

## **Historic, Archive Document**

Do not assume content reflects current scientific knowledge, policies, or practices.



dHD9000  
.9  
.U5035  
v. 2

OFFICIAL TRANSCRIPT

Before the

**UNITED STATES  
DEPARTMENT OF AGRICULTURE**

---

In the Matter of:

**ADVISORY COMMITTEE ON MEAT AND  
POULTRY INSPECTION**

---

Place: San Francisco, California

Pages: 133 thru 250

Date: July 30, 1982

**MILTON REPORTING, INC.**

General Stenotype Reporting  
Suite 301-302  
1601 Connecticut Avenue, N.W.  
Washington, D.C. 20009  
(Telephone No. 533-3596)

AD-33 Bookplate  
(1-63)

**NATIONAL**

**A  
G  
R  
I  
C  
U  
L  
T  
U  
R  
A  
L**



**LIBRARY**

1 UNITED STATES DEPARTMENT OF AGRICULTURE  
2 ADVISORY COMMITTEE ON MEAT AND POULTRY INSPECTION

3 ---o0o---

4  
5  
6 The Sheraton-Palace Hotel  
7 Comstock Room  
8 639 Market Street  
9 San Francisco, California

U. S. DEPT. OF AGRICULTURE  
NATIONAL AGRICULTURAL LIBRARY

10 JUN 22 1984

Friday, July 30, 1982

CATALOGING = PREP.

11  
12 Volume II

13  
14 The above-entitled matter came on for public  
15 hearing at the hour of 9:00 o'clock a.m.

16 BEFORE:

17 DR. DONALD L. HOUSTON  
18 Administrator  
19 Food and Safety Inspection Service  
USDA

20 ROBERT G. HIBBERT  
21 Director  
22 Standards and Labeling Division  
Food Safety Inspection Service

23 DR. D.C. BREEDEN  
24 Acting Regional Director  
25 Western Region, MPI, FSIS  
USDA



## 1 APPEARANCES:

2 DR. ROSLYN B. ALFIN-SLATER  
3 School of Public Health  
4 University of California  
5 Los Angeles, CA 90024

6 DR. CARROLL S. BRICKENKAMP  
7 National Bureau of Standards  
8 U.S. Department of Commerce  
9 Washington, D.C. 20234

10 DR. MAHLON BURNETTE, Executive Director  
11 League for International Food Education  
12 915 Fifteenth Street, NW, Suite 915  
13 Washington, D.C. 20005

14 HON. S. MASON CARBAUGH  
15 Commissioner of Agriculture and Consumer Services  
16 Commonwealth of Virginia  
17 Richmond, VA 22309

18 DR. FRANK R. CRAIG  
19 Director of Health Services  
20 Perdue Farms, Inc.  
21 Salisbury, MD 21801

22 MRS. ESTHER CRAMER, Vice President, Community Relations  
23 Alpha Beta Company  
24 777 South Harbor Blvd.  
25 La Habra, CA 90631

PROFESSOR E.M. FOSTER, Director  
Food Research Institute  
Chairman, Department of Food Microbiology and Toxicology  
University of Wisconsin  
Madison, WI 53706

MR. ROBERT H. LOUNSBERRY, Secretary  
Department of Agriculture  
State of Iowa  
Des Moines, IA 50319

MR. JOHN E. MCDADE  
Executive Vice President  
Norbest, Inc.  
Salt Lake City, UT 84110

(Appearances continued)





1 APPEARANCES, continued

2 MS. ROSEMARY MUCKLOW, Executive Vice President  
3 Western States Meat Association  
4 955 Market Street  
5 San Francisco, CA 94103

6 MR. DEAN PRIDGEON, Director  
7 Department of Agriculture  
8 State of Michigan  
9 Lansing, MI 48909

10 DR. ERNEST ROSS, Poultry Scientist  
11 Department of Animal Sciences, University of Hawaii  
12 1800 East-West Road  
13 Honolulu, HI 96822

14 HON. KEITH SEBELIUS (not present)  
15 Attorney and former member of Congress  
16 602 West Wilberforce Street  
17 Norton, KS 67654

18 MS. YVONNE VIZZIER, Assistant Vice President  
19 Marshal Durbin Companies  
20 541 Ford Avenue  
21 Jackson, MS 39209

22 MR. WILLIAM D. WATERS, Pork Producer  
23 Stillwaters, Inc.  
24 Route 1, Box 90  
25 Palmyra, NC 27859

DR. ELIZABETH WHELAN, Executive Director  
American Council on Science and Health  
47 Maple Street  
Summit, NJ 07901

DR. GEORGE D. WILSON  
Vice President, Scientific Affairs  
American Meat Institute  
1700 North Moore Street  
Arlington, VA 22209

---



I N D E X

Items for discussion on the Agenda:

Page

Margarine Standard

Prior Labeling Approval

Sodium Labeling

Continuous Inspection

Import Inspection

Food Safety Legislation

Food Safety Poster Contest

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25



P R O C E E D I N G S

(Volume II)

(9:00 a.m.)

DR. HOUSTON: Yesterday we were able to move through the agenda on schedule and make all of the presentations and cover the subjects that intended.

As we indicated yesterday, what we would like to do today, as we have in the past, is to again go through the agenda and provide the opportunity for each member of the Committee to make their views known on that particular subject.

As in times in the past, colloquy will ensue between members of the Committee. I do not intend to cut off any conversation; I want everyone to have a full opportunity to make their views known and to enter into discussions with other members of the Committee as they see necessary. Therefore, to a large extent, the length of today's meeting will be determined by the amount of interest you have in these particular areas.

The first subject on the agenda is the Margarine Standard. I will now open that item up for discussion for the members, if indeed there are any comments that any of you wish to make.

DISCUSSION ON THE MARGARINE STANDARD

DR. BRICKENKAMP: I have a question about margarine using animal fat, which is a question of clarification. I should have asked it yesterday. There is a type of product on the marketplace which consumers recognize as margarine, but it's



1 not because it has lower fat content -- often called "spread" or  
2 something like that.

3 Does anyone in industry using animal fat also  
4 produce this similar material?

5 MR. HIBBERT: Yes. We do have some animal products  
6 that are labeled as spread in that same kind of situation.

7 DR. BRICKENKAMP: How do the food standards apply  
8 to these products?

9 MR. HIBBERT: Those are products that are outside  
10 the standard.

11 DR. BRICKENKAMP: Therefore, they can, for example,  
12 enrich it with vitamin E and so on and so forth?

13 MR. HIBBERT: I'm not aware of that being done  
14 for these products. In other respects, they will not meet the  
15 parameters of the given standard in terms of the required level  
16 of the fat and things of that nature.

17 DR. BRICKENKAMP: Are you, in Food and Drug,  
18 considering establishing standards for this type of product?

19 MR. HIBBERT: No. That's not under consideration  
20 right now.

21 DR. BRICKENKAMP: Thank you.

22 MS. CRAMER: Ms. Cramer. Is it now my understand-  
23 ing that now it is required to use both the initials BHA and  
24 BHT and the spelling out of the names in prens following?

25 MR. HIBBERT: No, it's not. As I think I indicated





1 yesterday, the proposal could be fairly read to say that, but  
2 that really isn't the case. And we'll clarify that point with  
3 the final rule.

4 But we do now approve labels, as does Food and  
5 Drug, simply with the abbreviations.

6 DR. ALFIN-SLATER: You might be interested to know  
7 that in connection with BHT, last year this was a poison, a  
8 chemical whose name was unpronounceable, therefore, you can't  
9 eat it. This year, it's being sold as 1) a preventive to  
10 stomach cancer, and 2) for longevity.

11 And the same people who were so opposed to it --  
12 this is in my area. And, you know, we have our share of people  
13 who are -- well, what shall I say? -- food nuts, faddists -- not  
14 actually faddists, just nuts. And this, I understand, is even  
15 being sold right on the UCLA campus, because this is the answer  
16 to half of our problems.

17 So you see, we come full circle sometimes. And so  
18 I have stopped worrying.

19 Another thing that I would like to ask -- I was  
20 under the impression that there was a standard of identity for  
21 margarine, in which the type of fat that had to be used was  
22 vegetable oils, not animal fat. Is this not right?

23 MR. HIBBERT: That would be the Food and Drug  
24 product; the food regulated by the Food and Drug Administration,  
25 as opposed to our agency.



1 DR. ALFIN-SLATER: But, I mean, there is no animal  
2 fat in margarine, is there? Or there should not be any animal  
3 fat.

4 MR. HIBBERT: Yes, there is. That's what we're  
5 talking about. We're talking about margarine which is derived  
6 from animal fat. That is the product that we regulate.  
7 Food and Drug will regulate the margarines that are made from  
8 vegetable oils.

9 About 97 percent of the margarine market is the  
10 vegetable oil product.

11 DR. ALFIN-SLATER: How is the consumer to know the  
12 difference when the name is the same?

13 MR. HIBBERT: The ingredients statement would  
14 ordinarily be the point of reference to find out what the source  
15 of the oil was. Of course, both products could be labeled as  
16 margarine.

17 DR. ALFIN-SLATER: And how many people read the  
18 fine print?

19 MS. WHELAN: But usually it says "derived from  
20 corn oil." Or that's one of their major selling points.

21 DR. ALFIN-SLATER: But I want to know -- suppose  
22 there is animal fat added. Where do you see this? This is in  
23 the fine print, because it's a minor ingredient -- but, never-  
24 theless, there.

25 MS. WHELAN: I think Mazola 100 percent corn oil



1 is there.

2 DR. HOUSTON: I don't know that there is a  
3 margarine that's made entirely out of animal fat. As Bob  
4 mentioned, 95 to 97 percent of it is made purely with vegetable  
5 oils.

6 Those which utilize animal fats will do so in some  
7 percentage; and they combine that with vegetable fats. When  
8 they do, it must go on the ingredient statement that the animal  
9 fat is there, as well as the origin of that fat, whether it  
10 be beef or pork or whatever the case may be. But there are no  
11 requirements for any qualifying statements.

12 DR. ALFIN-SLATER: Well, I think that this is a  
13 mistake. I think it should be very definitely labeled. Because,  
14 first of all, there are religious and cultural groups who are  
15 using margarine with the understanding that it's a vegetable  
16 product and has no animal fat.

17 Secondly, there are people who use margarine in an  
18 attempt to lower serum cholesterol levels, who want to make sure  
19 that there is no cholesterol. And I've always said that there  
20 is no cholesterol in margarine. And now I find I'm going to be  
21 wrong -- I am wrong.

22 DR. HOUSTON: Well, you're right 97 percent of the  
23 time.

24 DR. ALFIN-SLATER: Yes. But that 3 percent bothers  
25 me.



1 DR. HOUSTON: It's a valid point. The fact is,  
2 it's not labeled in any prominent fashion other than the ingred-  
3 ient statement. And we've always used that as the required  
4 method of informing consumers of what's in the product.

5 MS. MUCKLOW: Don, the flowers that Roslyn brought  
6 me last night have just departed out the door again. I thought  
7 we'd have them here to beautify the room this morning. So maybe  
8 Linda could recover them and they could be set up beside you,  
9 as an added addition.

10 Further, I do have a comment of more substance.  
11 With respect to the Margarine Standard, it seems to me that if  
12 Food Safety and Inspection Service has the responsibility for a  
13 standard for a product that represents approximately 3 percent  
14 of the total market of margarine, that Food Safety and Inspection  
15 Service -- even though it hurts me to say it -- should be a  
16 follower rather than a leader on this product standard. And  
17 Food Safety and Inspection Service should not do anything that  
18 would make life more difficult for a margarine manufacturer who  
19 wants to include animal fat in the processing of margarine under  
20 what would otherwise be an FDA standard.

21 I certainly don't think we should put road blocks  
22 in his way. And I would hope that you're being followers rather  
23 than leaders in this standard.

24 MR. HIBBERT: I think it's fair to say that the  
25 thrust of the effort was to reconcile and get rid of any





1 unnecessary differences with the FDA standard.

2 DR. ALFIN-SLATER: Rosemary, I didn't mean that  
3 animal fat should not be added to margarine. I just said that  
4 when it is, it should be so stated on the label, so that people  
5 who do not want any animal fat will know that this is a product  
6 that they shouldn't buy. To most of us, it doesn't matter;  
7 but to some people, it does.

8 DR. WILSON: I have a comment on that. George  
9 Wilson. I hear exactly what you're saying, but I think there  
10 is a lot of precedent already there that says if we declared it  
11 in the ingredients text we have presented the facts to the  
12 consumer.

13 To go one step further, I believe there are already  
14 in the marketplace products which use the terminology and/or.  
15 And this is a far more liberal interpretation and allowance  
16 than is suggested here.

17 I think if we challenge the position that the  
18 declaration in the ingredients text is less than satisfactory,  
19 we open up a whole big gamut of rules and regulations relative  
20 to labeling. That doesn't make them right or wrong; I'm just  
21 suggesting that you open up a big subject if you suggest other-  
22 wise.

23 DR. ROSS: Ernest Ross. Yesterday, there was a  
24 lot of talk about labeling and possible misrepresentation. I  
25 think here the point is that there may possibly be an



1 inadvertent misrepresentation by not stating on the 3 percent  
2 that it is somehow different than the other 97 percent.

3 DR. HOUSTON: Does anyone else wish to make any  
4 comments? Yes, Ms. Mucklow.

5 MS. MUCKLOW: Just one final word. It was my  
6 privilege a couple of years ago to participate in some consumer  
7 focus group research on a subject then known as "mechanically  
8 deboned meat." And one of the pleasant pieces of information  
9 that I gathered from that research was that consumers really do  
10 understand and are looking at the ingredient statement if they  
11 are concerned about what is in a product.

12 And they even understand, from the relatively  
13 small number of people in that sample -- but I think they are  
14 reasonably representative -- They do understand that those  
15 ingredients are listed in the order of predominance. And  
16 maybe your agency and the Food and Drug Administration is to  
17 be congratulated that they finally understand this. This has  
18 become a widespread, accepted piece of knowledge.

19 And I would have to agree with George, that the  
20 obligation is fulfilled by including that information in the  
21 ingredient statement.

22 DR. HOUSTON: Dr. Ross.

23 DR. ROSS: I would question just how widespread  
24 that knowledge is known.

25 DR. ALFIN-SLATER: I also would like to tell you,



1 Rosemary, that a lot of consumers, unfortunately, get their  
2 information from columns in newspapers. And I write one too.  
3 And I have always said that, you know, margarine doesn't have  
4 any cholesterol in it, because it's made with vegetable oil  
5 products.

6 I think that the consumer should be made aware  
7 of the fact that they should pay a lot of attention to labels.  
8 You know, the people who complain are not the usual consumer.  
9 The people who are complaining about mechanically deboned meat,  
10 for example, are a fringe, a small minority, I would say. But  
11 these are the ones who are vocal.

12 MS. CRAMER: It appears you have a challenge,  
13 Ros, because you'll educate the whole readership of the LA Times  
14 now.

15 DR. ALFIN-SLATER: I don't know how to say it;  
16 because, you know, how can you differentiate a margarine from a  
17 margarine? The only thing I can keep on doing is tell my  
18 people to read labels.

19 DR. HOUSTON: Dr. Burnette.

20 DR. BURNETTE: Don, isn't it a fact though that  
21 the statutory language defines margarine, allows animal fats  
22 in there; and, therefore, by regulation, you couldn't call it  
23 anything other than margarine if you wanted to?

24 DR. HOUSTON: Well, that's true. It's a unique  
25 situation, in that when Congress drafted the Federal Meat



1 Inspection Act they specifically listed margarine which contains  
2 animal fats subject to that law. I've never looked at the  
3 legislative history to see why Congress was so explicit. But,  
4 nevertheless, they were. And they made it abundantly clear that  
5 margarine which contained animal fats was to be regulated by  
6 the Department of Agriculture and would be called margarine.  
7 But I can't tell you why they were that explicit.

8 It, however, has been a product that is probably  
9 growing less in volume every year. But, as we pointed out,  
10 there is a small amount that's still manufactured which contains  
11 animal fats.

12 Just to digress for a moment -- I think we realize  
13 that our continued regulation of margarine is questionable,  
14 considering the fact that it's a low volume product; and,  
15 secondly, even margarine which contains animal fat, contains  
16 those fats at relatively small percentages.

17 We have, for example, in conducting the Exemption  
18 Study which I talked about earlier, and talked about at the  
19 first meeting of the Advisory Committee, have been considering  
20 perhaps no longer regulating that product and classifying all  
21 margarine to be, perhaps, regulated by FDA because of the fact  
22 that animal fats are used at such a small level and small  
23 volumes.

24 So we recognize that there may be some differences  
25 there that are doing nothing but leading to duplication and





1 creating some unnecessary costs for us. But nevertheless, the  
2 way the law is written, we have no choice, as you pointed out,  
3 but to continue being involved with it.

4 DR. HOUSTON: Does anyone else wish to make a  
5 comment on the Margarine Standard?

6 (No response.)

7 DR. HOUSTON: All right. Thank you, very much.  
8 I would say at this point, that we obviously will consider all  
9 of the comments that are made today before we issue any final  
10 rules in the areas that are under consideration. And each of  
11 you will receive a copy of the transcript after it's received  
12 by the Department and reviewed.

13 The next item on the agenda is the Prior Labeling  
14 Approval System. We would appreciate hearing from you as  
15 to what direction you think we ought to go in that area.

