Central Atlantic States Association of Food and Drug Officials

SUSQI NEWS

Susquehanna Conference *February 2008*

President's Message

As we begin a new year, I would like to thank everyone who helped make 2007 a successful year for the Susquehanna Conference! 2008 will be even better!

On **Thursday, February 7th**, we will host the quarterly meeting that was postponed last December due to one of the worst ice storms in central Pennsylvania's recent history. Come on out to the rescheduled program, it promises to be informative and exciting!

On **Thursday, March 27th** we will host Dr. Cathy Cutter of Penn State University, who will speak on "Control of Listeria monocytogenes in Retail Establishments". In addition, we are planning three quarterly training programs that are scheduled for July 24th, October 15 and 16th, and December 11th.

Stay tuned, it will be an exciting year!

Barbara Allerton
President
Susquehanna Conference

CASA MEMBERS--REMINDER

CASA Members, if you did not yet renew your membership, please go to the CASA web site at **casafdo.org** and click on the dues renewal notice, print a copy, and mail your payment as indicated. Also, continue to visit this site for information about the Annual Conference to be held from **May 6- 9, 2008 at the Holiday Inn in Saratoga Springs, New York**. The registration form and information should be posted in the near future as will a ballot for the election of a secretary (Sue Yeager of the Susquehanna Conference is a candidate) and for a representative to the AFDO Executive Board.

Please read the announcement about our CASA training program on February 7, 2008 at the Susquehanna Township Municipal Building. This is the meeting that was postponed from December. Hope to see you all there.

Thanks.
Ken Hohe

Pet Turtles: Cute But Contaminated with *Salmonella*

The little glassy-eyed creatures may look cute and harmless, but small turtles can make people very ill. Turtles commonly carry bacteria called *Salmonella* on their outer skin and shell surfaces. People can get *Salmonella* by coming in contact with turtles or their habitats.

Salmonella can cause a serious or even life-threatening infection in people, even though the bacteria do not make turtles sick. An example is the 2007 death of a four-week-old baby in Florida linked to *Salmonella* from a small turtle. The DNA of the *Salmonella* from the turtle matched that from the infant.

People infected with *Salmonella* may have diarrhea, fever, stomach pain, nausea, vomiting, and headache. Symptoms usually appear six to 72 hours after contact with the bacteria and last about two to seven days. Most people recover without treatment, but some get so sick that they need to be treated in a hospital.

Who Is at Risk?
Anyone can get *Salmonella* infection, but the risk is highest in infants, young children, elderly people, and
people with lowered natural resistance to infection due to pregnancy, cancer, HIV/AIDS, diabetes, and other diseases.

"All reptiles (turtles, lizards, snakes) and amphibians (frogs, salamanders), are commonly contaminated with *Salmonella*," says Joseph C. Paige, D.V.M., a Consumer Safety Officer in the Food and Drug Administration's Center for Veterinary Medicine. "But it is the small turtles that most often are put in contact with young children, where consequences of infection are likely to be severe." Because of this health risk, since 1975, FDA has banned the sale of small turtles with a shell less than four inches long.

"Young children are ingenious in constructing ways to infect themselves," says Paige. "They put the small turtles in their mouths or, more often, they touch the turtles or dangle their fingers in the turtle tank water and then put their hands in their mouths. Also, sometimes the tanks and reptile paraphernalia are cleaned in the kitchen sink, and food and eating utensils get cross-contaminated."

Surfaces such as countertops, tabletops, bare floors, and carpeting can also become contaminated with the bacteria if the turtle is allowed to roam on them. The bacteria may survive for a long period of time on these surfaces.

Infection From Turtles on the Rise
Infectious disease specialists estimate that banning small turtles prevents 100,000 *Salmonella* infections in children each year in the United States. But disturbingly, *Salmonella* infections have recently increased because of a resurgence in the sales of small turtles by some pet shops, flea markets, street vendors, and online stores.

From May 1, 2007, to January 18, 2008, the Centers for Disease Control and Prevention (CDC) received reports of *Salmonella* infection in 103 people—most of them children—in 33 states. Fortunately, there were no deaths. However, 24 people were so sick that they landed in the hospital. The investigation showed that most of the sick people were exposed to a turtle (touching, feeding, cleaning habitat, changing water) shortly before they got sick. Two teenaged girls who became ill had been swimming in an unchlorinated, in-ground pool where the family's pet turtles had also been allowed to swim.

