NATIONAL ADVISORY COMMITTEE ON

MICROBIOLOGICAL CRITERIA FOR FOODS

(NACMCF)

Virtual Advisory Committee Meeting

held on

Tuesday, November 14th, 2023

via WebEx

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1	WHEREUPON: (10:03 A.M.)
2	- 000 -
3	DR. KRISTAL SOUTHERN: Good morning,
4	everyone. Welcome to the plenary meeting of the
5	National Advisory Committee on Microbiological
6	Criteria for Foods, commonly referred to as
7	NACMCF.
8	My name is Dr. Kristal Southern. I
9	work at the USDA Food Safety Inspection Service
10	where I serve as the Designated Federal Officer
11	for NACMCF and the Director of the National
12	Secretariat.
13	I recognize that we have 24 committee
14	members present which means quorum, and I now call
15	this meeting to order.
16	NACMCF provides impartial scientific
17	advice and recommendations to the Secretary of
18	Agriculture through the Undersecretary for Food
19	Safety and to the Secretary of Health and Human
20	Services.
21	The committee covers public health
22	issues relative to the safety and wholesomeness of

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1	the US food supply.
2	The committee also provides scientific
3	advice and recommendations to the Department of
4	Commerce and Defense.
5	The NACMCF has made important
6	contributions to a broad range of critical food
7	safety issues. For example, the previous
8	committee from the 2021 to 2023 term completed the
9	response to the USDA FSIS charge on enhancing
10	Salmonella control in poultry products.
11	The report responds to questions posed
12	by the Food Safety and Inspection Service
13	enhancing Salmonella control in poultry products
14	and was adopted in November 2022. In this report,
15	it included nine recommendations to USDA. It was
16	recently published in the Journal of Food
17	Protection, and it's also available online on the
18	FSIS NACMCF webpage.
19	This report from NACMCF is one of the
20	key activities to gather the data and information
21	necessary to support future action and move closer
22	to the national target of a 25 percent reduction
22	to the national target of a 25 percent reduction

Page 5 1 in foodborne Salmonella illnesses. 2 In addition, the 2021 to 2023 3 committee completed the response to the FDA charge 4 on Cyclospora cayetanensis in produce. The report 5 responds to questions posed by the Food and Drug 6 Administration. Cyclospora cayetanensis was 7 adopted on August 30, 2023. This report included 8 four recommendations to FDA. You can also find this report on the FSIS NACMCF webpage. 9 10 At today's meeting, we will introduce 11 the new NACMCF membership for the 2023 to 2025 12 term. 13 Additionally, FSIS will introduce a 14 new charge to the committee on genomics and the 15 Food and Drug Administration will reintroduce the 16 Cronobacter species in powdered infant formula 17 charge so that this committee can continue the 18 work started by the previous committee. 19 Before we dive in, I wanted to provide 20 a few housekeeping items to keep in mind as we 21 move forward. 22 First, please note that this morning

Page 6 1 plenary meeting is being recorded. FSIS will post 2 the recording and transcripts when they become 3 available on the FSIS website at 4 www.fsis.usda.gov. 5 This is a virtual meeting and with the 6 exception of our committee members and designated 7 speakers, your microphones are automatically muted 8 when you logged in, and you will not have the 9 ability to use your camera during the meeting. 10 A sign language interpreter will be 11 present for the duration of the meeting. Ιn 12 addition, closed captions can be enabled by 13 clicking the closed caption or CC bubble in the bottom left of your screen. 14 15 If during registration, you indicated 16 that you wish to provide oral comments and 17 confirmed your intent to do so via a follow-up 18 e-mail from the NACMCF secretary, I will call on 19 you during the respective comment period. The 20 event producer will provide additional 21 instructions when we reach that point in the 22 agenda.

Page 7 1 And lastly, the chat feature is 2 available for all attendees, and any comments made 3 in the chat will be shared with the committee 4 after today's meeting. Attendees may also submit 5 written comments according to the options and 6 directions outlined in the Federal Register Notice 7 announcing this meeting. These comments will also 8 be shared with the committee when they become 9 available. 10 I will now turn it over to the USDA 11 Undersecretary for Food Safety and NACMCF Chair, 12 Dr. Emilio Esteban for opening remarks, followed 13 by remarks from the Food and Drug Administration's 14 Acting Director of the Center for Food Safety and 15 Applied Nutrition and NACMCF Vice Chair, 16 Dr. Donald Prater. 17 Welcome, Dr. Esteban. 18 DR. EMILIO ESTEBAN: Thank you, 19 Kristal, and good morning to all of you. Α 20 special welcome to the standing committee members 21 and, of course, all the new members of this 22 committee. Welcome to this session of NACMCF.

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1	I want to thank you for sharing your
2	expertise to his with this body. We look
3	forward to hearing your recommendations. I can
4	tell you that the Secretary and myself value your
5	input tremendously and so, we hope that you can
6	help us advance food safety in the United States.
7	As you heard from Kristal, during this
8	session, we're going to reengage on discussions
9	with Cronobacter, which has been very important to
10	the United States and for the world. And so,
11	we're looking forward to the deliberations on
12	Cronobacter.
13	The other charge is one that is being
14	introduced and has to do with genomics, and I am
15	particularly interested in that one because when I
16	was in a previous role as chief scientist for the
17	agency, we introduced this technology into the
18	FSIS laboratory system, and we've been very
19	successful in implementing it operationally and we
20	are now asking you, our advisory committee, with
21	some guidance and input as to how we can best use
22	this new technology and information to control

Page 9 1 microbiological challenges that we have in our 2 food supply. We want to, of course, minimize any 3 public health risk. 4 I really look forward to the 5 discussion ahead and both the USDA and FDA rely on 6 you to provide us with the evidence-based 7 information to control our pathogens and prevent 8 illnesses. 9 Thank you again for being here today 10 and some of the members I've been working with for 11 a long time and some of the new members, I'm glad 12 to see you're here to provide input. Thank you 13 very much. 14 And now, I guess I will pass it on to 15 the co-chair, Don Prater. Don, the floor is 16 yours. 17 Well, thank you DR. DONALD PRATER: 18 very much, Emilio, and I just want to also add my 19 welcome to everyone. So, sorry that I'm not able 20 to use my video today, but certainly, it's great 21 to hear you all and want to be sure to welcome 22 everyone to the meeting.

Page 10 1 As most of you know, this committee 2 has provided us with science-based advice for 3 decades, and this support has been invaluable in 4 helping us to carry out our public health mission. 5 Some of you may also know that that we 6 have just welcomed our new Deputy Commissioner for 7 the Human Foods Program, Jim Jones, to FDA. So 8 he's very interested as well in following the work of this committee. 9 10 So I want to thank you all, all the 11 previous committee members for all the hard work 12 that you've done, all the new committee members 13 for the hard work that you will do. I recognize 14 that it takes a lot of your valuable time. But we 15 certainly appreciate it and it helps us greatly in 16 our food safety mission. 17 In addition, welcoming the new members 18 on the committee, I understand about half of the 19 current members are new at this point and so I 20 want to just recognize the fact that we have a 21 wealth of experience and a diversity of 22 perspectives, which will greatly help the

committee's work.

including today's meeting.

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well. 19 identify the cause of an outbreak or contamination 20 event, but we are increasingly using this

technology to drive our prevention efforts.

