

Principal Points

**The real risky business:
Leaping to legislation
without first assessing the risk**
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- Newly re-introduced legislation to ban farm antibiotics bases its case on the belief that using farm antibiotics puts the health of consumers at risk. However, such calls for action seldom, if ever, quantify that risk.
- When scientists actually calculate the risk that a specific antibiotic might increase the chances that a specific human disease will be more difficult to cure, in most cases they find the risk of continuing to use the antibiotic is tiny, if not zero.
- One such careful risk analysis, just released in late March, predicts continuing to use penicillin in poultry and pork production may contribute to one potential excess death every seven to eight years, using conservative assumptions. Adjust the base case values with more likely values, and the incidence drops to about one potential excess death every 25 years. Actual risks could be zero.
- Regulators and politicians should respect the scientific process of careful risk assessment and risk management.

For the Record, sponsored by a grant from ALPHARMA Inc., Animal Health, is designed to help unite the industry and provide a unified, rational message on behalf of producers whose freedom to use safe, effective, economical production methods is at stake. Working together, we can set the record straight on antibiotics.

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WHY CAN'T WE ALL AGREE?

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As a risk analyst specializing in food-borne illness, I often find myself asking, "How can conscientious public health officials and conscientious scientists so diametrically disagree on whether food animal use of antibiotics is causing risk of human disease?" I think there are three reasons.

First, I don't think the public health community understands it's a long, long way from the farm to the fork. And a number of interventions take place along the way to keep people from getting sick from food-borne pathogens—antibiotic-resistant or not.

Second, I think folks forget that if you argue for taking antibiotics away from the farm, then you should meet the burden to establish a specific causal pathway—linked all the way from the farm to the sick individual. Certainly, when you look at the microbiology of resistance, we know in a general sense that most bacteria when grown in the presence of an antibiotic will develop resistance mechanisms. But a lot of people have taken that understanding of microbes in the test tube and leapt to make national policy. The problem is the data don't support the pathway of cause and effect.

Consider Denmark, where growth-promoting antibiotics were removed from pig production. The World Health Organiza-

tion (WHO) studied the issue about four years after the ban, and it found little to no improvement in public health. In fact, WHO suggested the possibility of some *increased* risk to public health because of the ban.

The third and related reason I believe thoughtful parties can't come to consensus is that any such causal pathway is going to vary by which antibiotic and which bacteria you're looking at. So it really has to be addressed on a case-by-case basis—there are no shortcuts. When you do that, looking at the few risk assessments that have been published for specific drugs, you find they show an extremely low risk that people are going to have any extra illness because of farm antibiotic use.

The FDA has said we need to assess risk on a case-by-case basis, and drug sponsors have responded. A broad based ban like Europe's and the one proposed in Congress, aimed at entire classes of antibiotics based simply on the way they're used, short-circuits that scientific risk-assessment process. It's throwing out the baby with the bath water.

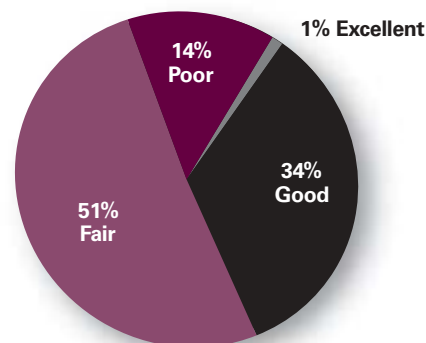


CAN WE RELY ON THE MEDIA TO REPORT IT RIGHT?

Lawmakers, too, read the media, (both House and Senate bills to ban farm antibiotics, for instance, quote the supermarket checkout magazine *Consumer Reports*). So it's worth asking: Do they get it right when it comes to reporting on health risks? Minnesota journalism professor Gary Schwitzer, PhD, reviews health journalism research, surveys health care journalists and interviews journalists for his **annual report** on the state of health reporting. His conclusion this year: Financial stress in the media has contributed to some "troubling" trends. They include "quick hit" stories, often based on summarized medical studies, which tend to sacrifice quality, fewer in-depth or complex stories,

especially about health policy, and more lifestyle and consumer health-related fluff stories.

Health reporters grade themselves:
"How would you rate the news media for its coverage of health care?"



Source: Schwitzer G. *The State Of Health Journalism In The U.S.* Menlo Park, Calif.: Henry J. Kaiser Foundation, 2009.