Health officials found that the strain of *Salmonella* that caused the outbreak in people was the same strain found on many of the turtles (or their habitats) belonging to those who became ill. FDA and CDC are working together to determine the source of the turtles causing this outbreak and to stop the distribution of illegal pet turtles. The two government agencies, along with other government and public health partners, held "Salmonella Day" in Atlanta on Jan. 22, 2008, to strategize on how to decrease these preventable infections.

Advice for Consumers

- Don't buy small turtles for pets or as gifts.
- If your family is expecting a child, remove any pet turtle (or other reptile or amphibian) from the home before the infant arrives.
- Keep turtles out of homes with children under 5 years old, the elderly, or people with weakened immune systems.
- Do not allow turtles to roam freely through the house, especially in food preparation areas.
- Do not clean turtle tanks or other supplies in the kitchen sink. Use bleach to disinfect a tub or other place where turtle habitats are cleaned.
- Always wash hands thoroughly with soap and water after touching any turtles, their housing, or anything (for example, food) that comes in contact with a turtle or its housing.
- Be aware that *Salmonella* infection can be caused by contact with turtles in petting zoos, parks, child day care facilities, or other locations.
- Watch for symptoms of Salmonella infection, such as diarrhea, stomach pain, nausea, vomiting, fever, and headache. Call your doctor if you or your family have any of these symptoms.

For More Information
Reptiles and *Salmonella*
www.cdc.gov/Features/ReptilesSalmonella/

MMWR Weekly: Multistate Outbreak of Human *Salmonella* Infections Associated with Exposure to Turtles—United States, 2007-2008
www.cdc.gov/mmwr/preview/mmwrhtml/mm5703a3.htm

Human Health Hazards Associated with Turtles
Information for Regulators and Public Health Educators
www.fda.gov/cvm/turtlereg.htm

FDA Consumer: January 25, 2008

Food Poisoning Can Be Long-Term Problem

It's a dirty little secret of food poisoning: E. coli and certain other foodborne illnesses can sometimes trigger serious health problems months or years after patients survived that initial bout. Scientists only now are unraveling a legacy that has largely gone unnoticed.

What they've spotted so far is troubling. In interviews with The Associated Press, they described high blood pressure, kidney damage, even full kidney failure striking 10 to 20 years later in people who survived severe E. coli infection as children, arthritis after a bout of salmonella or shigella, and a mysterious paralysis that can attack people who just had mild symptoms of campylobacter.

"Folks often assume once you're over the acute illness, that's it, you're back to normal and that's the end of it," said Dr. Robert Tauxe of the Centers for Disease Control and Prevention. The long-term consequences are "an important but relatively poorly documented, poorly studied area of foodborne illness."

These late effects are believed to make up a very small fraction of the nation's 76 million annual food poisonings, although no one knows just how many people are at risk. A bigger question is what other illnesses have yet to be scientifically linked to food poisoning.

And with a rash of food recalls - including more than 30 million pounds of ground beef pulled off the market last year alone - these are questions are taking on new urgency.

"We're drastically underestimating the burden on society that foodborne illnesses represent," contends Donna Rosenbaum of the consumer advocacy group STOP, Safe Tables Our Priority.

Every week, her group hears from patients with health complaints that they suspect or have been told are related to food poisoning years earlier, like a woman who survived severe E. coli at 8 only to have her colon removed in her 20s. Or people who develop diabetes after food poisoning inflamed the pancreas. Or parents who wonder if a child's learning problems stem from food poisoning-caused dialysis as a toddler. .

STOP is beginning the first national registry of food-poisoning survivors with long-term health problems - people willing to share their medical histories with scientists in hopes of boosting much-needed research.

Consider Alyssa Chrobuck of Seattle, who at age 5 was hospitalized as part of the Jack-in-the-Box hamburger outbreak that 15 years ago this month made a deadly E. coli strain notorious. She's now a successful college student but ticks off a list of health problems unusual for a 20-year-old: High blood pressure, recurring hospitalizations for colon inflammation, a hiatal hernia, thyroid removal, endometriosis.

The CDC says foodborne illnesses cause 325,000 hospitalizations and 5,000 deaths a year. Among survivors, some long-term consequences are obvious from the outset. Some required kidney transplants. They may have scarred intestines that promise lasting digestive difficulty.