16 DISCUSSION ON PRIOR LABELING APPROVAL SYSTEM

17 MS. CRAMER: Esther Cramer. I think I heard  
18 yesterday a concern that the acceptance or denial would be,  
19 perhaps, by a single person. If the person applying for label  
20 approval, would they have the option of then going to Washington  
21 to the central --

22 MR. HIBBERT: That's correct. Any denial of the  
23 application by the inspector -- the next step would be a sub-  
24 mission to Washington. And then, theoretically, there are  
25 rights of appeal beyond that point.



1 MS. CRAMER: Thank you.

2 DR. HOUSTON: If I could elaborate on that a  
3 minute -- That's a good point to pursue. Because there are  
4 some very formal steps that are available to the industry in  
5 appealing the Department's decision on labeling materials.

6 The rules call for those to be appealed to my  
7 level. And if those decisions are considered wrong by the  
8 industry, they then have the right to appeal that decision and  
9 have a hearing in front of an Administrative Law Judge in the  
10 Department. That decision is even then subject to further  
11 review by the Judicial Officer in the Department. And beyond  
12 that, of course, the industry can take their case to the  
13 court.

14 There are a number of appeal procedures that  
15 can be taken. And if a particular plant does not like a  
16 decision that is rendered at the administrator's level, they have  
17 every opportunity to appeal it. It's a very strict and very  
18 formal system.

19 MR. LOUNSBERRY: Just an observation -- Lounsberry,  
20 from Iowa -- You asked for observations on the direction you're  
21 traveling with this particular program. I think you're  
22 traveling in the right direction. I think that the pilot  
23 project has certainly lent credence to the fact that you can  
24 expedite some of the minor labeling provisions. And it is a  
25 voluntary program; it's not mandatory. Those who don't like it,



1 certainly can follow the old way. And I think you should go  
2 ahead and give her a try.

3 DR. HOUSTON: Dr. Burnette.

4 DR. BURNETTE: Mahlon Burnette. I agree completely  
5 with the proposal that's out there. But I have to admit to a  
6 bias that if I could rewrite the law, I'd do away with all the  
7 prior label approval. If somebody is in business they should  
8 know how to properly label their product. And the burden of  
9 the law should fall on the people in the business rather than  
10 the Department of Agriculture, as it does now.

11 In the FDA system, if I develop a product and sit  
12 down and put together what I think is a legal label, I will  
13 make my production decisions and my packaging decisions in  
14 advance, based on that, and will know that at some date three  
15 weeks in the future, I'll have the product in the marketplace.

16 When this proposal is accepted -- which I feel  
17 comfortable that it will -- you will have some USDA regulated  
18 products in which you know that it's exactly the opposite; you  
19 have to submit the label and get it approved, and you know you  
20 can't make any production or marketing distribution decisions  
21 until after that comes back. But you have some that will fall  
22 in the middle.

23 And I wonder if you shouldn't consider setting up  
24 some expeditious manner of appealing. Because if I'm a  
25 manufacturer and I've determined that I've already got sketch



1 approval and I think that I'm going to be in business two weeks  
2 from now and I draw it up and I'm running the line and then all  
3 of a sudden my IIC says "tilt;" then I've already made those  
4 business decisions, and I'm in a serious bind.

5 In those instances, it perhaps would be reasonable--  
6 If I had made a reasonable determination that I thought it fell  
7 within the purview of this proposal, that I thought it was going  
8 to be approved and I had a problem, there should be some way  
9 that I and my IIC jointly could get an instant review back in  
10 Washington because I'm in trouble; rather than the normal pro-  
11 cedure of saying, well, now, I'll go and put it in the mail and  
12 stop the production line and stack the stuff up in the ware-  
13 house.

14 Because I have to believe that the manufacturers,  
15 if they think that their label is simple enough that it's  
16 going to fall under this system, will be assuming approval.  
17 And when they don't, it's going to upset previously made pro-  
18 duction schedules.

19 DR. HOUSTON: I think, on an informal basis, that  
20 system is already in place. The seriousness of the problem is  
21 usually related to how quick we receive a call from industry,  
22 or how soon the problem is elevated to a level that it does get  
23 attention.

24 There are times, when a problem is serious enough,  
25 that people will call my office or someone on the immediate





1 staff. We're always accessible; and if there's a serious  
2 problem, we'll look at it right away. So I think in most cases  
3 if that kind of a situation does arise, we do have people in  
4 position that are ready to respond and to avoid business delays  
5 etc., that can occur.

6 But I admit it's not written into the regulation.  
7 But because of the way we operate, it's part of the informal  
8 appeals system that exists within the program.

9 MR. HIBBERT: If I can just elaborate on that a  
10 bit. It's not unusual, in my experience, to get a phone call  
11 at 3:00 o'clock in the afternoon from someone who's got a truck  
12 waiting on a loading dock or an inspector has a problem. And more  
13 often than not, you can work those things out informally.

14 In addition to the notion of the formal appeals  
15 system, we spend a fair amount of time just troubleshooting  
16 those kinds of problems on a day-to-day basis. And I would  
17 assume that that would continue regardless of the amount of  
18 change that's worked into this.

19 DR. HOUSTON: Your point is valid though. And  
20 with a pre-approval or a prior approval system, unless we were  
21 ready to respond quickly to a lot of those questions, there  
22 would be chaos and disarray at certain times if we didn't.

23 MR. MCDADE: This is John McDade. I think Dr.  
24 Burnette brings up something that gets into one or two problems  
25 here. No. 1, this does not in any way change the regulations.



1 It says: "Poultry products must be labeled properly prior to  
2 leaving official establishment." It does not say that we  
3 couldn't continue to pack them and put them into storage and  
4 then, at that time, you make your decision.

5 But earlier back -- and I believe it's 381.112.  
6 It indicates at the beginning of the labeling subchapter, that  
7 labeling has to be correct at the time it leaves the official  
8 establishment. This is important. And this is still in effect,  
9 as I understand it.

10 MR. HIBBERT: That's correct.

11 MR. MCDADE: This no way changes that.

12 MR. HIBBERT: No.

13 MR. MCDADE: And secondly, I think what Dr.  
14 Burnette brings up is important. The way that this is written,  
15 discussing the appeal, it says: "The appeal shall be made within  
16 48 hours from the time the decision is made." And that is  
17 always not practical, because many times the decision is made  
18 a week in advance.

19 I assume that you will interpret this to mean that  
20 the time that we are notified of such a decision, that we  
21 would want to appeal.

22 MR. HIBBERT: Can you direct me to that section?

23 MR. MCDADE: Yes. On the appeal procedure, 381.35,  
24 on page 2219, the lower right-hand paragraph.

25 MR. HIBBERT: What was it?



1 MR. MCDADE: 381.35. And it says: "Any person  
2 receiving inspection service may, if dissatisfied with any  
3 decision of any inspection relating to an inspection, file an  
4 appeal from such a decision, provided that such appeal is  
5 filed within 48 hours from the time the decision was made."

6 MR. HIBBERT: What that is -- That is the current  
7 language of the general appeal provisions in both the meat and  
8 poultry regulations. The reason why that was republished and  
9 modified was to make it clear that this is a somewhat unique  
10 circumstance, in that the appeal would not run from the inspector  
11 up his entire chain of command through the region, which would  
12 be the ordinary case in an inspection decision, but rather,  
13 into Washington after the inspector's decision.

14 But we would not be rigid about that if there was  
15 a problem with getting notice, in terms of cutting someone off  
16 if they had a real problem. I don't think that would be a  
17 problem.

18 MR. MCDADE: I appreciate that, Bob. I recognize  
19 that as being exactly the appeal you would use in any other  
20 appeal made for ready to cook or any other factors, postmortem  
21 or anything. So this is the same. But I would hope it would  
22 apply a little different, since we do not always know immediately  
23 when this is made. It could be a week later or something.

24 Mr. Chairman, while I have the microphone, I would  
25 like to say that it's not often on this Committee that we'll see



1 something come before this Committee that I think has real  
2 benefits that will be passed along to the consumer. I think  
3 benefits for the regulatory side of this, where it's going to  
4 help you in your crunch to meet your budgetary restraints, will  
5 be a tremendous asset to industry. You just cannot imagine  
6 how much time is spent in industry and how much delays in  
7 getting food to the market because of labeling problems.

8           These problems are not caused by the labeling  
9 staff, it's caused because of the way this law was written and  
10 the regulations; in that, this has to be handled by mail. Label  
11 approval has to be sent in by mail, which takes an enormous  
12 amount of time. It has to be handled, it has to come back by  
13 mail -- this is just for the sketch approval -- and then you  
14 wait the period, you send it in again for the final, and that  
15 has to come back. It's very time consuming, and it's costly.

16           It just costs us the flexibility that we need to  
17 do business in an efficient way in the industry. And I want to  
18 applaude the Department for coming up with this, because,  
19 knowing our industry well enough, we'll pass these savings down  
20 to the consumer. There will be savings to be made.

21           And I think someone as in Esther's position, knowing  
22 from a chain store -- they are able to come to a processor and  
23 order the product and provide them the bags to pack it in and  
24 expect to get it in certainly less than two or three months now.  
25 Because, as I understand, if someone has a bag approved, why,





1 it's a simple -- In other words, it's not a complicated product,  
2 it's one of the simple labels. Then we could immediately receive  
3 permission to pack it in the bag and provide the product to the  
4 consumer without any undue delays.

5           And again, I'm saying that the delays are not  
6 caused by long holdups in the shop, they are caused by moving  
7 around in the mail and somebody leaves the Zip Code off, it will  
8 not be delivered or something. There are enormous delays that  
9 are being caused that way.

10           There is one other thing I would like to point out  
11 on this just for housekeeping. This 180 days is going to cause  
12 some serious problems. I realize that you're making legal --  
13 something that is necessary to have in there is some type of  
14 a temporary approval for 180 days. It's not defined whether  
15 this is 180 working days, 180 calendar days, or what.

16           But there are some industries that may only run five  
17 or six months a year. And, say, in November or December, if  
18 you have a 180 day approval, if that's a calendar day approval,  
19 they won't even get started into the next season before labels  
20 are obsolete.

21           I don't think it's the intention of the Department  
22 to want to require industry to throw away labels, where they  
23 meet the criteria up here as far as not misrepresenting the  
24 label and not causing confusion to the customer and all. So  
25 I think this is going to have to be dealt with some way.



1 I think we're going to find, certainly the industry  
2 and certainly yourself in certain cases, where the 180 days is  
3 going to be restrictive. Because you're facing times too, that  
4 you feel necessary, as a regulatory agency, to change a  
5 regulation. Well, you change a regulation that causes a change,  
6 that will obsolete, say, turkey bags or chicken bags or beef  
7 bags or anything that you're packing a product in, someone  
8 could have many, many more times 180 days. You order a year's  
9 supply at one time, in certain cases, because everybody is  
10 coming to you and saying, look, we can give you a much reduced  
11 price of supplies if you order a year's supplies -- why order  
12 one month.

13 And so everybody has a lot on hand. And I think  
14 this is going to come back to haunt all of us, this 180 days,  
15 unless there is some way to get some extension on that.

16 But other than that, I want to say that I applaud  
17 what you're trying to do. I hope that it would go further than  
18 this; but I think, certainly, this is a start. And I think it  
19 will also draw the local inspector-in-charge in on things and  
20 make him feel a much better part of things too. I think it's  
21 going to have an uplifting effect on your people out at the  
22 plants, and I think it's going to take some of the routine work  
23 off of some of your people in Washington.

24 The label reviewers in Washington, I feel are  
25 probably under the most stress and have one of the most demanding



1 jobs. You keep them working harder than anyone you would expect  
2 to find in any industry or government agency. This will give  
3 them time to look at the more complex labels and spend more  
4 time with them, and not spend so much time on the routine labels  
5 that would be approved anyhow, such as the single ingredient  
6 labels. Thank you.

7 MR. HIBBERT: Just a note in response to your  
8 concern about the cutoff on the temporary approvals -- I think  
9 I mentioned yesterday that that issue has also been raised by  
10 some of the comments we've received. And it is something we'll  
11 have to address in the final rule.

12 DR. ROSS: Ernest Ross. I've had generally  
13 favorable reports from various processors with whom I've talked  
14 to about this proposal. They have told me that it takes them  
15 weeks or months -- and this isn't just one, but all of them  
16 that I talked to -- to get a label approval.

17 Now, I'm sure that a lot of this delay is in the  
18 mail service. I was just wondering if it wouldn't be possible,  
19 when a label is approved, to have the approval called perhaps  
20 to the inspector in charge, to notify them of the approval and  
21 the fact that it is in the mail. And then they can proceed,  
22 knowing that the approval is on the way rather than to have to  
23 wait two or three weeks for it to arrive.

24 MR. HIBBERT: We will do that kind of thing under  
25 special circumstances, the kind of situation we discussed



1 earlier, where someone has a problem. Of course, the problem  
2 with doing that across the board is essentially one of resources  
3 and time and having a couple of thousand of these a day and  
4 having to make all the phone calls.

5 DR. ROSS: Well, perhaps you'd consider doing  
6 it for Hawaii, sitting out there in the middle of the ocean.  
7 Sometimes the mail seems to come by slow boat.

8 DR. HOUSTON: Ms. Mucklow.

9 MS. MUCKLOW: John McDade stole my lines. He must  
10 have sneaked my notes. I would like to make a point with  
11 respect to the proposal on the label approval, that it really  
12 satisfies all the parties who are interested in labels. There  
13 is no diminution of consumer protection in what you are  
14 proposing. And I think that's an important point that we should  
15 note, from our interest in this Committee.

16 It certainly helps to make government more  
17 efficient, to streamline Bob Hibbert's operation, and to cut  
18 down unnecessary bulk movement of labels through his system.  
19 It will save industry money, it will save them the money that  
20 many of them now feel they have to spend in order to use an  
21 expediter in order to meet that crunch to get maybe a final  
22 approved for a sketch that was already approved, or various  
23 other reasons that people go to expediters. They serve a  
24 useful purpose, but it's questionable whether that useful pur-  
25 pose needs to be served on every minor label process that has





1 to currently be handled.

2           So it's very nice to see this happen. True, these  
3 kinds of savings will go on to the competitive market and will  
4 be passed along through and reflected in ultimate product.

5           I too would have to ask for a further look at the  
6 180 day issue. I know of small firms who may have a series of  
7 labels for basically one product, that they keep simply in  
8 order to provide for flexibility in making that product. They  
9 may have frankfurters that have pork as the major ingredient  
10 and beef as the second ingredient; and they make the same  
11 product sometimes with beef as the major ingredient and pork  
12 as the second ingredient. So they have two sets of labels, and  
13 they want to keep them available.

14           It seems to me that the 180 day issue may cause  
15 some problems for people on a temporary approval, where they  
16 need a little flexibility. It may be that it should be provided  
17 so that it could be a renewable time period upon a good showing.  
18 That may help to resolve it.

19           But generally, I would like to say, as other  
20 members of the Committee have, that the proposal is one of the  
21 most enlightened, progressive proposals that we've seen come  
22 out of the Department. And I'm very supportive of it.

23           DR. HOUSTON: Dr. Wilson.

24           DR. WILSON: Yes. Well, I'd like to agree with  
25 the two or three comments that were generally in favor of the



1 proposal. However, I think we would choose to view this as  
2 perhaps a second step in the evolution in the whole labeling  
3 process; the first having been the Pilot Plant Study, which  
4 proved to be, I think, effective both from the standpoint of  
5 USDA as well as the companies involved.

6 Mahlon expressed the notion a little earlier that  
7 he would rather see the proposal go further. I think we could  
8 agree with that. But we think this is a real good second step.  
9 I think there is going to be some required adjustment, as far as  
10 accepting it, on the part of the industry as well as the USDA.

11 I think, as we go down the road together on the  
12 thing, it will continue to serve the industry better.

13 There is one comment I'd like to make relative to  
14 something brought up yesterday, and that's on uniformity, the  
15 concern for uniformity in labeling. It's not the first time  
16 that Dr. Houston has heard something about uniformity in the  
17 Inspection Service. It is a concern throughout the industry,  
18 and an appropriate one.

19 However, I think in the case of labeling, any  
20 discrepancy in labeling -- I'm talking about where one inspector  
21 might make a particular choice that a second inspector would not  
22 be entirely in agreement with. Those kinds of differences  
23 become very evident in the way of a label.

24 There is one label reviewer we haven't talked  
25 about. And that's the competition out in the field. If a



1 label is out of line -- you can debate here how much consumers  
2 read labels. But I can also tell you that competitors read  
3 labels. And so there is a built-in safety factor in that  
4 respect.

5 This is in contrast to some of the other uniformity  
6 within the inspection field which is not that evident. I mean,  
7 a person can say, well, you know, this inspector isn't making  
8 you do this, or that sort of thing. And those things are not  
9 out in the open like a label. So pure review, if you would  
10 like to call it that, works very effectively in the labeling  
11 area.

12 A couple of questions -- perhaps they can be  
13 answered today. Do you have any specific notions on how  
14 corporate label approvals would be handled? For some of the  
15 others who may not be familiar with this--the common practice  
16 in the larger companies, multi-plant companies, the corporate  
17 office would submit labels and would submit them for a number  
18 of plants.

19 And, of course, in many cases of a corporate  
20 office there is no plant there for the local inspector, the IIC  
21 to approve. It's not necessary that that be thought through at  
22 this point, but perhaps you have some thoughts on that.

23 If I can throw in a second question at the same  
24 time -- There is a label policy book which is a common reference  
25 in labeling procedure. Is this now available to the IICs, has



1 that had common distribution to the IICs today? And secondly,  
2 are there any further thoughts toward codifying some of those  
3 labeling policies?