We're also pleased to get an update

7 important topics to discuss. So today -- later 8 today, we'll hear about the different charges, 9 including the whole genome sequencing charge to 10 rank foodborne microbial pathogens on risk and 11 better focus our resources to address those risks. 12 We recognize that FSIS leads this 13 charge, but this topic is very important to FDA as 14 15 Whole genome sequencing is one of the 16 most groundbreaking technologies that we have to 17 advance food safety. Not only are we using it 18 during our investigations to more precisely

I also want to take time to thank the

As Emilio mentioned, we have two

executive secretarial staff, who are so critical

and making sure that everything works smoothly,

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1	from the subcommittee that's been working on FDA's
2	charge regarding the prevalence of Cronobacter in
3	powdered infant formula, as well as other foods in
4	the environment. As you know, we turned to NACMCF
5	after a series of Cronobacter illnesses among
6	infants in the US, and we are already using the
7	information we received so far from the committee
8	and look forward to receiving additional
9	information on the questions that we posed. This
10	is critical to our ability to prevent future
11	illness.
12	So you'll hear more about these
13	charges later. But again, I just want to add my
14	welcome and thanks for your ongoing commitment and
15	dedication to food safety.
16	So let me turn back to Dr. Kristal
17	Southern.
18	DR. KRISTAL SOUTHERN: Thank you,
19	Doctors Esteban and Prater.
20	The NACMCF Executive Committee
21	consists of the Chairperson, Vice Chairperson, the
22	NACMCF Secretary and representatives from agencies

Page 13 1 with an interest in food safety, including USDA 2 FSIS, Food and Drug Administration, Centers for 3 Disease Control and Prevention, the Department of 4 Commerce and the Department of Defense Veterinary 5 Services. 6 The Executive Committee helps to 7 ensure that NACMCF is in compliance with the 8 Federal Advisory Committee Act regulations and 9 provides guidance, support, and assistance on 10 processes required by USDA and FSIS. 11 They also provide advice on membership 12 appointment and approve the final charges of the 13 committee. 14 You just heard from our Chair, 15 Dr. Emilio Esteban, and Vice Chair Dr. Donald 16 Prater. 17 I now want to recognize other members 18 of the NACMCF Executive Committee. 19 From the Food Safety and Inspection 20 Service, our liaison is Dr. Denise Eblen. Our 21 liaison from the Food and Drug Administration is 22 Dr. Eric Olson. Our liaison from the Department

Page 14 of Commerce is Dr. Jon Bell. Our liaison from the 1 2 Department of Defense is Colonel Alisa Wilma, and 3 our newest committee member is our liaison for the 4 Centers for Disease Control and Prevention, 5 Dr. Megin Nichols. 6 I also want to recognize two members 7 within the Secretariat from USDA FSIS, our 8 Director within -- one of our directors and within 9 the Office of Public Health Science, Dr. Evelyne 10 Mbandi and Deputy Director also within the Office of Public Health Science at FSIS, Dr. John Jarosh. 11 12 So, thank you all for your support and 13 leadership. 14 NACMCF members are appointed by the 15 Secretary of Agriculture through a rigorous 16 process that helps to ensure that membership is fairly balanced. Committee members are chosen 17 18 based on their expertise in microbiology, risk 19 assessment, public health, food science, and other 20 relevant disciplines in order to obtain the 21 scientific perspective, experience, and point of 22 view of all stakeholders. It is an honor to be

Page 15 1 appointed to the NACMCF. 2 The 2023 to 2025 NACMCF committee 3 consists of thirty individuals. This includes 4 twenty-four scientific experts representing 5 academia, industry, and state or local health 6 department, one individual affiliated with a 7 consumer organization to serve in a 8 representational capacity, and five federal 9 employees representing the agencies on the executive committee. 10 11 We're incredibly thankful to the 12 members that provide this scientific advice to our 13 federal agencies involved in food safety, and 14 we're now excited to introduce the members of our 15 2023 to 2025 committee. 16 I will now call on each member to 17 introduce themselves by stating their name, job 18 title, and affiliation. And we'll start with 19 Dr. Bledar Bisha. 20 DR. BLEDAR BISHA: Hello, everyone. 21 It's an honor to be here. My name is Bledar 22 Bisha. I am a food safety microbiologist and I

Page 16 1 serve as an associate professor and department 2 head at the Department of Animal Science 3 University of Wyoming, Laramie, Wyoming. I work 4 on emerging pathogens, ecology, and microbial 5 resistance and I also work on rapid microbial 6 diagnostics. Thank you. 7 DR. KRISTAL SOUTHERN: Thank you, Dr. Bisha. 8 9 Dr. Heather Carleton. She works with 10 the -- she's our representative from the Centers 11 for Disease Control. She is not at the meeting 12 today, but we want to recognize her. 13 We'll now move on to Dr. Anna Carlson. 14 DR. ANNA CARLSON: Hi. Good morning, 15 everyone. I'm Anna Carlson. I am a food safety 16 scientist with Cargill and prior to coming to 17 Cargill, I was a state foodborne disease rep for 18 the Nebraska State Health Department. 19 DR. KRISTAL SOUTHERN: Thank you, 20 Dr. Carlson. 21 Dr. Hayriye Cetin-Karaca. 22 DR. HAYRIYE CETIN-KARACA: Hi. This

Page 17 1 is Hayriye Cetin Karaca. I am the senior research 2 scientist for Smithfield Foods, and I'm very happy 3 to work with the committee. Thank you. 4 DR. KRISTAL SOUTHERN: Thank you, 5 Dr. Cetin-Karaca. 6 Dr. Ben Chapman. 7 DR. BEN CHAPMAN: Thank you so much 8 for the time to introduce myself and I'm really 9 excited to be on this committee. I'm Ben Chapman. 10 I'm a department head and food safety extension 11 specialist in the Department of Agricultural and 12 Human Sciences at North Carolina State University. 13 DR. KRISTAL SOUTHERN: Thank you, 14 Dr. Chapman. 15 We'll go to Dr. Vik Dutta. 16 DR. VIK DUTTA: Good morning, 17 I'm happy to be here. My name is Vik evervone. 18 Dutta. I am heading our Scientific Affairs 19 Department in bioMerieux, Inc. I've been with the 20 company with seven years. I'm a trained molecular 21 biologist. Anything related to microbiology 22 diagnostics, I have worked with in my previous

Page 18 1 life, and I've also trained as a veterinarian way 2 back when again. Again, I look forward to working 3 with you all and nice to meet you. 4 Thank you, DR. KRISTAL SOUTHERN: 5 Dr. Dutta. 6 Dr. Betty FENG. 7 DR. BETTY FENG: Good morning. My 8 name is Betty Feng. I'm an associate professor 9 and an extension specialist in Purdue University. 10 I'm a consumer safety scientist. Thank you. 11 DR. KRISTAL SOUTHERN: Thank you, 12 Dr. Feng. 13 Dr. Larry Figgs. I don't think he is 14 on. He comes to NACMCF from the Douglas County 15 Health Department in Nebraska. 16 DR. LARRY FIGGS: Yeah, Larry Figgs. 17 DR. KRISTAL SOUTHERN: Oh, you're 18 here. Okay. 19 DR. LARRY FIGGS: I'm from the Douglas 20 County Health Department up until November of this 21 I retired this past Friday. So, I'm no vear. 22 longer affiliated with the Douglas County Health

Page 19 1 Department. 2 DR. KRISTAL SOUTHERN: Thank you, 3 Dr. Figgs. 4 And we'll move on to Dr. David 5 Goldman. 6 DR. DAVID GOLDMAN: Good morning, 7 everyone. David Goldman here. I spent twenty 8 years in the federal government in food safety and 9 science and in FDA. I was involved in one way or 10 another in outbreak investigations that entire 11 time. I'm a medical epidemiologist, public health 12 physician, and I'm glad to see some familiar names and faces and I look forward to our work here. 13 14 Thanks. 15 DR. KRISTAL SOUTHERN: Thank you, 16 Dr. Goldman. 17 Dr. Michael Hansen. 18 DR. MICHAEL HANSEN: Yes. Hello, 19 everyone. My name is Michael Hansen. I'm a 20 senior scientist at Consumer Reports, where I've 21 worked for more than twenty-five years, and I work 22 on a range of food safety issues. Thank you.

