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September 10, 2010

Christopher Braden, M.D.
Acting Director
Division of Foodborne, Waterborne, and Environmental Diseases
Centers for Disease Control and Prevention
1600 Clifton Road, Northeast
Atlanta, GA 30333

Dear Dr. Braden:

The American Meat Institute (AMI) Foundation is a non-profit research, education and information foundation established by AMI in 1944. The Foundation actively works with the meat and poultry industry, universities, government agencies, and other stakeholders to conduct food safety research. AMI, whose members slaughter and process more than 90 percent of the nation's beef, pork, lamb, veal and a majority of the turkey produced in the United States, supports achievable public health objectives based on sound science that significantly improve public health through quantifiable metrics. The use of science and food safety metrics are critical for the food industry to design and implement preventative food safety processes and control systems.

Data from the Mead *et al.* "*Food-Related Illness and Death in the Untied States*"¹ report is widely referenced by public health agencies, regulatory agencies and congressional staff when discussing foodborne illnesses. These data are used when making food safety policy and public health decisions. In order to improve food safety and further reduce the risk of foodborne illness, it is absolutely critical to have the most accurate estimation of foodborne disease as the cause of illness, hospitalizations and deaths.

AMI Foundation strongly supports the update of the Mead *et al.* report and encourages the expedited publication of the new estimation model for the burden of foodborne disease.

The food industries, including the meat and poultry sector, with other stakeholders have invested significant resources to make our food supply safer. Eleven years ago AMI members made food safety their top priority and a non-competitive issue. This last decade, the meat and poultry industry has been successful in making a tremendous reduction in the pathogen risk profile of their products. Updated foodborne illness estimates could show tangible results to these efforts. AMI and the Foundation are eagerly awaiting the update to the Mead *et al.* report, which has been in preparation since before 2007 and, inexplicably, has not yet been released.

¹ Mead, P.S.; Slutsker, L.; Dietz, V.; McCraig, L.F.; Bresee, J.S.; Shapiro, C.; Griffin, P.M.; and Tauxe, R.V. 1999. Food-Related Illness and Death in the United State. *Emerging Infectious Diseases*. 5(5): 607-625.

Large discrepancies between the 1999 Mead estimates and current CDC data exist. These discrepancies may be caused by the fact that the estimates were derived using adjustments for underreporting of foodborne illnesses, which are likely no longer valid given the changes in public health reporting over the past two decades. These 11-year old estimates also virtually ignore the newer, more accurate and specific methods of detecting microorganisms and the vast improvements made by the food industry in improving the safety of their products over the last decade.

One example of this discrepancy can be highlighted from a 2010 CDC FoodNet report, which covers approximately 15 percent of the U.S. population, "In 2009, a total of 17,468 laboratory-confirmed cases of infection were identified."² The recently released CDC analysis of U.S. illnesses for 2008, based on reporting from the entire country, indicated a total of approximately 100,000 illnesses for the same food-related notifiable diseases. This is consistent with the FoodNet sample.³ But these data clearly show large discrepancies between the 1999 Mead *et al.* estimates of 76 million cases of illness attributed to the consumption of food products. An update to those foodborne illness estimates is the only true way to measure food safety progress.

Accurate and timelier foodborne illness attribution data is critically needed to improve the safety of the U.S. food supply.

Food attribution data is essential in better understanding the relationship and associated risks between microorganisms and food. As you recently said, "Knowing more about what types of foods and foodborne agents have caused outbreaks can help guide public health and the food industry in developing measures to effectively control and prevent infections and help people stay healthy."⁴ AMI Foundation agrees and believes food attribution data is critical in a preventative process control food safety system.

This objective data allows food safety stakeholders to allocate food safety resources and scientifically justify the decisions made in their food safety system. By having timely, credible food attribution data, the food industry can accurately identify and improve any food safety gaps that may exist. It also may help to identify emerging foodborne risks, especially when such risks have not been previously associated with specific foods. This rapid adjustment to improve food safety can only occur if accurate data is made available as soon as possible to all food safety stakeholders.

Thank you for considering our views. AMI Foundation recognizes the challenges of accurately estimating the burden of foodborne disease and accurately attributing these burdens to food types, but these metrics are essential. The last decade has shown the important role cooperation and communication between public health officials, regulators, the food industry and other allied stakeholders has had on improving food safety. This collaborative story of success could be affirmed through the update of the Mead *et al.* estimation of the burden of foodborne disease.

² MMWR / April 16, 2010 / Vol. 59 / No. 14.

³ MMWR / June 25, 2010 / Vol. 57 / No. 54.

⁴ Accessed August 25, 2010: <http://www.cdc.gov/media/pressrel/2010/r100812.htm>.

Dr. Braden
September 10, 2010
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The AMI Foundation believes our recommendations have substantial merit and are critical in improving the safety of the U.S. meat and poultry food supply. If there are any questions about the above comments, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Betsy Booren". The signature is fluid and cursive, with a long horizontal stroke at the end.

Betsy Booren, Ph.D.
Director, Scientific Affairs

cc: J. Patrick Boyle
Jim Hodges