4 MR. HIBBERT: In response to your concern about  
5 the corporate situation -- I think there's a good point there,  
6 in that the design of this proposal and what this sets up is an  
7 exchange between an establishment and the agency, through the  
8 inspector or what have you; and you have some of the corporations  
9 working out of centralized offices, which is a difference that  
10 has to be addressed.

11 There is some discussion in here to the effect  
12 that this could arise when, let's say, the same product is being  
13 prepared in several different geographical locations. I  
14 think what we've tried to work out is a situation where, if  
15 you have some form of Washington approval, that could then  
16 translate into localized approvals in a number of localities.

17 However, it's possible there may be situations  
18 where the corporation might want to make the choice of keeping  
19 it centralized and keeping it in Washington. Of course, that  
20 would be their option.

21 But I think we've gotten some comments that I  
22 think will flag this point; and I think we'll have to address  
23 it a little more carefully in the final rule.

24 In terms of the policy book and those kinds of  
25 materials, there has been an evolution of attitudes toward





1 distribution of those documents, where at one time the Department  
2 was reluctant to give it up and then we got into an FOI mode.  
3 Now, I think we're more affirmatively distributing it.

4 I think it will be important to get that down to  
5 the inspector level when they're involved in these decisions.  
6 And we're doing things like putting more copies of them up.

7 In terms of codifying things, I think those things  
8 are still under evaluation within the agency.

9 MR. CARBAUGH: Dr. Houston, I'm curious about a  
10 question I didn't raise yesterday but I'd like to raise this  
11 morning, concerning the impact or relationship of this rule to  
12 federal/state meat inspection programs. How do you see that  
13 working, say, in Virginia or Iowa?

14 DR. HOUSTON: I think that's up to the individual  
15 state director, as to whether or not they want to pursue the  
16 same program. If they choose to do so, it would certainly be  
17 within the terms "equal to;" and I wouldn't see any problem.

18 But we're not going out to the states and saying  
19 you must do this. Because if they wish to moderate from that,  
20 they can certainly do so. But I would see no problems arising  
21 with the states who wish to follow the same program. In fact,  
22 I would encourage the states to do so.

23 MR. CARBAUGH: I just want to say that I applaud  
24 you. I think it's a good move in the right direction.

25 DR. HOUSTON: Thank you. Dr. Brickenkamp.



1 DR. BRICKENKAMP: Thank you. I want to, first of  
2 all, let you know that I heartily endorse this move. But I do  
3 want to give my personal observations on the area of prior  
4 labeling approval versus none at all.

5 Our office gets involved in incidences of mis-  
6 labeling observed by state and local regulatory agencies. We  
7 are made aware, or asked to help in approximately 100 cases a  
8 month of mislabeling under Food and Drug and Federal Trade  
9 Commission areas.

10 We have had only one incidence in the last year  
11 under USDA jurisdiction. And we believe that it's because of  
12 the prior label approval system that that results. And so I  
13 think what you're doing is very wise.

14 But my questions yesterday, for example, in train-  
15 ing and uniformity, were based on that rather real world example  
16 of what happens when the question of labeling and misrepresent-  
17 ation is left to the minds of the companies, who may or may  
18 not be fully aware of all the responsibilities and rules and  
19 regulations under which they have to operate.

20 And very often, as I might point out -- Dr.  
21 Wilson's comment is very true -- it comes to our attention from  
22 competition.

23 DR. HOUSTON: Ms. Cramer.

24 MS. CRAMER: We have discussed the benefits to the  
25 consumer, I think, as far as cost effectiveness in the labeling



1 process. But I think also we should bring to the attention and  
2 commend you for this effort, because I think the consumer will  
3 also benefit with the speed in which industry can respond to  
4 consumer need for information, etc. or for marketing programs  
5 in this speeded up process.

6 MS. VIZZIER: Dr. Houston, I wanted to comment on  
7 George's observation. We talked on the centralized area of  
8 getting approval -- we discussed that inside our company, on  
9 this issue, because we had that situation. And we decided that  
10 for routine things we would continue to go to Washington.

11 But when we needed to make a fast change, this  
12 would still be -- going to a plant that's far away from the  
13 corporate headquarters and central purchasing would still be a  
14 great deal faster than having to go back through Washington.

15 We are eagerly looking forward to this going into  
16 effect.

17 DR. HOUSTON: Thank you. Dr. Craig.

18 DR. WILSON: May I ask what the schedule might be?

19 DR. HOUSTON: Dr. Craig had the microphone.

20 DR. WILSON: I'm sorry.

21 DR. CRAIG: I certainly want to commend you in the  
22 direction that you're going with this proposal. I also would  
23 like to encourage you to go even farther and faster with a lot  
24 of things involved in my area of concern. We are dealing more  
25 with simplified product marketing approach, and complex labeling



1 is not really much of a factor.

2           And it's almost inconceivable to me as to what the  
3 difficulty would be at the local level, of an inspector in  
4 charge being able to make a mistake, so to speak; when we talk  
5 about, for the first time, marketing drums or mini drums or wings  
6 or a combination of products or what have you, as long as it's  
7 still raw poultry.

8           Now, if I am interpreting the proposal correctly,  
9 we would still -- if we had never marketed whole legs, as an  
10 example, we would still have to get prior approval of that  
11 label before we could market whole legs. Am I correct or am I  
12 incorrect?

13           MR. HIBBERT: That's a single ingredient product  
14 with no claims -- something like a chicken part. It would be  
15 a category of product that the inspector could --

16           DR. CRAIG: Even first time?

17           MR. HIBBERT: First time.

18           DR. CRAIG: Then I am not interpreting this pro-  
19 perly from the way it's written. In fact, I went back to MBC  
20 this morning to try and get an interpretation on that; and they  
21 also interpreted this the same way as I had.

22           DR. HOUSTON: Original labels would be approved.

23           DR. CRAIG: Original labels would be approved at  
24 the local level.

25           MR. HIBBERT: For single ingredient product with





1 no claims.

2 DR. CRAIG: And single ingredient product would  
3 be if it's raw poultry.

4 MR. HIBBERT: That's correct.

5 DR. CRAIG: Any combination of parts or what have  
6 you.

7 MR. HIBBERT: Yes.

8 DR. CRAIG: Thank you.

9 MR. MCDADE: John McDade. I think the further  
10 approval came up on the word "new." Now, you can take the  
11 word new off at the plant. But to put the new word on, you  
12 have to have Washington approval. That's written in there some-  
13 where. I got confused on that myself.

14 You have to come to Washington for the first time  
15 for approval to use the word new. But if you want it taken off,  
16 the inspector at the plant will allow you to take it off. Did  
17 I get that right?

18 MR. HIBBERT: The first time -- Let's suppose you  
19 still had that poultry part -- the "new" would make it into a  
20 claim. And if it was a brand new label, you'd still have to  
21 come into Washington. But then to take it off, that would be a  
22 modification that the inspector could approve.

23 DR. HOUSTON: But that's only because the company  
24 wishes to use the word "new," which is a claim. If they don't  
25 want to make a claim, then the original label can be approved



1 at the plant level.

2 MS. VIZZIER: Yvonne Vizzier. I have a question.  
3 Are you saying, in answer to Dr. Craig, that the raw poultry  
4 follows under the generic section of this?

5 MR. HIBBERT: Not generic. It's inspector approved.  
6 There is a sub-distinction there. There are some categories  
7 that are generically approved and did not require your  
8 inspector to sign off. This would not be in that category.  
9 This would be in the category of needing an affirmative  
10 authorization from the IIC.

11 DR. HOUSTON: Dr. Wilson, did you have a question?

12 DR. WILSON: I was just curious to know if you had  
13 any thoughts on the time frame for this, since it's so readily  
14 accepted by everyone.

15 MR. HIBBERT: The comments close on August 19th.  
16 Obviously, as you're well aware, it takes some time to get the  
17 regulation together. And that's somewhat a function of the  
18 comments.

19 In addition, in this situation, it's probably at  
20 least as much, if not more, our concern that the other kind of  
21 homework on training and things like that be completed before  
22 we go with it. So that's going to take some time; hopefully,  
23 not an inordinate amount.

24 DR. HOUSTON: Also, we have to decide if we're  
25 going to implement this nationally or if we're going to do it



1 on a region-by-region basis, and perhaps implement it over some  
2 period of time. There are advantages and disadvantages to  
3 either way. But we are considering using one of those two  
4 approaches.

5 MS. VIZZIER: Yvonne Vizzier again. Where is  
6 generic on this thing?

7 MR. HIBBERT: Okay. It may be useful to go a step  
8 back and look at this as winding up in three categories. In  
9 some situations, you would still have to come to Washington  
10 for approval. In some, you have the option of either coming  
11 to Washington or getting approval from your inspector.

12 And in the third category, you would have the  
13 option of simply using the label, making the change, and  
14 providing the inspector with a copy, but not actually getting  
15 an affirmative approval.

16 Those are minor changes. Some of the things we  
17 listed yesterday were: enlargements and reductions, putting  
18 Christmas wreaths or Easter bunnies on your label, and things  
19 like that, that just shouldn't give anybody any kind of problem.  
20 Those are the categories of generic approval.

21 MS. VIZZIER: Okay.

22 DR. BURNETTE: Mahlon Burnette. I'm concerned  
23 with the entry you just gave on the time table, because I don't  
24 think there is any target effective date in here. If there is,  
25 I can't find it.



1 DR. HOUSTON: You're right. There is none, because  
2 we're still in rule making; and if we set up a target date,  
3 we'd be accused of prejudging the final rule. So we would  
4 never do that. We have to determine whether or not we even  
5 implement this program after we review all the comments.

6 DR. BURNETTE: My concern over the entry on the  
7 time table is that, while I understand the training problem,  
8 developing the materials and getting them out, and figuring  
9 out whether you're going to bring them all in and train them or  
10 do it all in the mails or whatever -- But on the other hand,  
11 if, realistically, that is going to take, say, the majority of  
12 the rest of this calendar year, or even into next year, I'm  
13 wondering if there is something which the industries involved  
14 can do to help develop that system from the ground up.

15 Because, quite frankly, for large corporations,  
16 multi-plant corporations, the plant managers have a whole new  
17 ball game too, sitting down talking about labels with his IIC.  
18 And so the IIC and the industry people are going to have to be  
19 trained simultaneously. And if you wait a year to train the  
20 IICs, and then it takes industry another year before the system  
21 is very much used because they're not comfortable with it,  
22 then we've just lost that 28 million dollar savings that you  
23 projected. And it seems to me that's well worth trying to  
24 figure out some way for everybody to learn a new system quickly.  
25 Put it together on a trial basis and start on the 20th of





1 August and just assume that it's not going to work right for a  
2 year, but everybody can learn as they go along.

3 I am concerned that, if you wait until you get it  
4 right, you're going to lose the advantage of an otherwise  
5 beautiful document.

6 DR. HOUSTON: Thank you. Ms. Mucklow.

7 MS. MUCKLOW: With respect to Mahlon's comments --  
8 some of the parts of this proposal, if it is adopted in the  
9 final rule, will be easier to implement than others and will  
10 require less skill to implement than others.

11 For instance, sending a final in when a sketch is  
12 already approved is probably one of the simplest pieces to  
13 implement and will result in a rather substantial savings. So  
14 it might be that we should ask the Department to consider, when  
15 they do come up with a final rule, which I certainly hope they  
16 will, that they consider implementing those portions which can  
17 be done without that extra training on a more expedited manner  
18 than some of the things that are going to require providing  
19 policy information and so on, right down to the inspector in  
20 charge.

21 DR. HOUSTON: Mr. McDade, did you have a point?

22 MR. MCDADE: Yes. I have one other point. It  
23 seems that several of us here want to make sure that this  
24 381. 132 (c)(3), which is labeling for single ingredient pro-  
25 ducts such as chicken or turkey thighs which do not contain



1 quality claims -- the inspector in charge has the authority to  
2 approve this. We want to be sure that this means more than  
3 just putting -- if you have an approved label, say, for turkey  
4 thighs, that you could use that same design and put turkey  
5 drumsticks in that package, or have another package for turkey  
6 drumsticks and one for turkey wings.

7 I understand that comes under there, as long as  
8 it's not basted as a single ingredient item.

9 Now, can other changes, such as the class -- We  
10 refer to class, in poultry, as young, mature, hen, fryer,  
11 roaster. You can make those changes as single ingredient items  
12 also, we understand.

13 In other words, that's a single ingredient item.  
14 Whether it's a young hen turkey thigh or whether it's a young  
15 tom turkey thigh -- class, I think, is brought into that. It's  
16 our understanding in the industry, the people that we've talked  
17 to, interpretation -- I wanted to be sure if we are interpreting  
18 that right.

19 That's a lot of latitude in that paragraph, if  
20 it reads the way that we feel that it does.

21 MR. HIBBERT: Your question is directed at  
22 whether --

23 MR. MCDADE: Well, for instance, some other words  
24 added to that -- class, for instance. If you approve it for  
25 a -- I'm using turkeys because it's easier to explain it here.



1 Say we want to pack turkey thighs. All right. Then that's  
2 approved, the inspector can approve that. Then he could approve  
3 another package, turkey drumsticks, single issue.

4 Now, if you want to call those "young turkey" or  
5 "yearling turkey" or "mature turkey," we could get another  
6 approval on each one of those without going to Washington also.

7 MR. HIBBERT: I guess that's an interpretive  
8 question, as to whether that's a claim or the name of the  
9 product -- which I'm not sure we have tied down in this document.  
10 It's probably worth flagging in the determinative process.

11 MR. MCDADE: To bring that out at this point --  
12 You would approve any of those once they got to Washington.  
13 You have in the past, always approved automatically.

14 The whole question turns on whether that is the  
15 product that's put in the package. And that's why I said awhile  
16 ago, bringing the local inspector in on this thing is going to  
17 be much better. I think you're going to get better control of  
18 your labeling at the plant, because he's going to be more  
19 interested in what goes in that bag; is it a young turkey, is  
20 it a hen turkey, or this type of thing.

21 And then on these many complicated cuts of pro-  
22 ducts such as breast and hindquarters and all, the inspector  
23 in charge then will see that the right product is put in.  
24 Because I would say that most labeling that I find, in looking  
25 in the stores, is not the fact that the Department has allowed



1 mislabeling or some error through a Washington approval or any  
2 other approval; it's the fact that the product packed in the  
3 package does not always coincide with the labeling on the  
4 package. And then this brings the inspector into it. So  
5 this is why I'm saying this is a good thing.

6 But I'd like to be sure, if we could, that this is  
7 broad enough to take in other things such as class, as well as  
8 kind and the product.

9 MR. HIBBERT: There are situations -- and that's a  
10 good example -- where, really, the value of that centralized  
11 Washington review is fairly limited. Because there are questions  
12 of whether that particular kind of bird, or what have you, gets  
13 into the box. And in the end, that's the inspector's job to  
14 worry about anyway.

15 Washington, looking at a piece of paper and  
16 signing off on that, is not that meaningful, in some ways. But  
17 in response to your concern, I think probably we need to tie  
18 that down a little bit better. I think there is some inter-  
19 pretive room there.

20 MR. MCDADE: You've covered adding and deleting  
21 grade marks and fresh and frozen and keep refrigerated and  
22 things like that.

23 MR. HIBBERT: That's right.

24 MR. MCDADE: And I assume that class and other  
25 things that would change only by the product being put in the





1 bag might be included in that. But I'd like to have you look  
2 into it, if you would.

3 MR. HIBBERT: We will.

4 DR. HOUSTON: Any other comments before we move on?

5 DR. BURNETTE: I may ask the same question to make  
6 sure, because I never grade poultry, Don; so I'll have to ask  
7 it about beef.

8 If I'm making boxed, frozen steaks, and I want to  
9 label that box "choice steaks;" is that a quality claim, or  
10 is that simply the name of the product? And, therefore, the  
11 inspector can approve my box lid.

12 DR. HOUSTON: Well, first of all, we wouldn't let  
13 you put the term "choice" on there, unless it did come from  
14 cattle that were U.S. Choice grade.

15 DR. BURNETTE: Yes.

16 DR. HOUSTON: Which means there would have to be  
17 a control system in place, to assure that the cattle, or the  
18 cuts coming into a particular boning operation, were in fact  
19 U.S.D.A. Choice and there was security over that product when  
20 it got packaged, it was labeled as such.

21 Is your question: Can they approve a label which  
22 has U.S. --

23 DR. BURNETTE: Yes. Let's say I'm doing that.  
24 Let's say I'm doing my own slaughter and it's all graded and  
25 it's all choice and it's all properly controlled and the records



1 are all proper. And I've been selling this in the retail trade,  
2 and now I want to go into the mail order business. And so I go  
3 to my IIC and say, look, I got this box that says "Choice steak."  
4 Can you approve it? Can he say yes or no?

5 MR. HIBBERT: Yes. That's a specific category.  
6 The addition, deletion, or substitution of a grade shield is  
7 specified as an inspector modification.

8 DR. BURNETTE: Inspection modification. I'm  
9 talking about brand new. This is the first time I ever sold  
10 frozen steaks, you know.

11 MR. HIBBERT: Okay. If your label is eligible  
12 in the first instance -- if you've got a frozen steak, it's a  
13 single ingredient product. You've got it; yes.

14 DR. BURNETTE: Thank you.

15 DR. HOUSTON: All right. I think we have some  
16 coffee coming. It's not here yet, is it, Rhonda?

17 RHONDA: No. It will be about 10:30 or a quarter  
18 to 11:00.

19 DR. HOUSTON: All right. Why don't we do this  
20 then -- if there are no more questions, let's at least open up  
21 the next subject for discussion. Perhaps we'll have to stop  
22 part way through if they bring the coffee. If not, we can  
23 finish and then take a break.