Page 20 1 And I very much look forward to 2 working with this committee. 3 DR. KRISTAL SOUTHERN: Thank you, 4 Dr. Hansen. 5 And Dr. Arie Havelaar. 6 DR. ARIE HAVELAAR: Good morning, 7 everyone. My name is Arie Havelaar. I'm a 8 professional in food safety in the University of 9 Florida. I'm interested in epidemiology and risk 10 assessment of foodborne diseases and more 11 generally, diseases transmitted between animals 12 and humans. 13 For the large part of my career, I've 14 been working as a science policy interface in the 15 National Public Health Institute as a member of 16 the -- (indiscernible) -- with the World Health 17 Organization. So, I'm looking forward to an 18 extended experience now in the US system. Thank 19 you. 20 DR. KRISTAL SOUTHERN: Thank you. 21 Ms. Janell Kause. 22 MS. JANELL KAUSE: Good morning,

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1	everybody. I'm Jannell Kause. I'm the senior
2	advisor for Risk Assessment here at the Food
3	Safety and Inspection Service. I've been with the
4	agency for about twenty-five years working on
5	areas of microbial risk assessment work as well as
6	more recently incorporation of genomics into risk
7	assessment.
8	DR. KRISTAL SOUTHERN: Thank you.
9	Dr. Ramin Khaksar.
10	DR. RAMIN KHAKSAR: Good morning. I'm
11	Ramin Khaksar, Chief Scientific Officer at Clear
12	Labs, a biotech genomics company that provides
13	end-to-end solution from sample-to-data for
14	microbial sequencing application. Thank you,
15	everyone.
16	DR. KRISTAL SOUTHERN: Thank you.
17	Lieutenant Colonel Noel Kubat.
18	LIEUTENANT COLONEL NOEL KUBAT: Good
19	morning, everyone. My name is Noel Kubat. I am a
20	Lieutenant Colonel with the US Army Veterinary
21	Services. I spent fifteen years of my
22	professional career with the Army. I'm currently

Page 22 1 serving in a command position in Kentucky. 2 Pleasure to be here. 3 DR. KRISTAL SOUTHERN: Thank you. 4 And Dr. Elisabetta Lambertini. 5 DR. ELISABETTA LAMBERTINI: Good 6 morning. I'm Elisabetta Lambertini. I'm a senior 7 scientist in research in leading food safety with 8 the Global Alliance for improved nutrition. I am 9 an engineer by background and my work focuses on 10 risk analysis and data analytics in support of 11 risk management programs. Thank you. 12 DR. KRISTAL SOUTHERN: Thank you, 13 Dr. Lambertini. 14 Ms. Shannara Lynn. 15 MS. SHANNARA LYNN: I'm Shannara Lynn. 16 I'm the lead microbiologist for the National 17 Seafood Inspection Lab. I have been working for 18 ten years working with the microbiology group and 19 our genetics analysis. 20 DR. KRISTAL SOUTHERN: Thank you. 21 Dr. KatieRose McCullough. 22 DR. KATIEROSE MCCULLOUGH: Good

	Page 23
1	morning, everyone. KatieRose McCullough. I serve
2	as the Director of Science and Public Health for
3	the North American Meat Institute. We represent
4	packers and processors of beef, pork, lamb,
5	poultry, and items across the US. And I also
6	serve as the chief scientist for the Foundation
7	for Meat and Poultry Research and Education. We
8	fund a tremendous amount of food safety research,
9	and we're really looking forward to our work
10	together. Thanks.
11	DR. KRISTAL SOUTHERN: Thank you so
12	much, Dr. McCullough.
13	Dr. Indaue Mello.
14	DR. INDAUE MELLO: Good morning.
15	Indaue Mello, Director of Quality and Food Safety
16	for Newman's Own. My expertise is in managing and
17	mitigating microbial risks in manufacturing plants
18	as well as designing challenge studies and
19	evaluating formulas for safety and quality.
20	DR. KRISTAL SOUTHERN: Thank you,
21	Dr. Mello.
22	Dr. Eric Moorman is not with us this

Page 24 1 morning, but he works with Butterball. 2 So we'll move on to Dr. Abani Pradham. 3 DR. ABANI PRADHAM: Good morning, 4 everyone. I'm Abani Pradham, a professor and 5 director of graduate program in the Department of 6 Nutrition and Food Science in the Center for Food 7 Safety and Security Systems at the University of 8 Maryland in College Park. 9 My research interests are in the area 10 of risk assessment and applications of pathogens, 11 genomics, and machine learning. Glad to be here. 12 Thank you. 13 DR. KRISTAL SOUTHERN: Thank you, 14 Doctor Pradhan. 15 Mr. Shivrajsinh Rana. 16 MR. SHIVRAJSINH RANA: Hello and good 17 morning, everyone. I am Shivrajsinh Rana. I am 18 senior food safety manager at Reckitt overseeing and leading food safety programs and initiatives 19 20 covering the infant and childcare nutrition 21 business in America. I'm an experienced quality 22 and food safety professional, have supported

Page 25 1 multisite operations and coach and engage teams to 2 drive impactful business results. 3 I'm proud to be a member of this 4 committee, and I look forward to work with all of 5 you and support my work to the best of my ability. 6 Thank you. 7 DR. KRISTAL SOUTHERN: Thank you. 8 Dr. Marco Sanchez-Plata. 9 DR. MARCO SANCHEZ-PLATA: Good 10 morning, everyone and thank you for the 11 consideration to be on this committee. Marco Sanchez-Plata, associate professor on global food 12 13 security with the National Center for Industry 14 Excellence at Texas Tech University. 15 My research focuses on measuring the 16 levels of microbial indicators of pathogens and 17 the dynamics of change throughout the value chain 18 of different food commodities. I'm looking 19 forward to the types of discussion that NACMCF 20 conducts. Thanks. 21 Thank you very DR. KRISTAL SOUTHERN: 22 much.

Page 26 1 Dr. Kristin Schill. 2 DR. KRISTIN SCHILL: Good morning, 3 everyone. I'm Kristin Schill. I'm at the 4 University of Wisconsin Madison in the Food Research Institute and I'm a research assistant 5 6 professor. Nice to be here. 7 DR. KRISTAL SOUTHERN: Thank you. 8 Thank you, Dr. Schill. 9 And Dr. Nikki Shariat. 10 DR. NIKKI SHARIAT: Good morning, 11 everyone. I'm honored to serve on NACMCF this 12 vear. I'm Nikki Shariat. I'm an associate 13 professor in the Poultry Diagnostic and Research 14 Center in the College of Veterinary Medicine at 15 the University of Georgia, and my research 16 expertise is in Salmonella dynamics in food animal 17 production and the environment with a focus on 18 poultry. I'm looking forward to working with the 19 committee. Thank you. 20 DR. KRISTAL SOUTHERN: Thank you, 21 Dr. Shariat. 22 Dr. Abigail Snyder.

