JAYKUS: Okay. And the second
14 question for clarification is that we were uncertain
15 as to whether you wanted us to address some of the
16 microbial toxins, such as *Staphylococcus aureus*
17 *enterotoxin*, also toxins that might be associated with
18 harmful algal blooms and histamine. The reason being
19 is that, of course, many of those or most of those are
20 quite heat resistant. So we would like clarification
21 on that. That will help our deliberations.

22 DR. BRACKETT: It was originally meant

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1 just to mean microbiological agents. The toxins we
2 sort of understood, but those are each stable anyway.

3 DR. JAYKUS: So it's acceptable with you
4 and FDA folks if we exclude those in our
5 deliberations?

6 DR. BRACKETT: Right.

7 DR. JAYKUS: Thank you.

8 DR. RAYMOND: That's the end of the
9 report?

10 DR. JAYKUS: That's it.

11 DR. RAYMOND: Thanks for the brevity.

12 Now, I'll ask Dr. Engeljohn to be equally
13 brief.

14 (Laughter.)

15 DR. ENGELJOHN: And I will. I am proud
16 to say the Committee that I Chaired for the safe
17 cooking of poultry, we had twelve members. We met
18 twice, once at the last meeting to put together a
19 document to address the seven questions that were
20 raised, and then we met Monday and Tuesday of this
21 week.

22 We believe that we have finished our work

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1 in terms of crafting responses to those seven
2 questions. I might just point out that this is a
3 timely issue for the Agency. There have been a couple
4 of outbreaks related to poultry products, and in
5 particular to poultry that was uncooked but appeared
6 to be ready-to-eat to the consumer.

7 This Committee did come to some
8 conclusions. One is that the minimum temperature for
9 safety for cooked poultry for consumers to use would
10 be 165. This is important for us to come with that
11 conclusion, in that the Agency does have a number of
12 temperatures that it provides to the consumer, ranging
13 from 165, 170, 180, depending on which part of the
14 bird you're looking at. And so we've come to one
15 conclusion and then some guidance as to what should be
16 done for consumer education in the future.

17 And then secondly, we do in fact have what
18 we think is a very useful document that can be
19 provided to the small businesses, in particular for
20 how to validate cooking instructions, which is an
21 important need for the Agency in that cooking
22 instructions are not something that most manufacturers

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1 have validated. So we've provided some frameworks for
2 them to use in order to properly address that.

3 And then more importantly, the
4 recommendations from the Committee ultimately will
5 influence the Agency and Risk Management as to whether
6 or not we would pursue a regulation change to require
7 that any time uncooked poultry is used in a product
8 that appears to be ready to eat, that that be actually
9 identified on the principal display panel, which is
10 something we don't require now, but actually probably
11 was a major contributing cause for why the consumers
12 undercooked this product using a microwave.

13 So we have met twice now on this document.

14 We have a document that I believe is completed. The
15 Subcommittee worked very hard this week. What we're
16 going to do is redraft the document based on all the
17 input from the Committee and send it out to the Full
18 Committee with the hope that we would get any edits
19 between now and the next Plenary Session, and then can
20 adopt the report at the next meeting.

21 Thank you.

22 DR. RAYMOND: Thanks, Dan. By the way,

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1 thanks for Chairing two of the Subcommittees. Now I
2 know why I don't see you in the hallways very often
3 back in D.C.

4 Bob, are you going to present now your new
5 charge?

6 DR. BRACKETT: Yes. It's actually not a
7 new charge. What I will be doing is, it's really a
8 pre-charge. It's something that we were going to
9 bring forward as sort of a heads-up of an issue that
10 will be coming the next time. The specific questions
11 will be provided in the next meeting. But it's for
12 those of you who have been involved with, or even
13 concerned about, *Mycobacterium avium* subspecies
14 *paratuberculosis*, (MAP)s as we call it for short.
15 It's a very complicated and a somewhat debatable food
16 safety issue.

17 And so I'm going to just sort of give you
18 background here. You will be getting the charge. We
19 will be providing you with as much of the science
20 background as we can.