24 The next item on the agenda is Sodium Labeling.  
25 Who would like to lead off with comments in that area?



## 1 DISCUSSION ON SODIUM LABELING

2 DR. HOUSTON: Yes, Dr. Foster.

3 DR. FOSTER: In spite of the eminence of Dr. Hayes  
4 and his colleagues, I have considerable doubt about the ability  
5 of this administration to change the human animal's craving for  
6 salt.7 Having said that, I immediately agree that any  
8 consumer who wants to restrict his sodium intake should be able  
9 to do so. And the only way to do this is to know what's in the  
10 product it's made from.11 But having said that too, my main concern about  
12 all of the discussion on sodium restriction and sodium labeling  
13 that has gone on in recent months is the fear of a low-sodium  
14 "horse race" in products produced by industry. We've seen this  
15 happen recently with caffeine in soft drinks. And it wouldn't  
16 be very hard to see the same thing happen in sodium marketing,  
17 low-sodium marketing.18 And it's my point of view, that when that happens  
19 is when we will then have our real botulinum hazards of cured  
20 meats, if they should be involved, as opposed to the much dis-  
21 cussed but, I think, fairly minor hazards that have involved  
22 the discussions around nitrite.23 If you'll bear with me a minute, I'd just like to  
24 illustrate that statement with a very simple experiment that we  
25 did recently in my laboratories, where we made some weiners in



1 test tubes. We used the common formula, 120 parts per million  
2 nitrite, the usual sodium ascorbate, and a mixture of pork and  
3 beef and all the stuff. I don't know much about making weiners.

4 But anyway, we varied the salt just to see what  
5 effect it would have on the growth of botulinum. And we  
6 inoculated all of these with botulinum spores and incubated  
7 them under abuse conditions. Now, we all know, of course, that  
8 this is a rather severe test. But everything we do along this  
9 line does involve a severe test.

10 And to make it short, we varied the salt over a  
11 range from two to three and a half percent in these model  
12 weiners, if you will. And then we incubated and we tested for  
13 toxin in those weiners. And, interestingly enough, every  
14 quarter of a percent salt meant about two more days of no  
15 toxin. Or, stated another way, the time for toxin to develop  
16 was increased by about two days every quarter of a percent of  
17 salt.

18 Just to illustrate what I mean -- when we had three  
19 and a half percent salt, it took about -- in this particular  
20 combination, which had 120 parts per million nitrite -- it took  
21 about 17 days for toxin to develop under these conditions.  
22 With three and a quarter percent salt, it took about 15 days.  
23 With three percent salt, it took about 11 days. And with two  
24 percent salt, it took nine days. Two and a quarter, it took  
25 seven days. And with two percent, it took five days.





1           In other words, it's a pretty straight line  
2 relationship, in this particular type of product. And all  
3 I'm trying to say is that I'm hopeful that in the negotiations  
4 and in the proposals to change the sodium content of our foods,  
5 that FSIS, in particular, will see to it that industry is not  
6 allowed to drop that salt level to the point where we might  
7 have a real hazard, as opposed to a possible hazard.

8           And I think, knowing industry marketing practices  
9 and natural human relations to things like this, it would be  
10 possible to introduce a substantial hazard here. And I know  
11 that the agency doesn't want it, and I know that no consumer  
12 wants it and no manufacturer wants it.

13           It's just that somehow someone is going to have  
14 to establish a reasonable floor, below which there shall be no  
15 further reduction of salt content. Unless something else  
16 compensatory is done.

17           DR. HOUSTON: Thank you. Dr. Alfin-Slater.

18           DR. ALFIN-SLATER: I would like to speak to the  
19 sodium question. You know, it just seems to me that we're  
20 spending -- we give so much emphasis to sodium that people are  
21 going to think they have to choose their diets because of the  
22 sodium content rather than looking at any other nutrient  
23 content.

24           The last word on sodium and hypertension has not  
25 been said. Hypertension may be due to a lack of potassium,



1 calcium, magnesium; it may be due to an imbalance between  
2 sodium and potassium. And to try to establish what every  
3 individual needs in the way of sodium is impossible. We all  
4 have our own individual needs.

5 In our area, jogging is very popular. And all of  
6 these middle-aged men are running down -- we have a boulevard,  
7 San Vicente Boulevard -- with traffic going on both sides, and  
8 these men are jogging on this green strip, breathing in all  
9 the fumes from the cars and think they're doing themselves a  
10 great service.

11 But these men require more sodium, because they are  
12 losing an awful lot in perspiration. I don't know who estab-  
13 lished the fact that from 0 to 35 milligrams is low sodium. I  
14 think that we can't make these distinctions for everybody.

15 I think that sodium labeling is important because,  
16 unfortunately, doctors who know a little about nutrition are  
17 telling their patients to go on a low sodium diet. So people  
18 have to know what the sodium content of foods is.

19 But to say milligrams per serving -- I think it  
20 doesn't mean anything, because we all have our own ideas about  
21 what a serving of food is. If the particular item lists what  
22 is a serving and, according to somebody who has established that  
23 for them this is a serving, then we'll have a little more  
24 information.

25 But I think that we have to be a lot more careful



1 with getting into the minds of the consumer the idea that sodium  
2 is terrible. I mean, you know, the USDA, in HHS statement of,  
3 what I call the "Seven Commandments for Good Health" -- avoid  
4 sodium, avoid sugar, avoid saturated fats -- You know, you  
5 assume we'll not be eating anything. Maybe this will be a good  
6 idea, because we'll all be a lot thinner than we are. And  
7 maybe this is the whole answer to all our problems; the fact  
8 that we are too fat.

9 But I think that we have to use a little bit of  
10 moderation in what we tell people and how we say it.

11 DR. HOUSTON: Ms. Whelan.

12 MS. WHELAN: Yes. Just following up on that -- I  
13 assume that this agenda item on sodium labeling also allows  
14 us to comment on the educational efforts, the booklet and the  
15 radio series -- is this part of it?

16 DR. HOUSTON: Sure. You can, if you wish.

17 MS. WHELAN: Okay. It's my understanding in  
18 hearing some of the comments, particularly those of Mr. McMillan,  
19 that the current USDA stance is that science should be the basis  
20 of any kind of recommendations. And this alarms me a little  
21 bit, when I read this booklet on sodium.

22 I think if it comes down to the philosophical  
23 issue -- And, personally, I think, as a public health profes-  
24 sional, that we should not recommend that people change their  
25 behavior unless we have some pretty solid evidence that it will



1 help them. And I think some of these documents, and also some  
2 of the radio spots I've heard, directed at black Americans,  
3 kind of have the philosophy that it wouldn't hurt to cut back  
4 on salt. We have no evidence that it's going to help the  
5 general population.

6 And I'd just like to suggest that, as we approach  
7 this subject, we try to aim our educational efforts to the sub-  
8 group of Americans that really need the advice and needs the  
9 information on low sodium; namely, the hypertensive population.  
10 And even all of those may not need this advice.

11 I think there is a proportion of these patients  
12 who are under medication such that they do not need to follow  
13 this so astringently. As it stands now, it seems to carry the  
14 message that the U.S. Government has decided that sodium is  
15 hazardous to the health of Americans and that it's becoming a  
16 policy. And that policy is not square with the concensus of  
17 the scientists.

18 DR. HOUSTON: Thank you. Dr. Wilson.

19 DR. WILSON: Yes. I think, for the record, perhaps  
20 we ought to note that Dr. Foster's frankfurters, which have  
21 nine days until toxin production, are not typical of a  
22 commercial production.

23 DR. FOSTER: Granted. They weren't meant to be.

24 DR. WILSON: But I'm sure everybody understands  
25 that.





1           But more importantly, and to continue Mike's point --  
2 I think his point is extremely well taken. And I think the  
3 FDA and USDA needs to take heed to that.

4           Let me add, first of all, that -- and I think it  
5 was mentioned yesterday -- that within the USDA's research  
6 program in this area, part of that effort is directed toward  
7 finding the safety net under where we're at. The only thing  
8 that I would suggest about that program is that there even be  
9 more emphasis in that area.

10           I think that's a fitting place for federal  
11 research; as contrasted to, say, finding what is a practical  
12 limit, a technological limit for making frankfurters, for  
13 example. The industry can do that. In fact, they may find  
14 that they can do it too well -- what Dr. Foster is suggesting.

15           To go a little further on that same subject --  
16 this is not a new position for the AMI. Dr. Foster has men-  
17 tioned that our marketing types get a hold of something that  
18 can be merchandised, and they do exactly that. And in most  
19 companies -- in many companies, I guess I should say -- the  
20 marketing department has much more clout than the technical  
21 group, frequently. So there needs to be some caution put in  
22 that respect.

23           One way of handling this, however, is to -- and  
24 it's difficult to fit it into a voluntary program -- is to  
25 discourage or, if possible, eliminate the use of claims, giving



1 the opportunity to create a "sodium horse race," if you will.

2 If claims were to be eliminated, as viewed by many  
3 to be a drastic move, and declarations of serving be confined  
4 to a simple quantitative labeling, then those people who need  
5 it would have it available to them and it would discourage some  
6 of our marketing types from being over zealous in this respect.

7 DR. HOUSTON: Thank you. Dr. Ross.

8 DR. ROSS: I would like to make a comment about  
9 the publication "Sodium: Think About It."

10 In the first place, there are two blocks here which  
11 might seem contradictory or confusing to people. In one case,  
12 quoting the National Research Council's safe and adequate intake  
13 level of 1100 to 3300 milligrams; and then on the other side,  
14 referring to the requirement at 250 milligrams.

15 And also there is nothing in here about sodium in  
16 the water and the possible effect of water softeners on sodium  
17 intake, which can be very important. And, while I applaude the  
18 use of this educational material such as this, I wonder if it  
19 wouldn't be more effective, certainly, to have, say, a single  
20 page flyer which would be labeled "for hypertensive people" or  
21 to people who have been advised to control their intake, and  
22 have a table listing common food groups, with the range of  
23 sodium. So that someone could stick it up on their refrigerator  
24 or in the kitchen and be able to refer to it without having to  
25 read through a lot of stuff that they're not going to read



1 anyway.

2 DR. HOUSTON: Thank you. Dr. Alfin-Slater.

3 DR. ALFIN-SLATER: Where did this figure of 250  
4 milligrams come from? I'm quoting -- "which is probably more  
5 than most adults need in an entire day."

6 DR. ROSS: It comes from the same NRC publication  
7 that the other figure comes from.

8 DR. ALFIN-SLATER: I was part of that, and I don't  
9 remember 250 milligrams.

10 In any case, there is also a statement somewhere --  
11 and I don't remember where -- that the need for salt, or the  
12 taste for salt is acquired. And I don't believe that's true;  
13 because, you know, animals look for salt licks all the time.  
14 And I don't think that they have acquired the taste for salti-  
15 ness. I think that it's something innate.

16 The other thing that bothers me about this sodium  
17 thing -- Are there epidemiological studies to show that the  
18 higher intake of salt in this country are associated with hyper-  
19 tension? The people who are ingesting 6900 milligrams of salt  
20 a day; are these the ones who have high blood pressure?

21 DR. HOUSTON: I don't know. Dr. Burnette, can you  
22 help us on that?

23 DR. BURNETTE: I wasn't listening. I'm sorry.

24 DR. HOUSTON: The question was: Is there any  
25 epidemiological evidence to link hypertensives with high salt



1 intake, the 6900 milligram a day figure that's given in the  
2 sodium pamphlet?

3 DR. BURNETTE: You mean, are the same people that  
4 are hypertensive the same ones that are consuming the largest  
5 amounts of sodium?

6 DR. HOUSTON: Right.

7 DR. ALFIN-SLATER: Or did they consume it?

8 DR. BURNETTE: I guess it depends on how you read  
9 the Framingham Study, as to whether they have any numbers on  
10 that or not.

11 But, overall, no. Because the data is collected  
12 independently.

13 DR. HOUSTON: Dr. Whelan.

14 DR. WHELAN: Well, the main epidemiology on sodium  
15 and hypertension is from international comparisons. And there  
16 is a very strong correlation -- the countries that consume high  
17 amounts of salt also have high hypertension. But, again, that  
18 is not necessarily causative.

19 I think in terms of the clinical studies done,  
20 particularly in this country, and the Framingham Study, the  
21 results are quite conflicting and suggest that there is many,  
22 many causations involved in hypertension. And that's why there  
23 is such ambivalence.

24 I think even the physicians who recommend that all  
25 of us cut back on our sodium -- and you say here that most





55

1 scientists do -- I'm not sure that's the case -- even they will  
2 admit to you that the evidence is not strong. And they look at  
3 you and they say, "but it wouldn't hurt." And that's the  
4 philosophy; one which many of us object to.

5 DR. BURNETTE: There are two different things  
6 involved in sodium hypertension. One is whether or not sodium  
7 is involved in the etiology of the disease. The second is  
8 whether or not moderating sodium is effective in controlling  
9 the disease.

10 They aren't well separated here, and they are not  
11 separated at all in the public's mind. It's all done with  
12 magic. And I agree with everything that Beth and Ros have said  
13 about the equivocation of the interpretation of the data. I  
14 think we all know that.

15 I am more concerned about what is not here, or here  
16 in the document, and the policy, than I am in the questions for  
17 which we don't have answers.

18 As Ernest pointed out, that statement that 250  
19 milligrams of sodium is more than most adults need in a whole  
20 day is extremely dangerous. Because what it should have said:  
21 250 milligrams of sodium added on top of what is already in  
22 the food is more than most people need. But if we had people  
23 trying to cut their diet down to 250 milligrams of sodium a day,  
24 we'd have the same situation we had in the infant formula  
25 crisis. And I think that's a potentially very dangerous



1 situation.

2           There is a statement right after that which --  
3 there are some of my friends in the Food and Drug Admini-  
4 stration, and I have a little difficulty believing they cleared  
5 this. Because the statement says, if you decide you want to  
6 moderate your sodium intake; and that gets terribly close to  
7 self-diagnosis in a potentially dangerous situation. And I know  
8 some people that have devoted long careers trying to avoid ever  
9 having the federal government indicate that it was appropriate  
10 to self-diagnose in potentially dangerous situations, with  
11 vitamins or with sodium or anything else.

12           I don't know who cleared this at HHS, but I'm  
13 confident that I know some people who didn't.

14           And the third thing -- and it's another way of  
15 stating exactly what Beth said -- and that is, that I know  
16 Heart, Lung, and Blood cleared this, because I recognize the  
17 propensity for striking out all useful numbers whenever possible,  
18 to avoid getting involved in the debate. And I'm not being  
19 critical. It's a very difficult situation.

20           They hold themselves, at Heart, Lung, and Blood,  
21 to a very high scientific standard. If they don't have answers  
22 to questions, they don't like to give answers. And I don't  
23 blame them, as scientists. But the direct relationship in here  
24 of the fact that 75 to 90 percent of the public is probably  
25 refractive to sodium intake in terms of blood pressure, in that



1 we're only talking about 15 to 25 percent of the people who need  
2 be concerned. And that relationship isn't made here.

3 The obvious connecting link, and the one that has  
4 the public health significance, is no where in here does it say  
5 that the thing to do, the thing for everybody to do, that we all  
6 can agree on -- we may not be able to agree on how much sodium  
7 you can take in, but we should agree on the fact that you should  
8 have your blood pressure checked. Because it's an insidious  
9 disease that doesn't have any symptoms until you're already in  
10 big trouble.

11 And that isn't mentioned in here. It leads directly  
12 from some people's interpretation of the data, to a discussion  
13 about how you might prescribe for your own self a low sodium  
14 diet, and it avoids the public health significance of saying to  
15 people that, if you've got high blood pressure, for sure, it's  
16 one of the things you should try. If you don't know what you're  
17 blood pressure is, for sure, you should go and check it.

18 And so I have a serious concern about the way this  
19 is drafted, in terms of the information that it might convey to  
20 the lay public -- sins of omission and sins of commission about  
21 a very serious public health situation and leaps into a pro-  
22 bably less serious and certainly more equivocal area of how  
23 much sodium everyone should have and how much sodium is good  
24 for you and how you find it on the label. It leaps right over  
25 the much more serious problem of hypertension and the potential



58  
1 at least, for the involvement of sodium.

2 DR. HOUSTON: Dr. Whelan.

3 DR. WHELAN: Yes. Just a factual comment on this  
4 so-called "low sodium horse race." As you know, the airwaves  
5 are now proliferating with ads that -- their main selling  
6 point is that they have low sodium. And anti-acid ads. The  
7 other day I was trying to enjoy a piece of New Jersey corn, and  
8 I reached for the salt shaker and my four-year-old asked me if  
9 I was a "saltaholic." I mean, that's all you hear on the  
10 evening news each night.

11 The point I'm trying to make here is that these  
12 products are very expensive. The ones like the "No Salt" --  
13 it's a little tiny thing and it costs something like three or  
14 four dollars. The low sodium products also have a mark-up on  
15 their price. And I think we owe it to consumers to help to tell  
16 them whether or not they're actually getting something for their  
17 money, in terms of health benefits.

18 DR. HOUSTON: Ms. Cramer.

19 DR. ALFIN-SLATER: We also should realize that  
20 there is a danger in taking too much potassium. Because you can  
21 get very serious side effects from taking too much of the  
22 potassium substitute for salt too.

23 And I think, too, that we're overlooking a very  
24 important fact--that food is not only to supply us with  
25 nutrients, but it's something that's supposed to be enjoyed.