Page 27 1 DR. ABIGAIL SNYDER: Hi. I'm Abby 2 Snyder. I'm associate professor of Microbial Food 3 Safety at Cornell University, and I'm happy to be 4 here. 5 DR. KRISTAL SOUTHERN: Thank you. 6 Dr. Max Teplitski. 7 DR. MAX TEPLITSKI: Good morning. Max I'm the Chief Science Officer at the 8 Teplitski. 9 International Fresh Produce Association, and 10 before that, I was a professor at the University 11 of Florida and I had a career in the federal 12 government focusing on genetics and genomics on microorganisms, especially those involved in food 13 14 safety. Thank you and I'm excited to serve. 15 DR. KRISTAL SOUTHERN: Thank you. 16 Dr. Bing Wang. Oh, my apologies. 17 She's not -- she won't be joining us at this 18 session today. But she comes to us from the 19 University of Nebraska Lincoln. 20 And Dr. Benjamin Warren. 21 DR. BENJAMIN WARREN: Good morning, 22 everyone. I am Ben Warren, Senior Science Advisor

Page 28 1 for Food Safety and FDA FSAN Office of Food 2 Safety. Thank you. 3 DR. KRISTAL SOUTHERN: Thank you, 4 Dr. Warren. 5 And Dr. Randy Worobo is also not 6 present this morning. He comes to us from the --7 from Cornell University. 8 And our last but not least member, 9 Dr. Teshome Yehualaeshet is also not present 10 today, but he also -- he comes to us from Tuskegee 11 University. So thank you. 12 Thank you, everyone for your 13 willingness to serve on this this great committee. 14 We look forward to working with you over this 15 two-year term and supporting you as you complete 16 the work of the committee. 17 We will now proceed with a 18 presentation from Dr. Glenn Tillman, who will 19 introduce the emphasized charge on genomics. 20 Dr. Glenn Tillman has been with the 21 USDA Food Safety and Inspection Service for over 22 twenty years. He previously served as a

Page 29 1 microbiologist working on foodborne outbreak 2 analyses and characterizing -- a characterization 3 of bacterial pathogens. From 2016 until earlier 4 this year, he served as the Chief of the Eastern 5 Laboratory Microbiology Characterization Branch. 6 There, he led a staff focused on whole genome 7 sequencing and antimicrobial resistance. 8 In his current position as a 9 biological science information specialist, he 10 works to advance the use of genomics and other 11 issues of interest to the agency. 12 Glenn received his master's degree in 13 toxicology and PhD in infectious diseases from the 14 University of Georgia. 15 Now welcome Dr. Glenn Tillman. 16 And Silas, if you can turn over 17 presenting -- presenter rights to Glenn too, 18 please. Thank you. 19 Dr. GLENN TILLMAN: Okay, thank you, 20 Kristal, and now I have the presenter rights. So, 21 thank you very much, Silas. 22 So, as Kristal mentioned, I'm

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1 introducing the genomics charge to the NACMCF 2 committee today, and we're really excited about 3 this charge as we move forward. We think it will 4 be a really big, large boon for us as a regulatory 5 agency along with our partners within food safety 6 regulatory science. 7 So just briefly, this committee is 8 quite aware of what whole genome sequencing is. 9 This process of determining the DNA sequence of a 10 bacterial or an organism's genomes and includes 11 both individual genes, plasmids, and any type of 12 transmissible elements and there can be genetic

13 variation within the same species.

14 Why did we start using whole genome 15 sequencing in FSIS. So ourselves and FSIS along 16 with all of our public health and regulatory 17 agencies around the country to identify the whole 18 genome sequencing would be the preferred method 19 for characterizing foodborne pathogens. It was 20 able to give us a much greater detail than we were 21 able to see with previous technologies, including 22 pulsed field gel electrophoresis.

Page 31 1 In addition to looking at source 2 attribution in finding the cause of foodborne 3 outbreaks, we're able to learn more about the 4 pathogens that were causing illness. 5 We often work with our public health 6 and other regulatory agencies within us to promote 7 food safety using whole genome sequencing and 8 genomics. 9 We deployed whole genome sequencing 10 across this large network of federal, state, and 11 local public health laboratories starting in 12 around 2013 in our hands. These include -- the 13 collaborations within them include the Interagency 14 Collaboration on Genomics for Food and Feed 15 Safety, what we call Gen-FS. We have the National 16 Antimicrobial Resistance Monitoring System called 17 NARMS. We have the FDA Genome Tracker, and we 18 have the Centers for Disease Control and 19 Prevention, CDC PulseNet. 20 And as we speak about whole genome 21 sequencing at FSIS, we'd like to include a 22 timeline on how we came to it and what some of the

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1	major milestones were.
2	As I mentioned, around 2013 is when we
3	at FSIS first started getting engaged in whole
4	genome sequencing, along with the FDA and the CDC.
5	Our first actual sequences that we ran in our own
6	laboratories across FSIS was in 2014. We ran
7	sequencing for several outbreak investigations.
8	But by 2015, we began running WGS on Shiga toxin-producing E. coli and
9	Listeria monocytogenes in real time analyses and we uploaded our first sequence to NCBI around
10	2015.
11	By 2016, we began running one hundred
12	percent of our Salmonella and Campylobacter from
13	our sampling programs and uploading those in NCBI.
14	So you can see that our capacity and capability
15	went up very largely in a short amount of time.
16	By 2020, January specifically, we were
17	obtaining Salmonella serotypes directly from whole
18	genome sequencing data, and no longer utilizing
19	the phenotypic identification of Salmonella
20	serotypes.
21	And in 2023, we partnered with
22	industry to create what we call the Campylobacter

Page 33 1 allele code schemes, which supplement the ones 2 from the CDC PulseNet. 3 So as I mentioned, we continue to kind 4 of move forward and look for new avenues and 5 promoting whole genome sequencing for food safety. 6 So, across our work, and since FY14, 7 we've spent three distinct strategic plans at 8 FSIS. 9 Our first strategic plan got at how 10 can we implement whole genome sequencing, which we were successful on. 11 12 Our second strategic plan looked at 13 how can we upgrade our infrastructure and start to 14 apply whole genome sequencing. During that 15 timeframe, we got to a point where now have fourteen -- (indiscernible) -- across our three 16 17 FSIS Field Service Laboratories, and we're 18 sequencing around 15,000 bacterial isolates per 19 year and uploading this into NCBI. 20 So with our current strategic plan, 21 our goal is to look at how can we continue to use 22 WGS data analyses and build foundations for

Page 34 1 regulatory policies, which is what brings us here 2 today. 3 So, Kristal already touched on what 4 NACMCF is, and so it's a committee that we're 5 going to rely upon to get expert impartial 6 scientific advice. 7 The major entities, Kristal already 8 mentioned, we're one of those partners at FSIS 9 along with folks at the FDA, Centers for Disease 10 Control, Departments of Commerce, National Marine 11 Fisheries Service, and the Department of Defense 12 Veterinary Service Activities. 13 So today, we want to be able to 14 produce a charge for FSIS, and we centered around 15 several themes -- a theme, how can we use genomics 16 to rank pathogen subtypes by risk. 17 We acknowledge that not all foodborne 18 microbial pathogen subtypes inherently have the 19 same risk associated with illness and a patient 20 outcome. We're seeking advice on how to 21 strategically use genomic analyses, in addition to 22 any other current emerging technologies to help us