21 Just as a way of background, for those of
22 you who may not be familiar, MAP is associated with an

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1 animal disease known as Johnes Disease, which is an
2 infectious bacterial disease in ruminants. We do know
3 that -- actually worldwide, but specifically in the
4 United States, Johnes has been spreading slowly
5 through the domestic livestock population, and it is
6 considered to be endemic in many areas, many countries
7 and many actual areas within the United States. And
8 within the United States, the dairy cattle represent
9 the largest population of MAP infected animals that
10 would be of concern to us, and are therefore the most
11 likely source of direct or indirect, indirect meaning
12 perhaps by manure use on produce has been suggested.

13 And it does appear that the primary source
14 of *Mycobacterium* is the infected cattle herd,
15 especially dairy cattle with Johnes Disease, but we do
16 realize that there are a number of other domestic and
17 equally of concern, wild animals that are susceptible
18 and may serve as environmental sources of
19 contamination that could reinfect even domestic herds.

20 The organism is not just found with cattle
21 or in effect in cattle. It has been isolated from
22 the environment as well, both water, a variety of

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1 foods, including milk and ground beef. So it is an
2 issue that could affect both FDA and USDA-regulated
3 products. And it is being heavily investigated as a
4 pathogen of animals that at least has the potential of
5 being naturally transmitted to humans, which is why
6 it's a concern to us.

7 Some of the areas that we are going to
8 consider with this are the foods that are most
9 concerned with respect to this organism, what sort of
10 processing parameters, regardless of what type of food
11 it is, would insure the destruction of MAP, if it was
12 assumed to be a human pathogen, which it's debatable
13 now, if there are any sanitation practices that one
14 could take to insure destruction or elimination of the
15 organism from the food environment.

16 And really, an equally important part is
17 to identify research that's needed to establish or
18 eliminate MAP as a cause of human illness. There is
19 research out there. But all of these pieces need to
20 be put together in the context of foods. That's the
21 last slide that I have there for this.

22 And so what you will see at the next

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1 meeting is, we will be providing some very specific
2 questions as we've done before for NACMCF to consider,
3 and at that time we will also be providing you and
4 asking for additional scientific evidence that might
5 be available, and we'll also be probably engaging in
6 some, and maybe looking for recommendations in the
7 meantime, of outside experts that could be brought to
8 bear since all of the expertise is not found in this
9 room.

10 And that is all that I wanted to say
11 today. I'd be happy to answer any questions. But
12 more will be coming.

13 DR. WESLEY: What is your time frame for
14 sending us our charge for addressing these questions,
15 begin to address these questions, et cetera?

16 DR. BRACKETT: We'll actually be giving
17 the charge at the next full NACMCF meeting. And so in
18 the meantime we'll be developing the specific charges,
19 statements, as well as some of the possible experts.

20 DR. RAYMOND: Thank you, sir.

21 We're at the point now where we'd like to
22 ask if there's any public comment. We had no one

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1 submit their name desiring to comment, but you're
2 certainly welcome to do so at this time.

3 Sir? And would you step to the microphone
4 because it's being recorded, and provide us with your
5 name for the record, please.

6 MR. WORTH: My name is Mark Worth. I
7 work with Public Citizen, which is a non-profit
8 consumer organization based in Washington, D.C. with
9 about 150,000 members.

10 I came late today. I apologize. Has the
11 seafood portion been discussed yet?

12 DR. RAYMOND: Yes, it has, Mark. We'd be
13 glad to have your input on it.

14 MR. WORTH: And there's more of that
15 coming tomorrow, right, the seafood?

16 DR. RAYMOND: The Subcommittee will be
17 working tomorrow. What we got today was an interim
18 progress report from the Committee.

19 MR. WORTH: Okay, great.

20 DR. RAYMOND: Not a final report.

21 MS. RANSOM: This is Gerri Ransom. We're
22 working this afternoon.

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1 MR. WORTH: I know that this is an FDA
2 issue. Are there any FDA people here today?

3 DR. RAYMOND: Dr. Brackett.

4 MR. WORTH: Oh, great. Hi.

5 DR. RAYMOND: And others.

6 MR. WORTH: We met before, recently.
7 Again, I'm sorry I'm late. I got awful directions
8 from Map Quest, so I recommend anybody using that to
9 confirm that somehow.