1 And if you ever tasted a low-sodium meal, you'll know what I  
2 mean.

3 DR. HOUSTON: Ms. Cramer.

4 MS. CRAMER: Yes. I had some comments to make too.  
5 First of all, rightly or wrongly -- and I do agree with Roslyn  
6 that doctors are telling many, many patients to cut back on  
7 sodium. And we do have a clamour for information from consumers.

8 And, of course, I know that's why this piece was  
9 produced, I know that's why the piece at FMI was produced, and  
10 I know that's why we as a chain produced a piece similiar to  
11 what Dr. Ross has asked for -- directed to those people on low  
12 sodium diets, giving the ranges and that sort of information, so  
13 they could make a sensible choice.

14 I have a question too about this sort of leaflet.  
15 We have consumer centers in about 350 of our stores, and this  
16 sort of a piece -- well, frankly, if we shipped that -- I don't  
17 know how heavy the packet would be, but it would be unsuitable  
18 for usage in our consumer centers, because it's printed on far  
19 too heavy a stock to be afforded for the service that we pro-  
20 vide to the consumer.

21 And it seems to me that it also includes a lot of  
22 lost space. And I think, again, as Dr. Ross pointed out, that  
23 the information probably could have been printed more simply on  
24 a single fold flyer.

25 I'm not sure what the expense of this particular



60

1 piece was, but that is just a comment that I have about con-  
2 sumer literature that's out there. If it's going to be dis-  
3 pensed in the popular places, such as our in-store consumer  
4 centers, some thought has to be given to how it can be shipped  
5 and how inexpensively it can be handled.

6 I understand too that the milligrams per serving,  
7 and I think the rationale on that, as I see it, is that the  
8 direction is to include sodium labeling voluntarily. I certainly  
9 would not urge mandatory inclusion of sodium in the nutrition  
10 label. But if it is included in the nutrition label, the  
11 standards that the FDA has set about are the per serving, with  
12 the servings stated.

13 And, of course, we all know the variances in sizes  
14 of serving. But on the nutrition label, the serving size is  
15 declared. And then the milligrams per serving would fit right  
16 in with the way the other nutrients are given. So I think there  
17 is some logic to that, as long as the serving size is given.  
18 And that is one way the consumer who is looking for that  
19 information can get it and compare it in the standard form.

20 So I think probably I would agree that that would  
21 be the way to go. I certainly don't think it needs to be listed  
22 twice, as is often now, in both milligrams per serving and then  
23 milligrams per 100 grams.

24 DR. HOUSTON: Let's take a 20-minute break and  
25 have coffee. And we'll come back and continue this discussion



61  
1 on sodium.

2 (Whereupon, a 20-minute recess was taken.)

3 DR. HOUSTON: Let's reopen our discussion on the  
4 sodium issue and sodium in general, if there are any further  
5 comments. Dr. Ross.

6 DR. ROSS: I just want to make a comment about  
7 hypertension. There's been some discussion about -- not only  
8 is there the debate about how much sodium is needed, but there  
9 is also considerable question about what constitutes hyper-  
10 tension, or what blood pressure is hypertensive.

11 There was a doctor on the television yesterday  
12 who was saying that we should not consider a diastolic pressure  
13 of 90 as hypertensive necessarily.

14 DR. HOUSTON: Any other points?

15 DR. ALFIN-SLATER: What about systolic? Did he  
16 mention anything about systolic?

17 DR. ROSS: No.

18 DR. HOUSTON: Mr. McDade.

19 MR. MCDADE: John McDade here. Before I came to  
20 this meeting, certainly one of the points I wanted to make from  
21 industry people that I had been in contact with, is we would  
22 certainly like to leave this voluntary, as a program. And from  
23 what I've heard here today, and from people that we respect the  
24 opinions of and the work that they've done on this thing, we  
25 would hope this thing would be left voluntary and, certainly,



1 not brought in any way to a mandatory labeling of sodium.  
2 Again, especially on the basis of things we've heard here today.

3 And that's just a request from industry and the  
4 people that we know of. If someone wants to do it and can make  
5 claims that would be satisfactory to you and would not be con-  
6 fusing, that's up to the particular company. But I would hope  
7 to leave this voluntary.

8 DR. HOUSTON: I think in this administration and,  
9 in particular, those officials at the Department of Agriculture,  
10 intend to make it a voluntary program and keep it a voluntary  
11 program. I see nothing on the horizon, at least at USDA, that  
12 would make it a mandatory effort.

13 MR. MCDADE: I'm happy to see that on the record  
14 then.

15 DR. HOUSTON: Ms. Cramer.

16 MS. CRAMER: Yes. Just one comment to Dr. Wilson.  
17 Frankly, those of us, I think, in the marketplace don't  
18 visualize the sodium horse race here in this particular case.

19 I know there is a parallel with the frankfurters  
20 that were tried with the low nitrite. This simply didn't sell.  
21 Give the customer one taste and they won't be back. I don't  
22 know whether you've tasted any of the low sodium cheeses; but,  
23 frankly, those people that are on restricted diets probably  
24 will stay away from cheese because it tastes like a piece of  
25 rubber if it doesn't have the flavor.





63

1           And I think those consumers who have been advised  
2 to be on low sodium diets, know basically that there are certain  
3 foods that are just taboo for their diets. And if they want  
4 to stay on their diet, they probably would be advised to stay  
5 away from it.

6           So I don't see a problem with a product like a  
7 frankfurter, because it would be a completely tasteless piece  
8 of whatever.

9           MR. LOUNSBERRY: Lounsberry, from Iowa. A distance  
10 apart of what the industry has said, I'd like to make a comment  
11 on the producer's side of it. I certainly think the producers  
12 share the same view and opinions, especially those that I've  
13 talked to -- and I've talked to a lot of them.

14           And the producers work very closely with all  
15 phases of marketing, not only the chain stores, but certainly  
16 with the various commodity groups that work on the marketing  
17 end of it. And we would hope that there be less attention paid  
18 to this particular subject until more scientific evidence or  
19 proof is brought forth.

20           I can remember so well when I was in the university  
21 studying biochemistry and other phases of chemistry and biology,  
22 that someone would do a doctor's thesis on a subject and it  
23 would stand for a number of years. And then someone else would  
24 use the same experimental evidence twenty years later and  
25 disprove what had stood for some time.



1           And I certainly think that always we need to tread  
2 lightly before we come out with startling statements. I notice  
3 they're talking about how much sodium in soy sauce, and at the  
4 same time they're pointing out the fact that there's less  
5 hypertension and less heart attacks in the Japanese and the  
6 Chinese people. And yet, from the standpoint of the amount of  
7 milligrams of sodium in soy sauce and the intake of soy sauce  
8 with those civilizations, I would think that it would discredit  
9 that particular aspect.

10           DR. HOUSTON: Dr. Alfin-Slater.

11           DR. ALFIN-SLATER: Actually, there is a higher  
12 incidence of stroke in the Japanese population. And that's  
13 been blamed on their elevated sodium content in the diet. They  
14 don't get heart attacks as much, but they do get much more  
15 stroke.

16           MR. LOUNSBERRY: Okay.

17           DR. ALFIN-SLATER: So, still, there are many  
18 differences between the two cultures. And I don't know that  
19 you can just point to one thing and say, well, this is it. They  
20 also smoke an awful lot.

21           MR. LOUNSBERRY: Very true.

22           DR. HOUSTON: Any other comments? Dr. Ross.

23           DR. ROSS: If a processor went onto this voluntary  
24 program and had some labels with the sodium content and then  
25 had to change his formula, which would change the sodium



65  
1 content, could he use his existing supply, or would he have to  
2 change at that time?

3 DR. HOUSTON: He'd have to change his label.

4 DR. ROSS: So, in a way, this is going to be  
5 self-defeating to the small processor.

6 DR. HOUSTON: He will have to have consistency in  
7 formulation if the label is to remain truthful.

8 DR. ROSS: So rather than get involved in this  
9 kind of a hassle, he'd be better off not getting involved in it.

10 DR. HOUSTON: Well, that's a business decision that  
11 each packer has to make. Dr. Wilson.

12 DR. WILSON: Well, just a comment here that touches  
13 on two aspects; one is safety, and the other is consumer  
14 reaction. I think, in light of what has been said here and  
15 has been said elsewhere on those two issues, consumer reaction  
16 plus the safety, is that the Department should take those things  
17 into consideration.

18 And I know that Dr. Hayes is a rather forceful  
19 individual. I think I've heard him make as many as three  
20 speeches in one week on cutting down sodium. And he is a force-  
21 ful man with courage of his convictions. I think, where we  
22 have it, that may be fine and dandy for potato chips or corn  
23 chips or something of that kind, in which preservation isn't,  
24 as far as I know, as hinged to the sodium content or salt  
25 content -- we are dealing with a different item when we're



66

1 talking about meat and poultry. And I think that should be  
2 taken into full recognition in considering the labeling aspects  
3 of this thing.

4 DR. HOUSTON: Thank you very much. And we've been  
5 on this quite awhile, but I don't want to cut off discussion.  
6 And if there is perhaps the last round of comments anyone wishes  
7 to make, we'll take them.

8 (No response.)

9 Okay. Some of us do have to leave early and have  
10 asked if, instead of moving on to Continuous Inspection, which  
11 is on the agenda, if in fact we could take up the matter of  
12 Food Safety Legislation instead, since this is a matter of great  
13 concern.

14 Unless there is objection from the Advisory Com-  
15 mittee, I would propose that we do that. And that we then ask  
16 for comments at this time on the Food Safety Legislation and  
17 where we, as an administration, are going in developing the  
18 policy in that area.

19 MR. HIBBERT: If I could just interject for a  
20 moment -- I have some family obligations and I'm going to catch  
21 a plane myself, since my part of the program is done. But I  
22 just did want to say thank you to the Western States people for  
23 their hospitality and thanks to the whole Committee for your  
24 interest and your forbearance. I've enjoyed working with you.

25 (Mr. Hibbert left the hearing room.)





67

1 DR. HOUSTON: Now on to Food Safety Legislation.

2 DISCUSSION ON FOOD SAFETY LEGISLATION

3 DR. WHELAN: Having read over the working group's  
4 recommendation, I heartily endorse them. I think that's an  
5 excellent start toward the administration's stand on the subject  
6 of changing the Food Safety laws.

7 I'm a bit disappointed that there seems to have  
8 been a lagging interest in this particular project in Washington  
9 over the last year. And I'm also concerned that the so-called  
10 consumer advocates, at least one of whom you mentioned a couple  
11 of times yesterday, seem to have an enormous amount of power in  
12 inhibiting these changes, and may be responsible for the death  
13 of the Hatch and Wompler bill and maybe the introduction of new  
14 legislation.

15 I hope this can have some impetus to keep this  
16 subject alive. Is there any hope of proceeding in this basis  
17 with an election year coming up?

18 DR. HOUSTON: Well, first of all, the working  
19 group gave, I think last October, to the cabinet council on  
20 human resources, its first set of recommendations. And for a  
21 number of good reasons, the cabinet council chose not to move  
22 forward at that time and, instead, waited until several months  
23 ago to ask us to proceed in discussing these proposals with  
24 affected parties.

25 I would say, though, that I do not believe that



68

1 any group is in a position of stopping these proposals from  
2 going forward. I see all indications that there will be an  
3 administration policy on food safety within the next several  
4 months. And I think there is a good opportunity that hearings  
5 will be held yet this year.

6 I know that some industry groups have been lobbying  
7 hard with various members of the Senate to get those hearings  
8 held.

9 In summary, I think there will be an admini-  
10 stration position, and I think there is a good opportunity that  
11 we will have hearings this year. And many of the positions  
12 that we've taken, or drafted, will be the subject of, I think,  
13 a very intense and very strong debate in these areas. And I  
14 think it's good that we have that kind of debate.

15 Many of these laws haven't been modified in many,  
16 many years. And it's time that we review them very closely.

17 Dr. Whelan.

18 DR. WHELAN: As you are aware, the Community  
19 Nutrition Institute, and a number of other organizations in  
20 Washington, are spending a great deal of time to block any  
21 changes in Food Safety legislation. And I just want to bring  
22 to your attention, if you're not aware of it already, that the  
23 primary technique is one of bait and switch.

24 What they're trying to do in the consumer's mind  
25 is confuse the topic of the changes in the Food Safety



1 legislation with the growing interest in the topic and diet and  
2 cancer.

3           Recently, under Esther Peterson's signature, I  
4 understand that about a half a million appeals when out to the  
5 American consumer. And the opening line was: "One of every  
6 three people you know who has cancer got it from his diet."

7           They went on to say, "If that's not bad enough,  
8 the Reagan Administration wants to change the Food Safety laws  
9 so that more people die of cancer. Bait and switch. They were  
10 introducing some epidemiological observations that had to do  
11 with broader aspects of diet and confusing it with the food  
12 additive question. And I think you're going to be seeing more  
13 of that, particularly given the introduction of the National  
14 Academy of Sciences report on diet nutrition, which is com-  
15 pletely outside this area, or mainly outside this area. And I  
16 think some of these advocates may begin to try to merge and  
17 blur these issues.

18           DR. HOUSTON: Well, there is no doubt that there  
19 is some strong opposition to making any changes in the Food  
20 Safety laws from a coalition of consumer groups that we've met  
21 with and discussed in working out these proposals.

22           That doesn't mean that we're simply going to stop.  
23 There are other groups -- for example, I think we've gotten  
24 general support to keep moving from a number of scientific  
25 organizations. And other affected parties, regulated



1 industry and so forth, have suggested that we keep moving.

2 So we're not simply listening to one group. We're  
3 listening to all affected parties. And I'm sure there will be  
4 an even-handed and balanced approach taken.

5 DR. BURNETTE: I have a couple of specific comments  
6 about the current status of the working group's position. I  
7 disagree with Beth some in whether or not there's been a  
8 reduction in emphasis. I think the deficiencies of scientific  
9 knowledge are the things which are impeding this legislation.

10 It took seven years to pass the first Pure Food  
11 Act, and it took a little better than seven years to change the  
12 law in 1938. So I'm not particularly concerned that we might  
13 not get it all done in one year because of politics.

14 But assuming this is going to be changed, it's  
15 going to have to be changed, particularly because of some of  
16 the rhetoric that's going to be used in such a manner that  
17 it's going to be credible with the public.

18 Notwithstanding some of the political realities  
19 and some of the trade-offs that have to be made, there's two  
20 areas that concern me, in terms of explaining the changes to  
21 the public.

22 One is the phase out. I think the American public  
23 demonstrated on the saccharin issue that they were perfectly  
24 willing, in some instances, to allow continued use for a sub-  
25 stance for which there is no substitute, or perhaps even the





1 permanent usage of a substance which was a free choice sub-  
2 stance and might have some finite risk involved with it, but  
3 for which there is no substitute.

4           Therefore, I'm a little concerned about writing  
5 into the law a specific time period; in this instance, five  
6 years for the phase out authority. Because if you accept the  
7 thesis that the public, in some instances, is willing to accept  
8 a smaller amount of risk as long as they know about it -- If  
9 it's a large risk, you certainly couldn't justify keeping it  
10 around for five years just because the law said you could.

11           On the other hand, if it's a small and acceptable  
12 risk to some people, terminating in five years -- if you have  
13 yet to identify a substitute -- I think, would not be supported  
14 by the public either.

15           So I would be interested in your comments as to  
16 why -- In my mind, the time period is separable from the concept  
17 of phase out authority. And I think the public has accepted  
18 phase out. I'm interested in knowing why you feel that you  
19 have to put any specific time period in the legislation, since  
20 the statutes are so very difficult to change, and why that  
21 decision couldn't be made on an ad hoc basis for a particular  
22 substance, based on risk and substitutability and other factors  
23 which enter into it.

24           Secondly, again notwithstanding the political  
25 realities of drafting the legislation -- From my standpoint as



72

1 a scientist, and I think from the public's standpoint, if we  
2 can identify a risk, if we can put some number on a risk, and  
3 convey that information; what is important is the risk, the  
4 level of inherent risk and the level of ingestion of a sub-  
5 stance, not where it came from.

6           It doesn't make any difference whether it came  
7 from a basic or traditional food, whether it comes from packaging  
8 materials as an indirect additive, whether it's a direct  
9 additive. And I would hope that there would be some way of  
10 doing the legislative drafting in such a way that the language  
11 in all of the various areas is comparable enough so that the  
12 public could be told that -- notwithstanding the legal require-  
13 ments for putting these things in categories -- a particular  
14 level of risk; whether it comes in from a plasticizer or whether  
15 it comes in from an emulsifier or whether it comes in from the  
16 combination of ordinary foods, would be treated relatively  
17 similarly in terms of its risk to the public's diet, and greatly  
18 dissimilar artificially because of the way that the different  
19 sections of the law are drafted.

20           I think it's going to be very difficult to defend  
21 the attacks of being in favor of cancer and try to explain to  
22 the public that, if it comes from this source, we're in favor  
23 of this much cancer, and if it comes from this source, we're  
24 in favor of this much cancer. It's going to add ammunition to  
25 those who have already indicated that they're going to attack



73  
1 the entire process anyway.

2 DR. HOUSTON: Well, I'll just respond in a very  
3 general fashion to both those. First of all, phase out is a  
4 new concept. And I think the working group, in looking at it,  
5 felt that phase out should not be open-ended in perpetuity, and  
6 that, since we're entering a new era here, that there ought to  
7 be some ground rules set, and that if a substance is no longer  
8 needed in our diet, or necessary or unsafe, but still we can  
9 phase it out, we ought not to leave it open ended. And the  
10 five years was considered a reasonable period.

11 It's still permitted to be used for that time and  
12 still permitted industry and others to find substitutes or  
13 find alternatives. We have received some comments in that  
14 area, somewhat similar to the ones that you just stated.