But when people appear to recover, it is difficult to prove that later problems really are a food-poisoning legacy and not some unfortunate coincidence. It may be that people prone to certain gastrointestinal conditions, for instance, also are genetically more vulnerable to germs that cause foodborne illness.

For now, some of the best evidence comes from the University of Utah, which has long tracked children with E. coli. About 10 percent of E. coli sufferers develop a life-threatening complication called hemolytic

uremic syndrome, or HUS, where their kidneys and other organs fail.

Ten to 20 years after they recover, between 30 percent and half of HUS survivors will have some kidney-caused problem, says Dr. Andrew Pavia, the university's pediatric infectious diseases chief. That includes high blood pressure caused by scarred kidneys, slowly failing kidneys, even end-stage kidney failure that requires dialysis.

Miserable as E. coli is, it doesn't seem to trigger long-term problems unless it started shutting down the kidneys the first time around, he says. "People with uncomplicated diarrhea, by and large we don't have evidence yet that they have complications."

Other proven long-term consequences:

About 1 in 1,000 sufferers of campylobacter, a diarrhea-causing infection spread by raw poultry, develop far more serious Guillain-Barre syndrome a month or so later. Their body attacks their nerves, causing paralysis that usually requires intensive care and a ventilator to breathe. About a third of the nation's Guillain-Barre cases have been linked to previous campylobacter, even if the diarrhea was very mild, and they typically suffer a more severe case than patients who never had food poisoning.

While they eventually recover, "We don't know a great deal about what happens to those people five years later. What does 'normal' look like?" Tauxe says.

A small number of people develop what's called reactive arthritis six months or longer after a bout of salmonella. It causes joint pain, eye inflammation, sometimes painful urination, and can lead to chronic arthritis. Certain strains of shigella and yersinia bacteria, far more common abroad than in the U.S., trigger this reactive arthritis, too, Tauxe says.

What about other patient complaints?

A variety of other organ problems might be triggered by HUS, that severe E. coli - because it causes blood clots all over the body that could leave a trail of damage, says Utah's Pavia. Among his hottest questions: HUS patients often suffer pancreatitis. Does that increase risk for diabetes later in life?

But proving a connection will require tracking a lot of patients who can provide very good medical records documenting their initial foodborne illness, he cautions.

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1/23/08; EDITOR's NOTE - Lauran Neergaard covers health and medical issues for The Associated Press in Washington.

SUSQUEHANNA CONFERENCE OF CASA QUARTERLY TRAINING MEETING

THURSDAY, February 7, 2008

SUSQUEHANNA TOWNSHIP BUILDING
1900 Linglestown Road
Harrisburg, PA 17110
717-909-9257

8:30 - REGISTRATION / WELCOME –
Barbara Allerton, Susquehanna Conference President

MOLD INVESTIGATION & LEAST-TOXIC CONTROL MEASURES
May Dooley, M.S., Certified Microbial Consultant
EnviroHealth Consulting, Inc.

PUBLIC HEALTH ISSUES RELATED TO ENVIRONMENTAL STUDIES
Dr. Mark White, Epidemiologist
Health Assessment Program, Pennsylvania Department of Health

METH LABS
Dr. Keith Burkhart, Past President
American College of Medical Toxicology

HEALTH ISSUES AND INCINERATORS
VAPOR INTRUSION AND INDOOR AIR QUALITY
Lora Siegman Werner, Senior Regional Representative
The Agency for Toxic Substances and Disease Registry
Centers for Disease Control, U.S. Health and Human Services

RISK COMMUNICATION, MEDIA AND FOOD OUTBREAKS
Richard McGarvey, former PADOH Press Officer

– 3:45 PM Evaluations / Q&A

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Pre-registration CASA Quarterly Training Meeting
Deadline: February 5, 2008 - to arrange for adequate seats and refreshments. Please register early. YOUR COOPERATION IS SINCERELY REQUESTED.

NAME _____ Agency/Firm_____
Address_____
Email _____Phone_____

PLEASE BRING A FRIEND OR ASSOCIATE WITH YOU!!