10 We have filed extensive comments to the
11 FDA along with another non-profit group in Washington
12 called the Center for Food Safety, regarding the FDA's
13 recent approval of the use of irradiation to eradicate
14 *Vibrio* and other micro-organisms in oysters, clams,
15 mollusks and so forth. It has been mentioned in the
16 risk assessment for *Vibrio*, and I notice that it is in
17 one of the documents here, it is in the document on
18 seafood. I could literally go on far beyond the
19 meager fifteen minutes of public comment allowed
20 during this four day conference, but I just wanted to
21 point out some of our main concerns.

22 Number one, the D-values that are

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1 necessary to eradicate *Vibrio* in shellfish were based
2 on documents, believe it or not, that do not address
3 this issue specifically. It appears as though they
4 were just pulled out of thin air.

5 Number two, the rule did not consider the
6 effect of irradiation on the shells of the mollusks,
7 and this might sound like a trivial matter, but
8 actually submitted by the petitioner and mentioned in
9 the rule was the fact that different thicknesses of
10 the mollusks could affect the ability of the
11 irradiation to kill the bacteria inside the animal,
12 and it does not mention at all the potential that
13 toxic chemicals could migrate from the shell into the
14 meat.

15 This is an issue that's been lingering for
16 years, that the Federal Register Notice rather
17 irresponsibly dismissed, was the fact that chemicals
18 called 2-ACBs (2 substituted alkylcyclobutanones)
19 which have only been found to occur in irradiated food
20 that contain fat, which is basically all foods, were
21 not considered adequately in the rule. The FDA made
22 no effort to identify the either potential or adequate

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1 or actual content of 2-ACBs in mollusks. These
2 chemicals have been associated with colon cancer
3 development -- I'm sorry -- colon tumor development in
4 rats and genetic damage in human cells. This is an
5 issue that we brought up with Dr. Brackett in a
6 meeting last year, I believe.

7 And finally, the rule completely ignored a
8 study that was done in which irradiated clams were fed
9 to lab animals and there were rather grievous
10 reproductive problems and premature death of
11 offspring.

12 Also, in the Federal Register filing there
13 were personal attacks by name made upon me and a staff
14 member at the Center for Food Safety in Washington. I
15 don't know how often the FDA makes personal attacks
16 against people by name in the Federal Register. I'm
17 not necessarily embarrassed by this, but I think it's
18 a unique situation, and now my name and the name of a
19 staff member at the Center for Food Safety will be
20 listed -- will be mentioned in the Federal Register in
21 perpetuity, which I think was an inappropriate action
22 by the Agency.

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1 I guess my question is -- I have a
2 reputation of having a long preamble and then asking
3 the question. My question is, is given these
4 problems, and these are just a few of many, and I know
5 this is not the purview of the USDA, how big of a role
6 does the Agency see irradiation as an intervention
7 step for *Vibrio* and other bacteria that are perhaps
8 less common but still problematic to mollusks?

9 Thank you.

10 DR. RAYMOND: Thanks, Mark. Any other
11 public comments?

12 Then I'll declare this particular portion
13 of this NACMCF meeting adjourned. We are right on
14 schedule for lunch.

15 MR. WORTH: I'm sorry. I believe I asked
16 a question and there are about fifty people in the
17 room who might be able to answer it.

18 DR. RAYMOND: I think the Subcommittee on
19 Safe Practices for Preparing Seafood will probably,
20 you know, address that in their report.

21 MR. WORTH: Well, there's only one word
22 in the report and this is the only public comment

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1 period, and I think it would not be unreasonable to
2 ask for an answer from somebody, even maybe from Dr.
3 Brackett.

4 DR. RAYMOND: Mark, the report was not
5 presented today. It was an interim. It was a
6 progress report. They are going to reconvene at 1:00
7 this afternoon and you are welcome to sit in on that
8 Subcommittee meeting and observe and listen and see if
9 they answer that question, or if they're working
10 toward your question.

11 I will give the USDA an opportunity if
12 they do wish to respond, but if this is not the proper
13 time to respond I'm not going to make them respond if
14 that's part of the report that the Subcommittee is
15 working on. It's a work in progress.