15 We also know that the Gore bill had more flexible  
16 language with respect to phase outs. A phase out could go  
17 longer, provided there were no suitable alternatives found or  
18 that appropriate research was underway.

19 And I think those are legitimate concerns and ones  
20 that we are now looking at. So where we come out on that, I  
21 don't know. But you can't leave phase outs open ended, we don't  
22 believe. And that was the principle we were trying to bring  
23 forward -- not necessarily that the five years was the final  
24 word.

25 DR. BURNETTE: Could you not, without putting a



74  
1 number in there, say that it's not to be open ended; but define  
2 a process in the statutes under which the length of time would  
3 be determined, without putting a number on it.

4           Because it's just likely that five years may be  
5 too long, as it is likely that it may be too short.

6           DR. HOUSTON: We agree. And, yes, we can do what  
7 you suggest. Where we'll come out on it, I don't know. But  
8 you offer an alternative that's certainly feasible.

9           With respect to your second question, I think  
10 those are more social judgments, in many cases, than anything  
11 else. And where society is willing to take greater risk with  
12 certain substances, depending upon their origin. And if certain  
13 food additives that present a risk can be easily eliminated and  
14 do not offer extreme social consequences, I think the public,  
15 at least in the past has demonstrated that it wants to eliminate  
16 them.

17           Whereas, it was willing to accept greater risk --  
18 for example, aflatoxin in corn, aflatoxin in peanuts, where we  
19 have large segments of our food supply in which injurious sub-  
20 stances may be present, but still in all, the public is saying,  
21 "Yes, we know there's risk there. We're willing to take more  
22 risk because we want to keep those foods in our food supply.  
23 We don't want to do away with them. The consequences of doing  
24 away with them is too great."

25           I still see that question in front of us. And





75

1 quite frankly, I think it's going to be difficult to look at  
2 all of these under one general statement of risk and not  
3 look at food in terms of food categories. Because by categor-  
4 izing foods, we're looking at those risks on a societal basis,  
5 which Congress has done in the past.

6 And when we get into this debate, it may change.  
7 I doubt it. But I think it may.

8 DR. BURNETTE: I'm not suggesting to not look at  
9 items by categories. I think that's, if nothing else,  
10 politically unreasonable. It's simply not going to happen.

11 I'm saying that the approach within categories  
12 should be -- the approach for direct food additives and the  
13 approach for indirects from packaging material; the numbers  
14 will be different, the legislation language will be different.  
15 But the approach to the determination and handling of the risk  
16 should be similar enough that the public can believe, that they  
17 are not being asked to take different risks for different  
18 compounds that are added to foods.

19 I'm not suggesting there won't be categories at  
20 all. I'm simply saying we need to be able to describe them all,  
21 in similar fashion to the public, or we will not be credible.

22 DR. HOUSTON: Well, for sake of clarification, I  
23 presume you're talking about the constituent's policy, vis-a-vis  
24 a direct food additive, where one might be considered differ-  
25 ently than the other. That's a good point. And that's also



1 been raised during the comment period. We are also taking  
2 a look at that to see if there are some further changes that  
3 should be made.

4 DR. WHELAN: I have a comment on section 2 of page  
5 2, the wording suggesting that the net health benefits be  
6 considered in deciding on the disposition of a hazardous sub-  
7 stance, even if it's a carcinogen. It seems to be based on  
8 the nitrite experience.

9 DR. HOUSTON: Or saccharin.

10 DR. WHELAN: Well, this is my comment -- I don't  
11 think it's appropriate for saccharin. I wonder if it couldn't  
12 be modified in a way where we talk about net benefits, as  
13 opposed to net health benefits. There is no scientific know-  
14 ledge, that I am aware of, that there is any health benefit of  
15 saccharin.

16 It's a matter of allowing consumers a chance to  
17 juggle their calories and have some different options. This  
18 has been looked at pretty carefully by a number of different  
19 specialists.

20 And I hate to have the whole case for saccharin  
21 based on establishing improving its health benefits, because I  
22 don't think they're there.

23 DR. HOUSTON: Well, I think it was considered in  
24 light of dietary management. And the working group felt that  
25 that was a health benefit that could be considered.



1 I would say though, just to set the record straight,  
2 that in developing the proposals, we did not take into consider-  
3 ation -- although we were looking at past problems such as  
4 nitrite and saccharin and trying to build a particular piece of  
5 legislation to protect a product -- those, quite frankly, were  
6 used as examples.

7 But we did consider dietary management to be part  
8 of the general net health benefits. As was pointed out, we  
9 very much want to avoid getting into judging economic conse-  
10 quences. We don't think that should come into the equation,  
11 except in the phase out area. And that's why we limited it to  
12 net health benefits, at that stage of the procedure.

13 DR. WHELAN: It's hard to derive health benefits,  
14 or to point to them from, for example, coloring agents which  
15 might pose some hypothetical small risks. I don't like to see  
16 the fate of something focused on its ability to defend itself  
17 on health promoting aspects.

18 DR. HOUSTON: Keep in mind that we would only  
19 consider these health benefits if we were to take adverse action  
20 against a product on the market. We're not suggesting that  
21 health benefits be weighed in the first approval of a food  
22 additive. The only thing that would have to be shown there is  
23 efficacy.

24 It's only if that particular food additive is  
25 called into question at some later point in time, that net



1 health benefits were to be considered. This, of course, was a  
2 great concern to people when they read our first proposals, in  
3 that they felt that this would lead to the consideration of  
4 net health benefits when a food additive was to be given  
5 approval, or color additive or whatever it might be. That was  
6 not the case. They would only have to demonstrate efficacy.

7 Yes. Dr. Wilson.

8 DR. WILSON: Just a comment, in a way -- I hope  
9 that I'm not alone in this group of having difficulty getting  
10 my arms around this entire matter, as far as this bill is  
11 concerned. I find it extremely complex and really difficult  
12 to handle. And I think this is where hearings will tend to get  
13 the thing out on the table where people of my like, perhaps,  
14 can understand it better.

15 The other comment I'd like to make is that it  
16 struck me along the way a little bit amusingly that this thing,  
17 in many cases, has gotten down to four letter words like; harm,  
18 zero, risk, and safe. And then from there, the difficulty  
19 dealing with the English language. I've seen so many attempts  
20 to define safe; and I would be the first to agree that it seems  
21 to be the core of the matter, one of safety.

22 And the working group, I think, has taken the word  
23 "no harm" out of their definition. And I think my only comment  
24 is that the words "no harm," to me, at least in my definition  
25 of "no" means absolute zero. And it should just as well be





79

1 taken out of the language, if we can -- to use something of the  
2 absence of significant risk. Risk is somewhat less definitive  
3 quantity. And I think that's to be preferred.

4 Do you feel, Dr. Houston, that this concept of  
5 reasonable risk, as has been suggested, as contrasted to no  
6 harm, is pretty well planted at this point?

7 DR. HOUSTON: Well, I think so. And what the  
8 working group tried to do was to develop a definition of safe  
9 which made it abundantly clear that the safety objectives of  
10 the law are not based on the pursuit of zero risk. I think  
11 that's a major change that we're now looking at in terms of  
12 today's scientific knowledge.

13 Our ability to detect substances at such low levels  
14 means that if we try to pursue zero risk we're simply going to  
15 have to take actions which are not really in the best interest  
16 of our community. That's been recognized and is at the  
17 heart of many of the changes that have been made. Of course,  
18 that's also going to be somewhat of a controversial issue,  
19 obviously.

20 DR. WILSON: But there is at the same time some  
21 further suggestions on community effort -- I guess I'll call it  
22 that -- to, I think, get no harm back into that language. But  
23 I agree with you, it's quite hard to deal with.

24 DR. HOUSTON: Quite frankly, I think the Kennedy-  
25 Hatch draft language goes much further than the working group



1 language, with regard to the Delaney clause. If you examine  
2 very carefully the Senate draft language, they have adopted  
3 risk assessment in lieu of the Delaney Amendment as now written,  
4 which the working group did not do.

5           The working group only used risk assessment in  
6 terms of feed additives and indirect additives. We  
7 are looking very carefully now at that Senate language because  
8 it did go further and used risk assessment principles as applied  
9 to food additives which have been shown to be carcinogens.  
10 And that is further than the working group went in its original  
11 recommendations.

12           In other words, they used risk assessment across  
13 the board in every area. And I found that interesting, very  
14 interesting, that the Senate staff language would go that far.  
15 It was somewhat of a surprise to me. But nevertheless, they  
16 did. And we're taking a look at it at this time.

17           It's now 11:35 and we have covered the Margarine  
18 Standard, Prior Labeling Approval System, Sodium Labeling, and  
19 Food Safety Legislation. We have three other subjects on the  
20 agenda; Continuous Inspection, which would come next, Import  
21 Inspection, and Food Safety Education, the Food Safety Poster  
22 Contest.

23           Would the Committee like to continue working at  
24 this time and go through these subjects, or would you prefer to  
25 break for lunch now? We could continue going and maybe end up



1 shortly after 1:00 o'clock and be completed for the day. Or we  
2 might get into Continuous Inspection and see where we are at  
3 that point. Would you like to continue on?

4 MR. LOUNSBERRY: I would prefer continuing on, if  
5 at all possible.

6 DR. HOUSTON: Okay. Let's open the discussion now  
7 to the subject of Continuous Inspection. As we discussed  
8 yesterday, on August the 10th we will be having hearings to  
9 modify the Federal Meat Inspection Act, Poultry Products  
10 Inspection Act, the Egg Products Inspection Act, to provide the  
11 Secretary of Agriculture with discretionary authority in deter-  
12 mining the frequency, intensity, and level of processing  
13 inspection in meat and poultry plants. And I'd like to have  
14 some comments on that, please.

15 DISCUSSION ON CONTINUOUS INSPECTION

16 DR. BURNETTE: Did you just give a specific date?

17 DR. HOUSTON: Yes. August the 10th.

18 DR. BURNETTE: So that's something new from yes-  
19 terday?

20 DR. HOUSTON: No. I said that yesterday.

21 DR. BURNETTE: I thought you said you thought you  
22 would have them sometime in August.

23 DR. HOUSTON: Okay. Hearings on the proposals  
24 have been scheduled for August the 10th, before the subcommittee  
25 on Livestock, Dairy, and Poultry of the House Committee on



82

1 Agriculture. And that subcommittee is chaired by Mr. Harkin of  
2 Iowa.

3 I went on to say that we believe we will also  
4 have hearings on the Senate side. And it may be that I confused  
5 you there. We do not have a date set for Senate hearings, but  
6 we hope that one will be set in this session of Congress.

7 DR. BRICKENKAMP: I would like to heartily endorse  
8 the movement of the Department in this direction. I fully  
9 support the intent to put the burden for quality control more  
10 squarely in the hands of the processor, because of their  
11 expertise in their own products, because of the longstanding  
12 need for our industries to recognize the importances of quality  
13 control. And for the federal agencies to come out very strongly  
14 in a policy and promoting that and endorsing that is an enormous  
15 step forward. I congratulate you.

16 DR. HOUSTON: Thank you very much. But we're a  
17 long way from there, since we obviously have to go through  
18 hearings on both sides of the Congress. And, again, hopefully,  
19 they will see fit to support us and to mark a bill and bring  
20 it on the floor.

21 MS. CRAMER: I concur that anything that can be  
22 done to lower the cost for this kind of production will benefit  
23 the consumer. And one statement -- Today, I think with the  
24 competitive marketplace in the industry, that the self policing  
25 is very, very important. Industry dreads nothing more than a





1 major recall on a product that has not been formulated properly  
2 or inspected properly.

3           And so I think that the industry, with its  
4 competitive nature, is self policing in many areas. It can't  
5 do without it entirely. But, certainly, I think the demands  
6 made on industry today are very strong already.

7           DR. HOUSTON: Dr. Burnette.

8           DR. BURNETTE: This is going to sound like some-  
9 thing you'd read in the Congressional Record, but I don't intend  
10 it to necessarily be a political statement.

11           If the veterinary pathologists tell me that the  
12 status of inspection techniques and the status of the American  
13 meat and poultry processing industry are such that pre and  
14 postmortem inspection of the animals at the slaughter house and  
15 controlled phase inspection in the processing plant will  
16 adequately protect the American public -- which I think is the  
17 case; but I'm having to rely upon the experts in the area to  
18 say that -- then I would have to believe that opposition to  
19 establishing a system such as is outlined in this proposed  
20 legislation, would be nothing short of a willful misuse of the  
21 taxpayers' money and would be completely ignoring the fact that  
22 roughly, I guess, about two-thirds of the food supply that comes  
23 under FDA inspection procedures is operating in a safe,  
24 efficient, economical manner and has been for many years.

25           I think at one time in the early days of our



1 country there was a great flap over the Chief Justice of the  
2 Supreme Court, John Jay, and there were handbills printed and  
3 distributed throughout Massachusetts which said: "Damn John  
4 Jay, damn anyone who won't damn John Jay, damn anyone who won't  
5 put a light in their window and sit up all night damning John  
6 Jay" -- John Jay being the Chief Justice.

7 And I feel that way here -- that anyone that  
8 opposes this without being able to identify a specific risk to  
9 the American public is willfully proposing to squander federal  
10 dollars.

11 MR. CARBAUGH: I'm not even sure I understood what  
12 you said. But I'll go home and put my light in my window.  
13 Just a word, I guess, in relation to this -- I had a question  
14 yesterday. Of course, I have a little personal problem with  
15 moving in this direction, from a state perspective, considering  
16 the treatment that's been given equal to state inspection. And  
17 now we're talking about moving away from something that was  
18 considered good and certainly less, on that basis.

19 I'm certainly in favor of more efficient, effective  
20 inspection. And I think I'm in favor of what's being proposed.  
21 Aside from that, I'm also in favor of extending all rights and  
22 privileges of equal to inspection of all products.

23 There is one point -- and I fully understand what  
24 you said yesterday, Dr. Houston, about the concept of user fees.  
25 And I come down on the same side, I think, that you do, in that



85

1 respect. Because if this is considered necessary in the public  
2 interest, not only at the federal level but also at state level,  
3 it ought to be financing public funds. And the burden ought  
4 not fall entirely upon those businesses that have to comply.

5 On the other hand, we know in many cases that the  
6 reason for a lot of these regulatory programs is probably  
7 because of that small number of operations, whether it be meat  
8 plants or something else, that fail to comply. And I'm not  
9 sure that I would want to let them get off scott free and let  
10 the public pay for their inability to comply.

11 I don't really see that as a user fee concept. I  
12 would look at it more as an incentive to comply, particularly  
13 if they were faced with the possibility of having to pay for  
14 40-hour week inspection; when, if they complied, maybe they  
15 only needed two hours a week.

16 And I'm not so sure I wouldn't endorse some sort  
17 of --call it what you want -- penalty or incentive or user fee --  
18 I don't really care what you call it. But I think there is  
19 something to be said from the standpoint of an effective program  
20 and having some incentive for the individual to comply under  
21 those conditions.

22 It's all right for voluntary. But we all know  
23 there are going to be those who abuse it, and it's true of a  
24 lot of other things. So that's my comment relative to that  
25 particular portion. That's the reason I raised the question



1 yesterday.

2 DR. HOUSTON: I understand your concern. And as I  
3 said yesterday, we're reluctant to get into the user fee  
4 situation in any context. And I can understand also that it  
5 may not be considered to be a user fee in the situation you  
6 described.

7 But still in all, we have a police force in every  
8 city, every county, that's paid for from the total taxpayer  
9 base. And yet, we redirect that police force to those areas  
10 that need the closest policing, and we still don't have the  
11 opportunity to redirect the cost of that police to any  
12 particular segment. So I suspect one could make an argument  
13 there. And maybe I shouldn't have even gotten on that subject.

14 MS. CRAMER: Dr. Houston, are there not fines for  
15 people who are not in compliance?

16 DR. HOUSTON: Yes, there are, if the problems are  
17 serious enough. But the meat and poultry inspection laws are  
18 really built on a preventive approach; where, if you'll read  
19 them, animals are inspected before they are permitted to leave  
20 the plant to eliminate any problems. And plants are looked at  
21 to be sure that -- processing plants are looked at to be sure  
22 that mislabeled products do not enter commerce and that the  
23 products that are in those plants to be formulated are wholesome.

24

25





87

1           It's a much different inspection system than is  
2 under the Food, Drug, and Cosmetic Act. Again, I'm not being  
3 critical. I'm saying that Congress set up two very different  
4 and distinct inspection programs in this country; one for  
5 meat and poultry products, and one for other foods. And the one  
6 for meat and poultry products is much more intense and based on  
7 a system of eliminating problems before the products leave the  
8 plants, through a very intensive inspection system. Whereas,  
9 FDA does a lot of after-the-fact inspection, if you will, and  
10 in regulating through criminal prosecution, etc.

11           MS. CRAMER: Does the Service have the power to  
12 close a plant down?

13           DR. HOUSTON: Yes. We can close a plant down for  
14 a matter of several minutes, up to several hours, up to several  
15 days if they are not being operated properly in terms of  
16 sanitation. We also can shut plants down if they abuse  
17 inspectors. We can shut plants down, or take steps to withdraw  
18 inspection, if the owners are convicted of a felony or two mis-  
19 demeanors related to a violation of the food laws. We can get  
20 injunctions to restrict their activities and so forth.

21           And those penalties would remain under the changes  
22 that we're suggesting. Mr. Waters.

23           MR. WATERS: William Waters. I support the Depart-  
24 ment in federal utilization of the inspectors. Over the last  
25 five years we've lost approximately 25 percent of the number of



1 slaughter houses in this country. And in my area, that's going  
2 to be one of the limiting factors for expanding agriculture, due  
3 to the lack of slaughter houses.