Page 35 1 identify and focus resources on more risky 2 pathogen subtypes. And we think that the 3 direction of the committee will help us in a 4 decision-making moving forward that can reduce 5 microbial pathogen subtypes of public health 6 significance. 7 In FSIS, we do work that aligns with 8 our strategic plan. So our strategic plan outcome 9 2.1 says improve food safety by incorporating 10 analysis of pathogen genomics with objective 2.12, 11 define and assess the risk of a pathogen based on 12 its genetic attributes, which can include 13 virulence factors. 14 So again, we want to be able to align 15 any future work we do with our strategic plan, and 16 we feel that this charge will help us do that. 17 So our charge to the NACMCF committee 18 consists of four overarching questions with 19 subparts within there. 20 So charge question one is getting at 21 the appropriate genomic and pathogen attributes. 22 So how can genomics be used to differentiate

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1	microbial pathogen subtypes by risk to public
2	health and food products regulated by FSIS?
3	So subpart one, what epidemiologic
4	criteria should be used to rank subtypes by risk
5	for each of the pathogens of concern to FSIS.
6	That's Salmonella, STEC or Shiga toxin-producing
7	E. coli, Listeria monocytogenes, and Campylobacter
8	including but not limited to outbreak size and
9	scope, link to sporadic illness, frequency of
10	illness, severity of illness, and patient outcome.
11	Subpart B, how can pathogen genomic
12	data be incorporated into microbial risk
13	assessments, in other words, hazard analysis,
14	hazard identification, exposure assessment, hazard
15	characterization, and risk characterization.
16	Subpart C, in addition to putative or
17	known virulence genes, what other genomic
18	attributes of pathogens of concern are associated
19	with a higher risk to public health that can
20	include antimicrobial resistance genes, plasmids
21	or genes leading to persistence such as heat
22	resistance and/or other tolerance attributes such
i	

Page 37 1 as metals, for example. 2 Charge question two looks at some of 3 the available and applicable tools and analyses 4 that are out in the public now. 5 So what types of validated 6 genomic-based approaches are currently used by 7 both international -- US and international 8 entities to support their food safety systems? 9 What tools and technologies are 10 deployed and have they been validated through an 11 accredited standard, including but not limited to 12 association of official agriculture chemists, 13 AOAC, or Clinical Laboratory Improvement 14 amendments or CLIA? 15 What analytical methods -- subpart B, 16 what analytical methods that integrate genomic 17 data and metadata, including but not limited to, 18 genomic-wide association, machine learning or 19 random forest, and artificial intelligence are 20 available for distinguishing strains based on 21 likelihood of causing illnesses giving exposure, 22 and does the committee recommend a particular

Page 38 1 approach among these available methods? 2 Subpart c, what genomic databases, 3 analytic criteria, and information-sharing 4 mechanisms are harmonized, both domestically and 5 internationally, and how can genomic data or 6 metadata currently publicly available and existing 7 databases be improved to be more informative and 8 meaningful in developing risk ranking models, 9 tools, or analyses? 10 Question three, and this gets it 11 knowledge gaps and research gaps that may exist 12 currently. So in other words, what research or 13 knowledge gaps should be addressed to fully 14 operationalize a genomic space approach? Do 15 current technologies or emerging technologies rely 16 on well-characterized genes to identify a riskier 17 pathogen subtype? If we need further research to 18 link genomic factors with virulence and/or severe 19 patient outcome, how would the committee recommend 20 focusing this research? 21 Subpart B, how can currently available 22 genomic information be leveraged to reduce time to

	Page 39
1	subtype determination in a high throughput
2	laboratory, and how can rapid diagnostic tools be
3	improved using genomic-based targets to identify
4	riskier pathogen subtypes?
5	Subpart C, can genomic-based models or
6	technologies be adapted to include emerging
7	pathogenic subtypes; reoccurring, emerging, or
8	persisting strains and plasmids of genes of public
9	health interest in regulated products?
10	For example, how could the approach
11	address the following: non-monocytogenes Listeria
12	species, Polyphyletic Salmonella serotypes
13	including but not limited to the virulent clade of
14	Salmonella Kentucky, Campylobacter species other
15	than coli/jejuni/lari, Shiga toxin-producing E.
16	coli, genes that are association with virulence or
17	multi-drug resistance, such as the MDR plasmid in
18	Salmonella Infantis, and in other emerging
19	pathogenic subtypes of the foodborne pathogens of
20	concern to FSIS.
21	And finally, Subpart d, how can
22	genomics be used for to differentiate vaccine

Page 40 1 strains used in food safety from wild-type 2 pathogenic bacterial strains that are circulating? 3 And our final question is on the 4 strategic vision of this approach. So, based on 5 the risk management questions and tools being 6 deployed, how might genomics inform FSIS and other 7 regulatory agencies along the farm to fork 8 continuum? 9 How might regulatory agencies adjust 10 sampling plans both exploratory and routine to 11 optimize the use of pathogen genomic data? 12 Subpart b, how might genomics be used 13 to inform future risk management strategies? 14 Subpart c, when implementing a risk 15 management strategy, what are the benefits and 16 considerations in using a genomic-based approach 17 to identify and rank pathogen subtypes by risk to 18 public health? 19 And subpart d, how might us regulatory 20 entities interpret pathogen genomic information to 21 support their agency regulatory actions? 22 So, in summary, we are seeking advice

Page 41 1 from NACMCF on how to identify and rank riskier 2 microbial pathogen subtypes, and just kind of 3 broadly speaking, the genomic storage is looking 4 for input on criteria for differentiating pathogen 5 subtypes by risk to public health. 6 The pros and cons of a genomic-based 7 approach. 8 Identify and overcome research or 9 knowledge gaps to operationalize the 10 genomics-based approach. 11 And finally, a strategic vision for 12 deploying the genomics-based approach to risk 13 rating of food pathogen subtypes. 14 And that was my final slide, Kristal. 15 DR. KRISTAL SOUTHERN: Thank you, 16 Dr. Tillman. So, thank you for presenting the 17 FSIS Genomics Charge. 18 The subcommittee meetings this week 19 will allow us the opportunity to hear from subject 20 matter experts and to dive a little deeper into 21 the charge questions. 22 So we're going to move forward to see

Page 42 1 if there are any questions or comments first from 2 executive committee members, excuse me, executive 3 committee or members of the committee on the FSIS 4 Genomics Charge that you would like to address at 5 this meeting? 6 If so, please go ahead and raise your 7 hand, and for committee members and executive 8 members, you all can unmute yourself when your 9 name is called. 10 So we'll now see if there are any 11 questions or comments from members of the public. 12 Silas, do we have any hands raised? 13 At this time, there are no HOST: 14 hands raised. As a brief reminder for attendees, 15 you can press the raise hand icon at the bottom of 16 your WebEx screen or press #2 on our phone lines 17 if you would like to make a comment. 18 DR. KRISTAL SOUTHERN: Okay. So, 19 seeing no comments from the executive committee or 20 the committee members, we will move to the public, 21 and as Silas mentioned, that you can raise your 22 hand if you'd like to provide a public comment.