Registration fee: $5, payable at training, to: CASA, Susquehanna Conference

REGISTRATION CHOICES:
Email to: tveresink@easton-pa.gov or Fax to: 610-250-6607 or Mail to:
CASA, Susq Conference, c/o Easton Health Bureau, 1 S Third Street, Easton, PA 18042
Questions – contact Ted Veresink @ 610 250-6765

TRAVEL DIRECTIONS: Susquehanna Township Building, Harrisburg, PA

From Allentown: Take US 22 West towards Harrisburg which turns into I 78 West. Merge into 81 South toward Harrisburg. Then take US 322 West towards Lewistown and get off at the PA-39 exit of Linglestown/Rockville and take a right unto Linglestown Road. The township building is 1/4 mile on the left and turn into the parking lot and park.

>From the West Shore: Take 81 North towards Harrisburg and go onto the Harvey Taylor Bridge. At the Front Street exit; get off and take the Front Street South exit away from the river. Come to the stop sign and take a right which is Route 39 or Linglestown Road. The township building is approximately 3 miles ahead on the left and turn into the parking lot and park.

Animal Cloning and Food Safety

After years of detailed study and analysis, the Food and Drug Administration has concluded that meat and milk from clones of cattle, swine (pigs), and goats, and the offspring of clones from any species traditionally consumed as food, are as safe to eat as food from conventionally bred animals. This conclusion stems from an extensive study of animal cloning and related food safety, culminating in the release of three FDA documents in January 2008: a risk assessment, a risk management plan, and guidance for industry.

Researchers have been cloning livestock species since 1996, starting with the famous sheep named Dolly. When it became apparent in 2001 that cloning could become a commercial venture to help improve the quality of herds, FDA's Center for Veterinary Medicine (CVM) asked livestock producers to voluntarily keep food from clones and their offspring out of the food chain until CVM could further evaluate the issue.

FDA Studies Cloning
For more than five years, CVM scientists studied hundreds of published reports and other detailed information on clones of livestock animals to evaluate the safety of food from these animals. The resulting report, called a risk assessment, presents FDA's conclusions that

- cloning poses no unique risks to animal health, compared to the risks found with other reproduction methods, including natural mating
- the composition of food products from cattle, swine, and goat clones, or the offspring of any animal clones, is no different from that of conventionally bred animals
- because of the preceding two conclusions, there are no additional risks to people eating food from cattle, swine, and goat clones or the offspring of any animal clones traditionally consumed as food

FDA issued the risk assessment, the risk management plan, and guidance for industry in draft form for public comment in December 2006. Since that time, FDA has updated the risk assessment to reflect new scientific information that reinforces the food safety conclusions of the draft.

"Our additional review only serves to strengthen our conclusions on food safety," says Stephen F. Sundlof, D.V.M., Ph.D., Director of FDA's Center for Food Safety and Applied Nutrition. "Meat and milk from cow, pig, and goat clones, and the offspring of any animal clones, are as safe as food we eat every day."

FDA's concern about animal health prompted the agency to develop a risk management plan to decrease any risks to animals involved in cloning. FDA also issued guidance to clone producers and the livestock industry on using clones and their offspring for human food and animal feed.

What Is a Clone?

"Clones are genetic copies of an animal," says Larisa Rudenko, Ph.D., a Molecular Biologist and Senior Adviser for biotechnology in CVM. "They're similar to identical twins, but born at different times." Cloning can be thought of as an extension of the assisted reproductive technologies that livestock breeders have been using for centuries, such as artificial insemination, and more recently, embryo transfer and in vitro fertilization.

Animal cloning has been around for more than 20 years. Most cloning today uses a process called somatic cell nuclear transfer:

Scientists take an egg from a female animal (often from ovaries at the slaughterhouse) and remove the gene-containing nucleus.

The nucleus of a cell from an animal the breeder wishes to copy is added to the egg.

After other steps in the laboratory take place, the egg cell begins to form into an embryo.

The embryo is implanted in the uterus of a surrogate dam (female parent), which carries it to term and delivers it like her own offspring.

Clones may allow farmers to upgrade the quality of their herds by providing more copies of their best animals—those with naturally occurring desirable traits, such as resistance to disease, high milk production, or quality meat production. These animal clones are then used for conventional breeding, and their sexually reproduced offspring become the food-producing animals.

What Cloning Means to Consumers

FDA has concluded that cattle, swine, and goat clones, and the offspring of any animal clones traditionally consumed as food, are safe for human and animal consumption.