4 DR. HOUSTON: Thank you. Rosemary.

5 MS. MUCKLOW: The question of mandatory versus  
6 voluntary total quality control can engender a great deal of  
7 strong feeling among meat processing establishments around this  
8 country.

9 And somebody said earlier on, with respect to food  
10 safety legislation, it has to move slowly, it has to take time.  
11 And I think, as Mahlon said, it took seven years on each of the  
12 two previous occasions. It takes a long time to change people's  
13 patterns.

14 We feel out here in the west that we've accelerated  
15 the change time. And I would like to ask Dr. Houston to invite  
16 Dr. Breeden, who has been very responsible for some rather  
17 substantial changes here in the west with respect to persuading  
18 people that they ought to try the voluntary control system.

19 I would like for you to ask Dr. Breeden to maybe  
20 tell us a little bit about how he's managed to get this job  
21 done with quite small plants in the area. I think it's impor-  
22 tant to try the carrot approach. And the western region is very  
23 smart at trying the carrot approach. And I'd just as soon that  
24 they keep that great big club they've got locked up in a cup-  
25 board somewhere and continue to use the carrot out front.



89

1 Can we ask for some comment on that?

2 DR. HOUSTON: Dr. Breeden.

3 DR. BREEDEN: Thank you, Rosemary. I don't know  
4 that we've accomplished anything all that great. When I came  
5 here about a year ago -- and it's been a little bit shorter  
6 time than that that we've really had to evaluate where we were  
7 at with the total quality control program in the western region.  
8 One of the things that I became aware of was that, despite all  
9 the publicity and all the conversation that has occurred in the  
10 literature and in meetings and that sort of thing, that there  
11 was still a lot of uncertainty at the plant level as to what  
12 an individual plant, or the management in that plant would  
13 have to do to involve their operations in the total quality  
14 control concept.

15 We had somewhat of a same situation in the lower  
16 levels of our organization, the inspectors in charge and some  
17 of the supervisors. And, primarily, there it was developing a  
18 commitment towards this type of approach to inspection pro-  
19 cedures.

20 And once we started involving the plant owners and  
21 operators as to what they individually would have to do, we  
22 found that there was a considerable amount of interest there.  
23 Once people learned what they had to do and that it wasn't all  
24 that involved and all that complicated, there were some benefits  
25 to them, from a production standpoint as well as taking care of



90

1 some of the specific problems that we as a regulatory agency  
2 are interested in, they seemed like they started progressing  
3 in this area and we started extending assistance and help from  
4 our regional office to those people. And it seems to have paid  
5 off. We still have a lot of work to do in this area. But we  
6 have close to 200 plants that are now involved in some phase of  
7 total quality control.

8           So far, we have just under 20 plants that are  
9 actively in the program. I think yesterday you visited two of  
10 the plants that are in the process of developing their programs  
11 and are actively progressing in this direction. It's not some-  
12 thing that occurs just real quickly. The plants have to develop  
13 a commitment to this approach; and in getting their programs  
14 together, it takes some time and effort in accomplishing this.

15           Fortunately, that time frame enables us to do  
16 something that is vitally important too; and that is to train  
17 our inspectors. I have to believe that that's one of the strong  
18 points of the program, that the inspector that is involved in  
19 those TQC plants is a much better qualified individual than  
20 what we normally have in our regular program.

21           I guess that's really about all I'd say at this  
22 time, Rosemary. Thank you.

23           DR. HOUSTON: I'd add one comment to that. The  
24 American Meat Institute, several months ago, surveyed 49 plants  
25 that are in the TQC program and asked a host of questions. But





91.  
1 one key question that comes to mind is: If you had this to do  
2 all over again, would you get into it? And 48 of the 49 plants  
3 said yes. And I think that's a strong indication of what  
4 happens when you get commitment.

5 They saw the advantages of it, from a whole host  
6 of issues -- citing overtime, having more commitment from their  
7 own people, and better control of their own operations.

8 Any other comments? Yes, Dr. Foster.

9 DR. FOSTER: I had the good fortune to visit with  
10 your southern regional director about a month ago, I think it  
11 was, in visiting a plant in his region. And I talked with the  
12 local inspector and with the plant people. And on both sides  
13 there was great enthusiasm for it. And I must say, from what I  
14 could learn, I can see why. Both sides have advantages, pro-  
15 vided they want it to work.

16 Certainly, industry has got a lot of incentives in  
17 terms of just what you said; less overhead, more commitment on  
18 their own part. They don't have the tendency to just let every-  
19 thing go until the USDA inspector tells them to clean it up,  
20 they tend to be more involved themselves.

21 DR. HOUSTON: Dr. Burnette.

22 DR. BURNETTE: When the Department goes to the  
23 hearings -- for the record, I'd like to say that I think this  
24 movement is one of the most responsive, both in terms of the  
25 industry and in terms of the utilization of federal resources,



92

1 that we've seen in many years in terms of serving the public,  
2 protecting the public health, and also protecting the public  
3 pocketbook.

4 And just for myself, I would like the Congress told  
5 that at least one person believes that strongly and that it  
6 would be criminal for Congress to not modify the statutes in  
7 such a way to allow such a mutually beneficial program to  
8 continue and grow.

9 DR. HOUSTON: Well, I think that we're making that  
10 kind of presentation on the 10th. And another point I would  
11 make here is that each of you individually can do what you wish  
12 to make your feelings known to your own Congressional repre-  
13 sentatives.

14 Yes. Mr. McDade.

15 MR. MCDADE: John McDade here. I would like to say  
16 from the people that I've been in touch with from the industry  
17 on this program, that your TQC program is a program that every-  
18 body is promoting. But at times we hark back to what Rosemary  
19 said, and I believe Dr. Breeden said, people are afraid of  
20 things they don't know. You know, they haven't been down this  
21 trail.

22 And, again, I want to commend Dr. Breeden. The  
23 places I travel in the country -- I believe Dr. Breeden has  
24 more motivation for it out here and has people less fearful and  
25 more willing to try it. And I've talked to two or three people



93  
1 on his staff that feel the same way. So you have this thing  
2 from top to bottom.

3 And, as Rosemary said, I think it's certainly going  
4 well out here. And we're for it. But I think, as it ties into  
5 this new legislation, that industry still feels -- since there  
6 are so many people that do not understand it and do not have  
7 it available and will not have it available, the TQC, for some  
8 extended period of time, that we do not feel that should be-  
9 come mandatory to have total quality control program to reap  
10 some of the benefits, from all sides, of this less than con-  
11 tinuous inspection.

12 I read your handout that we got last evening after  
13 the meeting was over. You indicated in here -- everyone has  
14 that on page 3, if you want to read it, of the less than con-  
15 tinuous inspection document that was given out last night. You  
16 indicated in here that it should be emphasized that the pro-  
17 posed legislation places no new requirements on the regulated  
18 industry. Then you go on to say that -- I'll just read the  
19 whole thing.

20 "It does not impose mandatory quality control  
21 systems, but it is limited to giving the Secretary increased  
22 flexibility in using inspection resources based on sound  
23 criteria."

24 Now, I further endorse giving the Secretary of  
25 Agriculture the discretion, through you as administrator, Don,



94

1 to decide where the dollars of this program are spent. It  
2 simply isn't fair to come and expect you to reduce the dollars  
3 spent in this program and insist that you spend money in places  
4 that you do not feel that it's being properly spent. And you  
5 feel that you can make reductions in less than continuous  
6 inspection and you can save budget dollars this way.

7 I think it was important -- it was pointed out, I  
8 believe, by Bill McMillan in one of the hearings, that if we  
9 were running a pizza line here and we were making pizzas with  
10 cheese, they would be under Food and Drug and they would have  
11 inspection at certain times. And I here say, the Food and Drug  
12 has done a very fine job of inspecting, as Dr. Burnette pointed  
13 out. Most of our food is inspected by Food and Drug through  
14 their program, which is different than ours.

15 But if you put one piece of meat in any form,  
16 one piece of pastrami on that pizza, then that line, that plant  
17 would come under continuous inspection. Now, this, of course,  
18 is one example to just point this out -- that I feel we need to  
19 take a look at something. You should have discretion of how  
20 much inspection it takes, other than continuous inspection.

21 But as a matter of housekeeping and all, we need  
22 to say that this logo thing, Don -- as brought up by Dr. Wilson --  
23 is of great concern to us. No. 1, the TQC carries a special  
24 logo, which I've spoken out on this Committee as being against  
25 the logo portion of the TQC, where you can have a special logo





1 indicating you're under TQC. I feel that is confusing to the  
2 consumer.

3 I'm concerned about how we're going to introduce  
4 all these logos to the public. That has nothing to do with the  
5 program itself. It's the logo that I feel should be discussed.

6 I believe you indicated yesterday in answer to one  
7 question, that your definition of processing could come after  
8 postmortem inspection; that possibly chilling and storage and  
9 cutting and packing might -- I don't believe you gave us a  
10 definite answer. Could you maybe repeat, Don -- Do you recall  
11 your answer to where processing begins and what is processing?

12 DR. HOUSTON: It is our intent, and we'll so state  
13 in the hearings on August 10th, that this could cover any  
14 procedure or processing in the plant following postmortem  
15 inspection. And that includes chilling, packout, etc.

16 MR. MCDADE: Then that would give us an opportunity  
17 to have greater use of this program. And plants would have  
18 their own less than a full further processing operation, as we  
19 say, and it might give you an opportunity to use this less than  
20 continuous inspection in some other areas, such as where you  
21 have a small cutting line or you have something attached to the  
22 end of a processing plant.

23 So, again, I think this is bringing us up into the  
24 80s with inspection techniques. In giving you this discretion,  
25 I wholeheartedly support it. I do say though that you left



96

1 civil penalties out. And I do not feel that civil penalties  
2 should be brought into this. I know it will try to be inter-  
3 jected at the hearings.

4 But, believe me, the Department has unbelievable  
5 power to wheel if someone is not obeying the regulations or  
6 in some way not being cooperative. And you just don't have to  
7 stop a plant or withdraw inspection. The daily confusion of  
8 not being able to communicate properly with the inspection  
9 function will be enough to bring you in line very shortly. We  
10 have many, many ways to do this.

11 So these are the only things that I see that would  
12 cause the problems. And I do not want industry people to be  
13 against it because they are afraid that they would have to have  
14 mandatory quality control. And that's the only thing that I see  
15 where there is some red flag that's waving out here. And I'm  
16 happy to see what I've seen here in this document you handed  
17 out and your feeling on it. Again, we feel this is a giant  
18 step forward. Thank you.

19 DR. HOUSTON: Ms. Mucklow.

20 MS. MUCKLOW: The other point I wanted to make, as  
21 has been made by other people here, is that I think it is very  
22 important to mention it and consider it once again; and that is  
23 the proposed logo.

24 DR. HOUSTON: Excuse me. When you say "proposed  
25 logo," are you talking about the change in the inspection



1 legend?

2 MS. MUCKLOW: Yes.

3 DR. HOUSTON: Okay. Thank you.

4 MS. MUCKLOW: I'm sorry. I gave it the wrong name.  
5 Dr. Wilson, yesterday, reminded everybody how many years we have  
6 spent, not always successfully, in trying to distinguish between  
7 the grading shield and the inspection circle. And to now  
8 introduce a third little mark that consumers will look for, I  
9 think will be very, very confusing.

10 If, indeed, you feel that there has to be a change  
11 in the inspection legend, I would ask that you change that  
12 legend for all meats; whether it's anti and postmortem inspection,  
13 plus processing. You would not be untruthful in saying in that  
14 logo, for all products, that it was prepared in a USDA inspected  
15 establishment.

16 But to make two logos or two legends, where up till  
17 now we've had only one -- and it is not readily understood --  
18 I think it would be very confusing to the consumer. And I'd  
19 ask you to look again at that position that the Department  
20 has taken.

21 DR. HOUSTON: Well, we plan to do so. When we  
22 testify on the 10th, we plan to tell the Committee that this is  
23 an area that may need further study.

24 MR. CARBAUGH: Dr. Houston, for the record, just  
25 one comment -- There was some reference made to the programs of



98

1 FDA related in here. I would just want it included on the  
2 record that one of the reasons that system with the FDA works  
3 as good as it does is because of the efforts in the programs  
4 of the many states across this country who've been in food  
5 inspection longer than the FDA has.

6 Our food law in Virginia was passed, I think in  
7 1902. And you've got a field force out there that regularly  
8 inspects, samples, tests, and laboratories and every way that  
9 monitors the food that's in the chain from beginning to end.  
10 And I just think that you cannot look entirely at an agency like  
11 FDA and say that includes all the food inspection in this  
12 country, without also considering what all the states in the  
13 United States do in this regard.

14 DR. HOUSTON: Including meat and poultry inspection,  
15 where we still have 27 states involved.

16 MR. CARBAUGH: I don't know for how long. But,  
17 yeah. Okay.

18 MR. LOUNSBERRY: You're going to need a quality  
19 control totally if 27 turn all back at once, because you can't  
20 transfer them all from the northeast into the mid west and  
21 other places.

22 DR. HOUSTON: Any other comments? Yes, Dr. Craig.

23 DR. CRAIG: I'd like to go on record as supporting  
24 what John McDade has so eloquently stated in great detail, and  
25 I share the concerns that he has about the total recommendation





1 approach.

2 DR. HOUSTON: Thank you. Any other comments?

3 (No response.)

4 Okay. We've got two areas, and it's 12:00 o'clock.

5 Would you like to continue on?

6 MR. LOUNSBERRY: Yes, sir.

7 DR. HOUSTON: Okay. Let's go on to Import

8 Inspection.

9 DISCUSSION ON IMPORT INSPECTION

10 DR. HOUSTON: Yesterday, I gave you a brief over-  
11 view of where we're going with the import inspection program  
12 both here and at port of entry and some changes we will be  
13 making, and have made, in reviews conducted in countries of  
14 origin. As I pointed out, most of those changes have  
15 come about as a result of the Australian scandal of last year,  
16 as well as some changes we were undertaking before that; and, of  
17 course, the more recent changes which have come about as a result  
18 of the investigations in the Miami area, where we had some  
19 fraudulent certificates accompanying product coming out of  
20 Costa Rica.

21 Anyone care to comment on that? Dr. Wilson.

22 DR. WILSON: Yes. Just to clarify it in my mind,  
23 the comment you made yesterday relative to import inspection  
24 now -- It's my concept of things that, at least prior to this  
25 time, and perhaps continuing, if something hit the dock, it







1 increased costs, which has been of great concern to the  
2 importers. That is a significant change.

3 DR. WILSON: And you feel, obviously, one that was  
4 necessary.

5 DR. HOUSTON: Well, we felt it was necessary, and  
6 the Inspector General felt it was necessary. He wrote me a  
7 strong letter to that effect, and I chose not to argue with him.

8 DR. BURNETTE: Dr. Houston, when you say it cannot  
9 be prestamped, does that mean that the label, individual package  
10 label of an imported product, could not have preprinted on the  
11 label the inspection legend -- whatever the inspection legend  
12 ends up being?

13 DR. HOUSTON: No. I didn't mean that. I'm talking  
14 about, principally, those boxes of frozen boneless beef, 60-  
15 pound boxes. Each of those boxes, before it's permitted to go  
16 into the United States, has to be stamped U.S. inspected and  
17 passed. That is the practice that I'm talking about.

18 I'm not talking about individual containers, for  
19 example, of boneless hams.

20 DR. BURNETTE: I would like to put on the record a  
21 statement of concern that I thought it was very unfortunate  
22 that the primary emphasis, particularly in the press, when the  
23 Australian incident occurred, was to berate USDA for letting a  
24 small amount of products slip through, as opposed to commending  
25 our Department of Agriculture for having a system that was so



1 good that it broke a well-organized criminal ring that was  
2 occurring in another country. And I really don't think the  
3 USDA got anywhere near the credit they should have for solving  
4 a problem which was an Australian criminal problem, not a  
5 United States Department of Agriculture problem per se.

6 DR. HOUSTON: After working in government for 25  
7 years, I've come to recognize that people don't go out of their  
8 way to thank the government when they do anything right; they're  
9 more prone to criticize it. That's part of the baggage you  
10 have to carry, and you have to understand it and recognize it.  
11 And we just go on and do the best we can.

12 MR. LOUNSBERRY: Dr. Houston, I have a question.  
13 Maybe it's not germane. But how does import inspection work in  
14 free trade zones?

15 DR. HOUSTON: Our inspection is carried out in  
16 free trade zones just as it would be for product entering the  
17 continental U.S. that would be considered domestic.

18 Now, let me elaborate on that. I think I know  
19 where you're coming from on that. Several years ago, people  
20 were avoiding the import quotas by moving boneless beef into  
21 free trade zones, Puerto Rico, principally. And even though  
22 that was considered a free trade zone, that product had to be  
23 inspected. It was then brought in and, with certain processing  
24 applied to it, moved into the United States outside the quota.

25 Secretary Butz, at the time when he learned of





1 that situation, immediately corrected it. And that product was  
2 applied to the import quota, as far as I know. If that's the  
3 point you're getting to.

4 MR. LOUNSBERRY: Well, that was one of them. Of  
5 course, free trade zones have been established in other areas.  
6 I'm thinking of the free trade zone down in the mines along the  
7 Missouri River and Kansas City.

8 DR. HOUSTON: Yes.

9 MR. LOUNSBERRY: I noted here today on television  
10 the news had quite a lot of shots of the underground caves and  
11 telling about the businesses going there and there's some good  
12 offices. And I've had the privilege of seeing that some years  
13 back. And I was just wondering how inspection was carried on  
14 in those areas. I know that there has been an intense effort to  
15 establish other free trade zones in the interior part of this  
16 country. And I was just wondering how they applied to that.