	Page 43
1	We request all commenters to please introduce
2	yourself, by providing your name and affiliation
3	before providing your comment. Each person will
4	be provided up to three minutes to make their
5	comments and then the event producer will move on
6	to the next person in the queue.
7	Before we move to any hands that might
8	be raised, we do have one person that
9	preregistered to provide comments and sent
10	confirmation through a follow-up E-mail with the
11	NACMCF Secretariat. We will now move to welcome
12	Deborah McKenzie to provide comments.
13	HOST: Deborah, your line is unmuted.
14	you may go ahead.
15	DEBORAH MCKENZIE: My name is Deborah
16	McKenzie, and I am the Deputy Assistant Executive
17	Director and Chief Standards Officer at AOAC
18	International.
19	AOAC promotes methods development,
20	validation, and quality measurement in the
21	analytical sciences, and since 1884, AOAC is
22	renowned for its compendium of methods, the

Page 44 1 official methods of analysis of AOAC 2 International. 3 AOAC reviews and approves methods that 4 have undergone rigorous systematic scientific 5 scrutiny to ensure that they are highly credible 6 and defensible. 7 AOAC methods are referenced and used 8 by industry research organizations, test 9 laboratories, academic institutions, and certainly 10 regulatory agencies including FSIS and FDA. 11 In addition to culture-based 12 techniques, phenotypic, and genomic-based 13 technologies are increasingly used for pathogen 14 detection, identification, and characterization, 15 amplicon and meta genomic next generation 16 sequencing along with real-time PCR, qPCR, digital 17 PCR, and -- (indiscernible) -- are few of these 18 technologies, for which AOAC validates and 19 approves for fit for purpose methods. 20 With current and emerging pathogens, 21 there are needs for consensus standards, and 22 internationally recognized validated methods

Page 45 1 employing these technological advances. 2 AOAC develops standard method 3 performance requirements and guidance documents in 4 support of approved validation methods published 5 in the Official Methods of Analysis. 6 AOAC also certifies performance of 7 methods based on proprietary technologies, and its 8 performance tested methods program. 9 AOAC works with experts representing 10 academia, government, and industry sectors to 11 develop standards and methods to characterize, 12 identify, and detect foodborne pathogens such as 13 Cyclospora cayetanensis as well as for E. coli, 14 Listeria, Salmonella, STEC, Cronobacter, etcetera, 15 and to this end, AOAC has a strong portfolio of 16 standards and methods both compendial and 17 certified for detection, identification, and 18 characterization of these pathogens. 19 But furthermore, AOAC has since 2016, 20 moved into developing standards guidance in 21 statistical analysis, bacterial strain 22 verification, and standards for NGS applications

Page 46 1 that complement traditional and molecular 2 biological pathogen detection methods. 3 And so, while we look forward to 4 learning the new committee's charged on genomics, 5 we are aware of the strategic plans for the Food 6 Safety and Inspection Service to coordinate, 7 strengthen, and lead whole genome sequencing 8 efforts among federal and state partners. 9 It is here that we ask the advisory 10 committee to recognize the important contributions 11 of external partners in genomic and for food 12 safety and encourage collaboration in furtherance 13 of mutual goals. 14 Thank you very much again for your 15 time and consideration of these remarks. 16 DR. KRISTAL SOUTHERN: And thank you, 17 Deborah McKenzie. We also received your comments 18 through the online commenting for the meeting. So 19 those will be -- the written portion of your 20 comments will also be shared with the committee 21 members. Thank you. 22 Okay, and Silas, can you -- are there

	Page 47
1	other hands in the queue to provide comments
2	public comment on the genomics surcharge?
3	HOST: We do currently have one hand
4	up in the queue from Dr. Arie Havelaar.
5	DR. KRISTAL SOUTHERN: okay. that is
6	one of our members. Go ahead, Dr. Havelaar.
7	DR. ARIE HAVELAAR: Thank you,
8	Kristal. Sorry for missing the rhythm of the
9	meeting.
10	I'd like to ask the question to
11	Dr. Tillman about the scope of the charge. It's
12	written to basically look at the virulence and the
13	risk of an individual isolate. But when I think
14	beyond that isolate, in say, applying that in food
15	safety regulations, questions like how
16	representative is a single isolates for say, the
17	pathogen community and natural foods or taking
18	that one step further. What does that tell us
19	about the suitability of a particular niche, a
20	particular production site, prediction of a
21	particular production system for more or less
22	risky isolates to colonize that particular niche?

Page 48 1 Thinking about applying this in a regulatory 2 setting, you'll also need to think about the 3 broader ecology of the pathogens in the food 4 system. 5 So my question is, is that included in 6 the scope or do you want to limit our advice to 7 looking at single isolates? 8 DR. GLENN TILLMAN: Thank you, 9 That's a great question. Dr. Havelaar. The scope 10 is right now centered around the four pathogens of 11 concern to FSIS with Salmonella, Listeria, Campylobacter, and Shiga toxin-producing E. Coli. 12 13 But we do have several aspects of the charge which 14 get at metagenomics and deeper dives into the 15 essential microbial community of a food product 16 and looking at that. 17 So, as we talk within the -- look 18 further into the sub -- into the subcommittee, 19 look at this, I think that we can bring -- we can 20 possibly go that direction, and look -- and you 21 all can look in there and see if that needs to be 22 part of the advice back from the committee.

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1	DR. ARIE HAVELAAR: Yeah. It doesn't
2	necessarily have to be other technologies, but
3	also things like isolating more than one culture
4	from one sample when time series from samples. So
5	considering even only using WGS, there may be
6	information that we can look at diversity within
7	samples over time if that's available. Yes, it's
8	good to know that is part of the charge. Thank
9	you.
10	DR. GLENN TILLMAN: It is, and we have
11	we have some during the subcommittee
12	breakouts, we have some presentations based on
13	what our current scope is, what our laboratory
14	systems doing, what our agency looks at. So maybe
15	that'll provide some more information about where
16	we are and then within the questions, within the
17	charge, maybe some of that will provide maybe a
18	direction forward for you all to look at and
19	consider. So, thank you again.
20	DR. KRISTAL SOUTHERN: Thank you.
21	And are there other questions, other
22	hands in the queue? And if you're an executive

	Page 50
1	committee member or a committee member, you should
2	have the ability to unmute yourself if you have
3	any questions for Glenn at this time, and then
4	also, as he stated in the subcommittee meetings,
5	we'll be diving a lot deeper into the questions
6	and the subparts of the questions as well as have
7	some presentations from subject matter experts
8	where we'll go into a lot more detail. But
9	certainly, if there's a question that we can't
10	answer now, we'll certainly allow some time to do
11	SO.
12	Okay, Silas is saying there are no
13	more questions no more hands or questions in
14	the queue.
15	HOST: We do have one more hand up
16	from Dr. David Goldman.
17	DR. KRISTAL SOUTHERN: Okay, yes. And
18	Dr. Goldman is a committee member. Please go
19	ahead. You can unmute yourself, David. Thank
20	you.
21	DR. DAVID GOLDMAN: Yeah, thank you.
22	This is a really complex charge and

Page 51 1 it's very important, having served in two 2 regulatory agencies, it's really important to have 3 a regulatory regime that reflects current science. 4 So I think it's a very timely charge to NACMCF and 5 I'll look forward to the work of that 6 subcommittee. 7 I think just one thing comes to mind 8 as I'm thinking about this. I think we've become 9 very good and skilled and Glenn has led this at 10 FSIS in identifying the virulence attributes and 11 other attributes which cause known pathogens to be 12 pathogens. 13 I think the challenge from a 14 regulatory point of view will be when we identify 15 those same attributes in other bacteria that have 16 not yet been known to cause illness. And so, then 17 you're dealing with the potential to cause illness 18 and how do you regulate that? 19 So, I think the more we know about the 20 science behind the genomics of bacteria in 21 general, pathogens versus nonpathogens, I think 22 the better off we'll be in terms of developing a