16 MR. WORTH: So how can you credibly --
17 how can you credibly state that the consumers, and I
18 guess I'm the only consumer representative here.

19 DR. RAYMOND: I'm a consumer.

20 MR. WORTH: Well, it's nice that you have
21 a seat at the table, because I don't.

22 How can the Agency credibly state that

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1 consumers are stakeholders in this discussion when A,
2 there's a fifteen minute comment period for a four day
3 meeting, and B, that there's fifty people here that
4 can't answer my question. It's a very simple
5 question.

6 How big of a role does the Agency see or
7 does the Agency foresee irradiation as an intervention
8 step for seafood?

9 DR. RAYMOND: Mark, I'm going to go back
10 to the comment you made --

11 MR. WORTH: On a scale of one to ten; is
12 it a one; is it a five; is it a nine?

13 DR. RAYMOND: Mark, you made the comment
14 consumers only get fifteen minutes out of a four-day
15 meeting. I need to clarify that comment. This is the
16 open public meeting from 8:30 to 12:00. It's not a
17 four day meeting that we ask the public to comment
18 necessarily. We have Subcommittee meetings. A lot of
19 work is done by the Subcommittees to present the
20 report.

21 Today what you heard and saw was a very
22 lengthy discussion on the report that we were asked to

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1 approve today on *Campylobacter*, you know, and that was
2 a very public discussion, everybody in the room got to
3 hear it, and we've asked for comment on that.

4 Now the point that you're making the
5 comment on is a work in progress that is not done yet.

6 That's why this Committee has been appointed by the
7 President to give scientific advice, perhaps by the
8 Secretary, perhaps I don't know who. This Committee
9 is appointed to give scientific advice through due
10 diligence and through due study and through due
11 conversations and discussions to provide advice to the
12 FDA, to FSIS, to the Department of Commerce, and other
13 entities, so they can develop policies and guidelines
14 that will protect the public safety.

15 MR. WORTH: Well, I tried to -- you know,
16 I'm going to check my -- I'm checking my clock here.
17 I don't mean to be sarcastic. But you know, I came
18 here to raise scientific and technical issues, but now
19 I'm talking about structural issues about how this
20 meeting was put together, and frankly, I'm not
21 interested in how the agenda was structured, who got
22 to say what when, and I think that the reason that

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1 nobody has answered my question is problematic.

2 Was there a decision made? Was there a
3 vote taken by the group here not to answer questions
4 raised by consumers, or are you making the decision by
5 yourself? Did people get a memo saying if anybody
6 asks a question from the microphone, not to answer it?

7 DR. RAYMOND: Mark, first of all, I
8 invited you to attend the working group this
9 afternoon. That's when they'll get down in the weeds
10 and do an in-depth discussion on issues like the one
11 you're raising. You're invited to attend that.

12 I also have asked Dr. Brackett if he would
13 care to respond to that if the FDA has a position, and
14 he's going to do that right now.

15 MR. WORTH: Okay, thank you.

16 DR. BRACKETT: First off, having to do
17 with the public comment period, and if you haven't
18 been to the NACMCF meetings, as Dr. Raymond just
19 stated, this Committee is asked to give scientific
20 information on specific, very specific issues that are
21 addressed in the agenda. They are not to make policy
22 recommendations what either Agency, whether it would

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1 be USDA or FDA, would choose to do in the future.

2 With respect to what would be done here,
3 there is a very specific charge with respect to
4 seafoods and it is listed on the agenda, which is
5 determination of cooking parameters for safe seafood
6 for consumers. That is the only thing the Committee
7 will be deliberating today with respect to seafood.
8 And that is what we hope to get comments on. There
9 are many, many other related food safety issues that
10 could be brought up in a public comment. But this
11 Committee is not going to address them.

12 DR. RAYMOND: Thank you, Dr. Brackett.

13 Now, any other public comments?

14 (No response.)

15 DR. RAYMOND: We may have reached the
16 12:00 hour, but we certainly will accept public
17 comments if anybody has any.

18 Seeing none, then this meeting is
19 adjourned. We'll take one hour for lunch and then the
20 Subcommittee will reconvene.

21 (Whereupon, at 12:00 p.m. the meeting was
22 adjourned.)

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