17 DR. HOUSTON: Well, the establishment of a free  
18 trade zone does not exempt anyone from meeting our inspection  
19 requirements.

20 MR. LOUNSBERRY: I'm glad to hear it. I don't know  
21 whether you're aware of it or not, but I had a proposed suit of  
22 a million dollars brought against me by Bunker Hill Packing  
23 Company for pointing out -- What had happened, they were grind-  
24 ing meat in the plastic bags and shipping in and not being  
25 charged an import quota.



1 DR. HOUSTON: Was that the Puerto Rican situation?

2 MR. LOUNSBERRY: Yes. But it didn't go any  
3 further than that, thank goodness. I didn't have a million  
4 dollars to contribute.

5 DR. HOUSTON: Mr. McDade.

6 MR. MCDADE: As one who exports and talking to  
7 some people on the Committee during off hours here, the question  
8 still arises -- with the enormity of what happened; not the  
9 size, but the intent -- the question is, so many of the exporters  
10 such as ourselves have found the slightest wrong with our pro-  
11 duct in a foreign country and have been treated rather  
12 difficultly and rough.

13 And I think you did your job in catching this as  
14 quickly as you did. The question is, is how severely they were  
15 handled after you caught them. I think that still is a  
16 question, because there has been very, very -- I guess the  
17 best way to say it, there has been product destroyed, product  
18 moved back, and things happening for the slightest technical  
19 error of a word or anything on one of the packages.

20 After being through that, there is questions as to  
21 just -- I don't think you treated them more difficultly than  
22 they should have been treated -- I can tell you that. And for  
23 those of you on this panel, I wish all of you could have made  
24 a trip I made a few short years ago to look at the inspection  
25 procedures and the entire inspection programs of several other



1 countries with some of Dr. Houston's staff people. And it makes  
2 you very proud of the operation that's being conducted by Dr.  
3 Houston here for our entire inspection program. And I'm  
4 certainly a great booster of it.

5 And I feel that we don't have to take a bow to  
6 anyone else, by a long way, in the food that's being presented  
7 to our consumer public through this program. We just have a  
8 fine program. And if someone slips something through for a  
9 short period of time, why, they get caught on the thing.

10 But I do want everyone here to know that, if you  
11 ever do get a chance to go see it in foreign countries, it's  
12 just going to make you extremely proud of what we have here.  
13 And even though we have the little things we want to change  
14 about it, we can work to do that. But, essentially, I would  
15 not want to tear it down in any way.

16 Now, there is one thing that concerns me a little  
17 bit on the verbage of this. Don, did you say yesterday that  
18 you would not take the word of any other country, of the  
19 importing/exporting country, when you're importing over here,  
20 on the residue analysis? Everything gets us in a problem in  
21 trade, you know. And will there be countries that will  
22 retaliate and cause us to do more on this residue thing or not?

23 That just struck a note of concern. And I don't  
24 have the exact wording the way you gave it, but you did refer-  
25 ence your handling of the residues.



06

1 DR. HOUSTON: Well, you're correct. Let me get it  
2 out and I'll read it to you again. It's page 4.

3 It says: "Further, we no longer accept as a  
4 substitute for testing results of foreign pretest or certificates  
5 from foreign governments certifying the residue levels of the  
6 product."

7 Some years past, whenever a country got into a  
8 residue problem, we would let them pretest product before it  
9 left their shores and we would accept their certificates when  
10 it reached here and we would let it go into commerce. We found  
11 that, while that worked in some cases, it didn't work in others.  
12 And so we have just simply eliminated the practice of accepting  
13 certificates on a pretest basis.

14 And if a country gets into a residue problem, we'll  
15 delist the plant or, if the product comes here, then I think  
16 15 or 20 successive lots must pass before we'll let the product  
17 flow into commerce without interruption.

18 Again, as someone pointed out a few minutes ago,  
19 most of regulatory actions are taken on the basis of mistakes  
20 by a few people, not by the majority. It's unfortunate that  
21 the majority must then live within rules that are set up because  
22 of what a few individuals will do. Just as an example, what  
23 happened in the Australian incident.

24 The vast majority of those plants in Australia are  
25 properly managed operations. But there is a criminal element





1 that got into the meat business and did some things they  
2 shouldn't have done.

3 MR. MCDADE: Well, thank you. We would go on  
4 record as supporting your proposed change in import restrictions.  
5 And I think this, hopefully, will bring some of these other  
6 countries up even closer to our standards.

7 DR. HOUSTON: Dr. Burnette.

8 DR. BURNETTE: Don, do we charge importers for  
9 residue testing?

10 DR. HOUSTON: No, we don't. Our law only permits  
11 us to charge for overtime. And if there's any of that involved,  
12 we do it. We're reluctant to even make any charges of an  
13 imported product coming in -- just as we don't charge domestic  
14 packers for inspection. We're also concerned that if we do  
15 get into that, then we're going to have some retaliation on  
16 American exports.

17 DR. BURNETTE: Well, my next question was: Is this  
18 change in our policy going to cause any countries to do the  
19 same thing to our exports and charge our exporters for them?

20 DR. HOUSTON: Wel, of course, they have the  
21 latitude to do a lot of that now. I don't know if any countries  
22 are actually charging or not. I'm not aware of it. They may  
23 be. Perhaps some of the people who are in the exporting  
24 business here could answer that better than I do.

25 MR. MCDADE: It takes a long time to get it in.



1 They test for different things. And you don't know, when it  
2 goes over there, what they're going to decide to test for at  
3 the time. And then it's the delays that are the biggest  
4 problem.

5 DR. BURNETTE: But they do not charge you, other  
6 than the opportunity lost to the product.

7 MR. MCDADE: No. They might charge an importer,  
8 but it normally doesn't end up on our bill, that we can see, as  
9 a rule, I would say.

10 DR. HOUSTON: Any other points to be made?

11 MR. CARBAUGH: I just want to raise a question  
12 about the potential for retaliation. I'm just looking for  
13 information, I suppose, from the people here.

14 I fail to see what kind of retaliation you'd get  
15 from Australia, for example.

16 DR. HOUSTON: Well, we obviously -- The only  
17 retaliation would be in another area. For example, Australia  
18 has no defense industry, and they purchase all of their defense  
19 supplies, as I understand it, from the United States.

20 And in fact, our balance of payments -- even though  
21 we purchase large amounts of meat from Australia -- our balance  
22 of payments is favorable with that country because of what they  
23 take out of here in other commodities.

24 But you're right. In terms of food exports/imports,  
25 there is no opportunity for any retaliation there. If we see



1 retaliation, it's in other parts of the world.

2 As I mentioned yesterday, the European courts over-  
3 ruled the UK action on New Castle, which last year cut out a  
4 six million pound market we have on broilers going into that  
5 country. And that's a large market to lose.

6 Okay. Moving right along, it's 12:30 and we've  
7 got one subject left. I don't know how much emphasis there  
8 really is in it; and that was the Food Safety Poster Contest and  
9 some of the things we're doing in Food Safety Education, which  
10 I covered rather quickly yesterday.

11 But if any of you do have any thoughts or ideas or  
12 any views you want to express, we'll be glad to hear them.

13 MR. LOUNSBERRY: Keep it going. It's good PR.

14 DR. HOUSTON: Okay.

15 MR. LOUNSBERRY: That's about the only comment I  
16 have.

17 MR. MCDADE: Don, I was a judge last year. And I  
18 tell you, you'd be surprised at the interest of the schools and  
19 all. I mean, this is a much, much bigger thing than you would  
20 think of if you were not really aware of what's going on on  
21 this thing. It's just tremendous.

22 And the ability of the young people to grasp the  
23 situation and to put it down in posters is just -- I tell you,  
24 it really enlightens you as to just what can be done by educating  
25 the children. And I think in a few years they'll be taking a



1 different look at food safety than many of us do. They don't  
2 wait until late in life to learn it. I'm very much impressed  
3 with the program.

4 DR. BURNETTE: Has there been any discussion of  
5 using this program in some future years to educate at the  
6 elementary school level about the vast breadth of our inspection  
7 and control system on food?

8 DR. HOUSTON: No. We have not reached that point.  
9 And I have to tell you that, based on the experts that we talked  
10 to in this area, you pretty much have to gear your programs in  
11 terms of complexity to certain age levels.

12 We have attempted to stay at the kindergarten  
13 through sixth grade level. We have thought several times about  
14 starting some programs at the junior high or high school level.  
15 We're not done. We've only really been in this -- this is our  
16 third year, so we're somewhat neophytes at it too.

17 But for the amount of money that is put into this,  
18 the return is extremely high, when you talk about the number of  
19 people that participate. And it's a very cost effective way  
20 of getting good food safety information to large numbers of  
21 people, especially people in their learning years. So we see  
22 it as a good investment.

23 DR. ALFIN-SLATER: What does it take to expand the  
24 program so that you do go to junior highs and high schools?

25 DR. HOUSTON: Well, it takes some money and some





111

1 planning and intellectualizing some ideas. Right not, the  
2 program is costing us about \$200,000 a year, including the  
3 printing, all the mail costs, everything involved. And we're  
4 reaching many, many, many thousands of young people.

5 So it would take more money, principally, in  
6 opening up into more complex areas. It can be done. It's  
7 simply a matter of policy on our part to expand it to that level.

8 DR. ALFIN-SLATER: I think it would be worth it.

9 DR. HOUSTON: Thank you.

10 MR. LOUNSBERRY: Dr. Houston, I don't like to  
11 disagree with my esteem colleague on the other side of the room.  
12 But I would say this, it's been my observation in my lifetime,  
13 and I've served on a good many school boards at different times,  
14 both on the state level and somewhat on the national area; it  
15 seems to me that when you try to expand beyond sixth grade  
16 you're getting a shorter span of attention and, certainly, a  
17 shorter impression period. Because I think kindergarten through  
18 sixth is the most effective time to get people thinking in  
19 this regard. And I think you're competing with a lot of other  
20 areas when you go beyond the sixth grade. That's just my  
21 observation.

22 DR. HOUSTON: Any other thoughts?

23 (No response.)

24 Okay. That covers our agenda. And before I  
25 adjourn, I want to thank all of you for coming and thank you for



1 your participation. I think this has been a very good meeting.  
2 We've had some good dialogue on some very complex issues.  
3 And I assure you that we will take into account all of the  
4 comments that you've made here today.

5 As soon as we receive a transcript we will make  
6 it available to each of you, and you will be sent a copy. And,  
7 of course, in the meantime, if you want to call me or if you  
8 have any questions, please feel free to do so.

9 I do plan to take that colloquy that ensued on the  
10 sodium matter and send it to Dr. Hayes and others over at the  
11 Food and Drug Administration, so they'll have an opportunity to  
12 read that. And I'll certainly be interested in discussing it  
13 with them further.

14 DR. WHELAN: Would you send us his comments?

15 DR. HOUSTON: Certainly.

16 MR. LOUNSBERRY: After they are revised.

17 DR. HOUSTON: I'll make it a point to. He is, of  
18 course, on the working group for food safety. And I'll make it  
19 a point when we see him next to chat with him about the dis-  
20 cussion and to see that he's made aware of it. He's very  
21 interested in it, and I'm sure he'll read it and be willing to  
22 discuss it with me. He may even want to write some of you and  
23 state his views further.

24 MR. LOUNSBERRY: If I might make one more comment.  
25 I want to commend you on taking this meeting out of the District



1 of Columbia. I would hope that it would be possible to do this  
2 again sometime.

3 DR. HOUSTON: I'd like to hear from you in that  
4 area. And if you feel strongly about it, you may want to drop  
5 a note to the Chairman, Mr. McMillan, and let him know your  
6 views on that. I'm sure he'd like to hear that.

7 MR. LOUNSBERRY: I'll try and make it a personal  
8 one.

9 DR. ALFIN-SLATER: How about Hawaii?

10 MR. LOUNSBERRY: I'd go for that.

11 DR. HOUSTON: Mr. McDade.

12 MR. MCDADE: I would like to commend you also for  
13 being willing to undertake a change like this. And I think the  
14 interest was evidenced by -- this is the first committee I've  
15 been to where we've all been here at one time. So I think  
16 everybody's attendance is the best vote you could have.

17 And then on behalf of everyone I've talked to,  
18 I certainly would like to go on record for thanking Rosemary  
19 and her group for the splendid hospitality. Everything was  
20 just great.

21 And the tour through the plant, I would hope would  
22 be an integral part of moving these out. So many of us learned  
23 so much in our trip through the plant yesterday. And I'll  
24 certainly extend an invitation to have you come to Salt Lake  
25 City when you can. I think there's probably some more exquisite



1 places you want to visit before then -- But I'm proud of Salt  
2 Lake City and would be very happy to have you there. We could  
3 show you a good time.

4 But I think visiting a plant meant an awful lot  
5 to all of us. And, again, the hospitality by Rosemary and  
6 then your willingness, Don, and your staff's, to undertake all  
7 the trials and tribulations of moving something like this out  
8 of town -- I think you really added a lot to this meeting. I  
9 certainly enjoyed it.

10 DR. HOUSTON: Thank you. (Applause.)

11 MR. LOUNSBERRY: Just one other observation in  
12 regard to attendance -- of course, Mr. Sebelius wasn't here,  
13 and for good reason, I guess, health reason. I appreciated a  
14 little longer notification of the meeting than the first one.  
15 I had other commitments and wasn't able to go the other time,  
16 that's the main reason.

17 DR. HOUSTON: We'll keep that in mind. The next  
18 one we do set up, we'll try to give you as much advance notice  
19 as possible.

20 DR. ALFIN-SLATER: Do you have any idea what month?

21 DR. HOUSTON: No. And I hesitate to say how long  
22 it will be. Obviously, we'll have to meet before the Department  
23 can publish standards. And if we have any emerging standards  
24 coming along, we will have to get the group together so that we  
25 can consult with you.





1 I would say this, there is one matter on the  
2 horizon that I think this Committee should be involved in.  
3 And that is the potential for changing our basic poultry  
4 inspection program. Antemortem and postmortem inspection  
5 program is now carried out on broilers, etc. We have received  
6 a report from Tuskegee Institute, which has been looking at,  
7 for the last year, the possibility of making predictions on the  
8 health of birds coming to slaughter, and basing those predictions  
9 on the data that is generated during the grow-out period.

10 Broilers ordinarily live for about 40 days, from  
11 the time they hatch until the time they're eviscerated. And  
12 with the vertical integration of the poultry industry, large  
13 amounts of data are generated in terms of feed consumption,  
14 feed efficiency, health records, etc.

15 My preliminary view of the Tuskegee report would  
16 indicated that there could flow from that report some major  
17 changes in our poultry inspection program as we now see it today,  
18 especially regarding broilers. And I wouldn't want to go any  
19 further than that. I would not want to say that I'm talking  
20 about turkeys or fowl or geese or other species.

21 But like continuous inspection that we  
22 talked about today, it will generate concern and a number  
23 of serious questions. And, of course, we're in a period of  
24 reform and we're taking a hard look at all of these inspection  
25



1 procedures that have been in place for many years. And this is  
2 just another part of our campaign at the Department of  
3 Agriculture and the Food Safety Inspection Service to look at  
4 all aspects of these programs to bring them in to conformity  
5 with today's best scientific knowledge.

6 So I would hope as we move in that direction,  
7 we would have the opportunity of looking at that report, which  
8 will be sent to you; and that, before we finalize any changes,  
9 you'll have the opportunity to consult with us on it. And  
10 I consider that, potentially, to be one of the major changes we  
11 have in the inspection program.

12 I want to make it abundantly clear at this point  
13 that I'm only talking about potential changes. But, certainly,  
14 that report opens up some areas for consideration on a scientific  
15 basis that we don't have right now.

16 So that's one area that we'll be looking at, as  
17 well as certain product standards and, perhaps, even the  
18 implementation of new programs, should some of this legislation  
19 be enacted.

20 But I would say that it would be at least six  
21 months before we have another meeting, at least. And probably  
22 between six and twelve months before we get together again.  
23 Dr. Burnette.

24 DR. BURNETTE: When you send the report from  
25 Tuskegee on predictive inspection, if there is such a thing; for



1 those of us that aren't in and don't have access to poultry  
2 processing, do you have some data on the Hoho inspection system  
3 and some of the other things which are items of discussion  
4 which we have not had anything on?

5 DR. HOUSTON: Certainly. I can see that you get  
6 all that material.

7 DR. BURNETTE: Thank you. I may also say that,  
8 for the record, I think Rhonda and Linda should be congratulated  
9 on the logistics support of this meeting.

10 DR. HOUSTON: I'm sure they appreciate that.

11 (Applause.)

12 Any other comments?

13 (No response.)

14 Thank you all for coming. The meeting is now  
15 adjourned.

16 (Whereupon, at the hour of 1:00 o'clock p.m., the  
17 public hearing in the above-entitled matter was adjourned.)

18 - - -

19

20

21

22

23

24

25



C E R T I F I C A T E

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

This is to certify that the attached proceedings  
before the U.S. DEPARTMENT OF AGRICULTURE in the matter of:

(Name of Proceedings): USDA ADVISORY COMMITTEE ON MEAT AND  
POULTRY (public hearing)

(Date of Proceedings): July 30, 1982

(Place of Proceedings): San Francisco, CA

where had as therein appears, and that this is the original  
transcript thereof for the files of the Department.

Sharon Eiltwein, CSR, RPR  
OFFICIAL REPORTER







R0000 471219



R0000 471219