Page 52 1 regulatory structure that's meaningful. Thank 2 you. 3 DR. KRISTAL SOUTHERN: Thank you. 4 Thank you, Dr. Goldman. 5 Okay. Are there any more hands or 6 questions or comments? 7 HOST: There are no more hands up at 8 this time. 9 DR. KRISTAL SOUTHERN: Okay, awesome. 10 Well, we're ahead of time, so if we have time at 11 the end of the agenda items, we can maybe circle 12 back and see if others have any questions or 13 comments that may come to mind between now and the 14 end of the meeting. 15 We'll go ahead and move on. Thank you 16 very much, Dr. Tillman, and also others for your 17 questions and comments. 18 We will now proceed with the 19 presentation from Dr. Benjamin Warren, who will 20 reintroduce the FDA charge on Cronobacter species 21 in Powdered Infant Formula. 22 Dr. Benjamin Warren is a Senior

Page 53 1 Science Advisor for food safety at the US Food and 2 Drug Administration, Center for Food Safety and 3 Applied Nutrition, Office of Food Safety. In this 4 role, Dr. Warren supports implementation of the 5 Preventive Controls for Human Foods Rule and 6 supports FDA activities to investigate and prevent 7 foodborne outbreaks. 8 Dr. Warren received his PhD in food 9 science, master's in food science and bachelor's 10 in food science, all from the University of 11 Florida. 12 In addition to serving on NACMCF, 13 Dr. Warren is the US delegate to the Codex 14 Committee on Food Hygiene. Welcome, Dr. Warren. 15 DR. BENJAMIN WARREN: Thank you, 16 Kristal. 17 DR. KRISTAL SOUTHERN: Yeah, you 18 should have consent or rights or they're coming. 19 DR. BENJAMIN WARREN: I do, thank you. 20 Okay, thank you, Crystal and good 21 morning, everybody. It is my pleasure to 22 reintroduce FDA's charge to NACMCF on Cronobacter

Page 54 1 in Powdered Infant Formula. 2 As Kristal mentioned, this charge was 3 originally presented to NACMCF a year ago and last 4 session, NACMCF committee did extensive work on 5 question one, and provided some interim response 6 to that question as well as some information that 7 was found on some of the others. 8 We're very excited for this session of 9 NACMCF to pick that work up and to carry this 10 charge to completion. So with that, I will go 11 through the charge. 12 Okay, briefly, Cronobacter species, 13 which were previously classified as Enterobacter 14 sakazakii, are motile, Gram-negative, rod-shaped 15 opportunistic pathogens of the family 16 Enterobacteriaceae, and these cause foodborne 17 illness primarily among infants and primarily, 18 those infants that are less than two months old, 19 or those that are immunocompromised, including 20 immunocompromised adults. 21 Cronobacter are considered widely 22 distributed, and they have been previously

	Page 55
1	isolated from a variety of environments, both
2	residential home environments, as well as the
3	environments of food manufacturing plants, from
4	variety of food, including cheese, meat, and
5	vegetable products, from animals and insects, for
6	example, rats and flies, as well as from a number
7	of clinical sources.
8	Although several species of
9	Cronobacter may be capable of causing disease in
10	humans, Cronobacter sakazakii is the species most
11	often associated with illness. Yet the lack of
12	historical mandatory national disease reporting
13	for Cronobacter has made this challenging to draw
14	conclusions.
15	FDA is very excited about the about
16	Cronobacter illnesses in infants becoming
17	reportable in the United States effective January
18	1st of 2024. So we're looking forward to getting
19	more information on this.
20	Cronobacter typically manifests in
21	infants with other issues such as those born
22	premature or with weakened immune systems,

Page 56 1 although term infants without any underlying 2 conditions have experienced invasive Cronobacter infections as well. 3 4 Infections in infants younger than 5 twelve months can be very deadly, with case 6 fatality rates reported from ten percent up to 7 eighty percent. 8 Cronobacter has been reported to 9 survive for as long as two years in low-moisture 10 foods such as powdered infant formula, and 11 contaminated powdered infant formula has been 12 previously associated with Cronobacter infections 13 among infants, with the organism being isolated 14 from powdered infant formula, rehydrated infant 15 formula, and utensils used to prepare and/or 16 administer the infant formula. 17 In 2021 and early 2022, a series of 18 Cronobacter illnesses among infants in the US was 19 associated with feeding powdered infant formula 20 that was produced by a certain manufacturer at a certain facility. FDA inspection of the suspected 21 22 manufacturing facility revealed the presence of

Page 57 1 Cronobacter in multiple locations within the 2 production environment, as well as other 3 conditions unsuitable for producing safe powdered 4 infant formula. 5 This led to the manufacturer 6 initiating a voluntary nationwide recall and the 7 temporary shutdown of that plant, which was a 8 major contributing factor to the infant formula 9 shortage experienced across the US in 2022. 10 More recently, FDA has issued warning 11 letters to three infant formula manufacturers as 12 part of the agency's ongoing commitment to enhance 13 regulatory oversight to help ensure that the 14 industry is producing infant formula under the 15 safest conditions possible. 16 During inspections of these firms, the 17 FDA issued inspectional observations and exercised 18 oversight of each firm as they initiated recalls 19 to remove product potentially contaminated with 20 Cronobacter from the marketplace. 21 These findings have raised questions 22 about the current control measures for Cronobacter

Page 58 1 in dry processing environments and the extent of 2 corrective actions when Cronobacter are found in 3 the processing environment and/or product samples. 4 FDA has developed a draft strategy to 5 prevent Cronobacter illnesses associated with 6 powdered infant formula and the most recent 7 version of this draft strategy can be found on 8 FDA's website. 9 The FDA recognizes the expertise 10 within NACMCF as uniquely positioned to provide 11 impartial scientific advice that may be used to 12 inform the further development of the strategy. 13 Therefore, FDA is seeking advice from 14 NACMCF on addressing knowledge gaps and key issues 15 related to Cronobacter in four specific areas, and 16 the following slides will present these four 17 charge questions. 18 The first charge question, what is the 19 current prevalence and level of Cronobacter 20 contamination in powdered infant formula in the US 21 market? What is known about Cronobacter in other 22 foods and the home environment and the frequency

Page 59 1 in which these foods and environmental sources 2 contribute to human infection? 3 As I mentioned at the start of this 4 presentation, the previous NACMCF committee 5 provided an interim report that focused on charge 6 question one, and we'll continue to update that 7 report. We're looking for the committee to 8 continue to update that report if new information 9 becomes available during this session of NACMCF. 10 Charge question two, what factors for 11 example, virulence factors, host factors, or dose 12 of exposure, place an infant at greater risk for 13 Cronobacter infection and serious adverse health 14 consequences or death? 15 Charge question three, what food 16 safety management practices, for example, facility 17 and equipment design, hygienic zoning and 18 packaging, preventive controls, or verification 19 activities should manufacturers of powdered infant 20 formula employ to further reduce the risk of 21 Cronobacter contamination of formula and or the 22 production environment?