Food labels do not have to state that food is from animal clones or their offspring. FDA has found no science-based reason to require labels to distinguish between products from clones and products from conventionally produced animals.

The main use of clones is to produce breeding stock, not food. These animal clones—copies of the best animals in the herd—are then used for conventional breeding, and the sexually reproduced offspring of the animal clones become the food-producing animals.

Due to the lack of information on clone species other than cow, goat, and pig (for example, sheep), FDA recommends that other clone species do not enter the human food supply.

For More Information

www.FDA.gov/cvm/cloning.htm

FDA Consumer: January 15, 2008

PENNSYLVANIA'S NEW STANDARDS FOR MILK LABELS

Governor Edward G. Rendell recently announced that milk labels informing consumers that it was produced without rBST or artificial growth hormones can continue to be used. The Governor pointed out that Pennsylvania's new standards for milk labels will enhance consumer confidence.

The move will standardize labeling about artificial growth hormones given to dairy cows to bring labels in line with other states, like Vermont, and follow the 1994 Federal Food and Drug Administration (FDA) milk labeling guidelines.

"The public has a right to complete information about how the milk they buy is produced," said Governor Rendell. "Consumers can have confidence that the claims made by labels are accurate, and for the first time used in a uniform manner."

As a result of the new standards, dairy processors intending to use labels stating no rBST or artificial growth hormones will be required to certify that the milk they are marketing was not produced with rBST. If these companies wish to have that reflected on their labels they are required to vouch for their production methods so the Department of Agriculture can verify those claims.

"We recognized the importance of consumers having this information and we want to ensure consumer that all labels are accurate. I've directed the Department of Agriculture to increase the accountability of processors," said Governor Rendell. "And protect consumers by taking legal action against labels found to be inaccurate.

"Pennsylvania Department of Agriculture's charge is to ensure that food on the shelves is safe, and in the case of milk, labeled truthfully," said Agriculture Secretary Dennis Wolff. "These new standards give consumers the information they want about how their milk was produced."

The new standards apply to labeling about recombinant bovine somatotropin, or rBST, an artificial growth hormone. Only milk produced entirely without the use of artificial hormones can make that claim.

"If consumers prefer certain farming practices, such as not using rBST, there needs to be accountability on the part of the milk processor to show that the consumer is getting what they are paying for," said Wolff.

Statewide Food Safety Certification Training

The Penn State Cooperative Extension, Division of Continuing Education, has scheduled a number of Food Safety Certification training courses for February-July 2008. The locations, dates, contact persons, phone numbers and e-mail addresses are listed below.

Location	Dates	Contact Person	Phone Number	E-mail
Bethlehem	03-17, 24	Lois Killcoyne	610-746-1970	ljk10@psu.edu
Carlisle	05- 5, 12	Karen Karnes	717-948-6536	ksk1@psu.edu
Chambersburg	04- 14, 28	Judy Yohn	717-709-0778	jey114@psu.edu
" "	06-16, 23. 30	" "	" " "	" ' "
Gettysburg	03-24; 04-1, 7	Judy Yohn	717-709-0778	jey114@psu.edu
" "	07-14, 21	" "	" " "	" " "
Lancaster	03-12, 19	Debbie Rubin	717-299-7667	dpr5@psu.edu
" "	06-10, 17, 24	" "	" " "	" " "
" "	07-14, 21	" "	" " "	" " "
" "	04-08, 15	" "	" " "	" " "
" "	05-14, 21, 28	" "	" " "	" " "
Lebanon	03-25, 04-01	Karen Karnes	717-948-6536	ksk1@psu.edu
" "	05-20, 28; 06-04	" "	" : "	" " "
McConnellsburg	05-12, 28	Judy Yohn	717-709-0778	jey114@psu.edu
Middletown	03-24, 31	Karen Karnes	717-948-6536	ksk1@psu.edu
" "	06-23, 07-1	" "	" " "	" " "
Middletown (Chinese Language)	06-10, 11	" "	" " "	" " "
New Bloomfield	04-28; 05-05, 12	"	" " "	" " "
Schuylkill Haven	03-14, 15	David Holden	570-385-6221	deh18@psu.edu
York	02-25; 03-10	Annie Haines	717-771-4197	azh2@psu.edu

“ 04-3, 10, 17 “ “ “ “ “ “ “ “ “