	Page 60
1	Charge question four, given that
2	powdered infant formula is not sterile, how could
3	food safety messaging be improved for infant care
4	providers with emphasis on use of sterile
5	ready-to-use formulas for those infants at
6	greatest risk and safe infant formula preparation
7	and storage for infant formula in general?
8	In closing, FDA would like to thank
9	NACMCF and the members of the subcommittee in
10	advance for taking this charge and lending your
11	expertise toward preventing Cronobacter illnesses
12	associated with powdered infant formula. We look
13	forward to your response.
14	Kristal, I'll turn it back to you.
15	DR. KRISTAL SOUTHERN: Thank you.
16	Thank you, Dr. Warren for the presentation and to
17	reintroduce the Cronobacter charge.
18	Again, similar to statement about the
19	genomics charges is that we have the subcommittee
20	meetings this week for Cronobacter charge, and
21	that will also allow us an opportunity to hear
22	from subject matter experts and to dive a little

Page 61 1 deeper into these questions. 2 So we'll go ahead and start with if 3 there are any questions or comments from the 4 executive committee, or members of the NACMCF 5 committee on the FDA Cronobacter species in 6 Powdered Infant Formula Charge. 7 Again, if you are a committee member, 8 you can raise your hand, but you will also have 9 the opportunity to unmute yourself. 10 Silas, are there any hands raised? 11 HOST: It looks like there are no 12 hands raised at this time. 13 DR. KRISTAL SOUTHERN: Okay. Maybe 14 everybody is saving all of discussion for the 15 afternoon meeting. That's okay, too. 16 So without further ado, we'll go ahead 17 and move to public comment. As a reminder, we 18 request all commenters to please introduce 19 yourself by providing your name and affiliation 20 before providing comment. Each person will be 21 provided three minutes to make their comments and 22 then the event producer will move on to the next

Page 62 1 person in the queue. 2 We did not have any person 3 preregistered to provide Cronobacter, excuse me, 4 provide comments for the Cronobacter charge. So 5 we'll just open it up. If you would like to 6 provide a comment, please raise your hand, and 7 make us aware and we will note you -- we will call 8 on you to comment. 9 Okay, Silas, do we have any hands in 10 the queue for commenting on the Cronobacter 11 charge? 12 HOST: There are no hands in the queue 13 at this time. 14 DR. KRISTAL SOUTHERN: Okay. 15 So I will -- as you can see, we're 16 well ahead of schedule, which is a first, at least 17 as I've been the Designated Federal Officer for 18 I will open it up then for any public NACMCF. 19 comment on either the Genomics charge or the 20 Cronobacter charge. And then also, of course, if 21 there's any executive committee members or 22 committee members who wish to provide comment or

Page 63 1 question at this time, you may do so as well. And 2 we'll just give it a moment to see if anyone would 3 like to do that. 4 Okay, Silas, are there any hands? 5 HOST: There are no hands up at this 6 time. 7 **DR. KRISTAL SOUTHERN:** Okay. So certainly if you change your mind or over your 8 9 lunch, you have some other ideas or questions you 10 want us to -- or comments to consider, we have the 11 subcommittee meetings this afternoon, and you can 12 certainly use the chat to express different ideas 13 as well and that information will be shared with 14 the committee. 15 So we'll move on to closing remarks. 16 I want to thank our presenters, our 17 committee members, commenters, and members of the 18 audience for participating in today's meeting. Ι 19 also want to thank the NACMCF Executive Committee 20 and Secretariat for your support and leadership. 21 And a special thank you to our Advisory Committee 22 Specialist, Miss Chantel Williams, whose work

Page 64 1 behind the scenes helps to support the day-to-day 2 operations and help the committee member -- to 3 meet the committee member's needs. 4 So starting today at 1:00 p.m., we 5 will begin the subcommittee meetings to continue 6 discussions on the charges presented at today's 7 plenary. 8 You should have received in your 9 confirmation E-mail, I think this morning, Silas, 10 you can provide additional details on that, the 11 link to join the subcommittee meetings. 12 So, of course, we have two different 13 subcommittee meetings that will be running at the 14 same time concurrently, and those have different 15 links. So make sure that you're clicking on the 16 right link to access that particular meeting. 17 Upon joining the meeting, we will 18 start the meetings promptly at 1:00 and those 19 meetings will also be recorded and any 20 instructions or housekeeping -- housekeeping notes 21 for those particular meetings will be given at 22 time.

Page 65 1 Silas, would you like to provide additional instruction on -- to our attendees on 2 3 how to join the subcommittee meetings, and I think 4 we're going to put the link to the catalog page in 5 the chat. 6 HOST: Absolutely. As Kristal 7 mentioned, there are two separate links for our 8 Cronobacter and Genomics subcommittees this 9 afternoon. If you have any issues joining, please 10 go ahead and send a chat message to the event 11 producer and I will be happy to help you get into 12 those meetings. You will just have to click the 13 catalog link and join the meetings from either of 14 those links listed on the catalog. 15 DR. KRISTAL SOUTHERN: Thank you. And 16 do we have the link to the catalogs put in the chat for our attendees? 17 18 HOST: Yes, absolutely. I'm just 19 locating the catalog link now. 20 DR. KRISTAL SOUTHERN: Okay, perfect. 21 Thank you. 22 By catalog, just so everyone knows,

Page 66 it's just a one-pager that provides for you each 1 2 of the links for each day, which are different, 3 depending on the meeting, and it includes 4 different links for the agenda for the remainder 5 of the week. 6 So we'll get that in the chat, and 7 while that happens, I'm going to turn it over --8 turn it back over to Dr. Esteban for closing 9 remarks. 10 DR. EMILIO ESTEBAN: Thank you, 11 Kristal, and thank you for your efficiency this 12 morning. I'm very impressed with the speed with 13 which we moved. 14 I'm looking forward to getting input 15 from these very knowledgeable people. Like I said 16 before, both of these topics are critical for 17 public health, and I look forward to getting some 18 quidance from NACMCF as to how do we follow those 19 two things. 20 So I'm not going to delay this any 21 further. Thank you very much, and I hope to 22 engage with you in the afternoon session as much

Page 67 1 as I can. Thank you. 2 DR. KRISTAL SOUTHERN: Thank you, 3 Dr. Esteban. 4 So, we have completed the purpose of 5 today's NACMCF plenary meeting, and we will -- we 6 look forward to seeing each of you online at the 7 subcommittee meetings that will begin at 1 p.m. 8 Eastern this afternoon. 9 And Silas, are we still waiting on the 10 link for the catalog? I don't want to sign off. 11 HOST: It will stay open. I will post 12 it in chat. 13 DR. KRISTAL SOUTHERN: Okay. Will 14 that chat -- that chat won't be available once we 15 close out the meeting, correct? 16 HOST: Yes. I'm just going to keep 17 the meeting open after I find the link. Just give 18 me one quick moment. 19 DR. KRISTAL SOUTHERN: Okay. So, for 20 the purpose of at least at this meeting, we now 21 stand adjourned. But if you do need the link to 22 the catalog, just hang on, and that will show up

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in the chat, and we'll keep the meeting open a little longer so that everyone can have that information for the afternoon links for the afternoon meetings.

Also you should have received it upon registering, a confirmation E-mail this morning that also includes those links. So, just be mindful of that.

So with that we now stand adjourned. And yeah, thank you so much, everyone, and I look forward to our continuing discussions. Thank you.

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(WHEREUPON, AT 11:09 A.M., THE NATIONAL ADVISORY COMMITTEE MEETING ON MICROBIOLOGICAL CRITERIA FOR FOODS WAS CONCLUDED.)

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CERTIFICATE

I, Gary Euell, Professional Reporter, certify that I was authorized to and did report the foregoing proceedings and that the transcript is a true record. I further certify that I am not a relative, employee, attorney or counsel of any of the parties, nor am I a relative or employee of any of the parties' attorneys or counsel connected with the action, nor am I financially interested in the action.

WITNESS my hand and official seal this 26th day of November 2023.

ary Ciell GARY EUELI

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