

CDC's Emerging Infections Program
CDC/USDA/FDA Foodborne Disease Active Surveillance Network
FoodNet Steering Committee Conference Call

Minutes

Thursday, August 9, 2007

A. Administrative

1. Attendance: CA, CO, CT, GA, MD, MN, NM, OR, TN, FDA, FSIS, CDC
2. New CDC staff were introduced:
 - i. Ashton Potter-FoodNet Technical Research Assistant
 - ii. Kavita Trivedi-EIS officer
3. Update on manuscripts
 - i. No new publications.
4. The 2007 Vision Meeting will be held in Denver, Colorado on March 6th and 7th.
 - i. The prospect of whether or not to hold a scientific day was raised. Options could include a full or half day meeting. If there are no pertinent topics that need to be discussed, this day could instead be used by working groups to hold face-to-face meetings. Contact Elaine Scallan or Mary Patrick with any questions or comments about the use of this day.
5. Please submit and ideas (title and short description) for abstracts for ICEID to Mary by September 7th. These will be reviewed at the September 13th Steering Call.

B. *Campylobacter* speciation

- i. Collette Fitzgerald is offering additional training to labs. Training can be tailored to needs of individual site.
- ii. In addition, Collette would like to implement a nationwide quality assurance program; this will be piloted in FoodNet sites. Planning will begin this fall.
- iii. Mary Patrick will circulate site-specific results for speciation; sites should provide the name of their lab contact for *Campylobacter*. Collette will follow up with specific information regarding training and the QC program.

C. Working Groups and Special Studies

1. HUS/STEC working group
 - i. The STEC lab survey is complete. NY will lead the analysis. Dina Hoefler will prepare an abstract for ICEID.
 - ii. The CDC IRB approved use of a \$10 gift card incentive for the genomics study.
2. Interventions working group
 - i. The Editorial Board of the FoodNet Newsletter will be meeting Monday, August 13th to discuss the content for the upcoming issue. The Editorial Board includes Elaine Scallan, Mary Patrick, Ashton Potter, Robert Tauxe, Julie Smith, Janice Adams-King, and Karen

Edge. If you would like to participate, please contact Mary Patrick.

3. Population survey

- i. The next working group call is August 30th at 3 pm. Discussions will focus on identifying types of analyses to be completed on new population survey data.
- ii. Included in today's packet is a current working group list. Please let Laura Moyer know of any addition and/or corrections.
- iii. CDC is currently waiting to receive the final, cleaned dataset which will include variable labels. Once it is received and reviewed, site-specific data sets will be distributed.

D. Special study tables

- i. Clinical outcomes
 1. Updated data is included in today's packet.
 2. A call for the analytical subcommittee will be scheduled next week upon the return of Ezra Barzilay.
- ii. *E. coli* Cohort Study
 1. Enrollment databases have been posted to FTP site. Please retrieve them.
 2. Liane will meet with CDC IT department to discuss the database.
- iii. Select *Salmonella* serotypes
 1. 113 cases and 533 controls have been enrolled.
 2. Kavita Trivedi will help coordinate the study at CDC.
 3. The next working group call is scheduled for August 29th

E. Proposals

1. Travel-related infections among *Salmonella* cases in FoodNet from 2004-2006 (Liane Ong).
 - i. The attribution WG will analyze these data and if suitable will submit as an ICEID abstract.
 - ii. There were no objections to this proposal.
2. Geographic Epidemiology of endemic campylobacteriosis in the United States (Agricola Odoi).
 - i. This will be a large population study of *Campylobacter* in FoodNet using GIS. It will serve as the basis of a PhD thesis.
 - ii. The investigators would like to look at the lowest level of data available (ie. zip code or census tract). Another option would be to look at a subset of detailed data from TN.
 - iii. MD has geocoded most of their FoodNet data and has done extensive geographic analysis. Discussions would need to be held in order to share data with the investigators.
 - iv. CT has done some preliminary GIS analysis; this could possibly be shared with investigators.
 - v. Identifiers are going to be an issue with the project so the investigators need to determine exactly which variables are of

interest. Some of the data needed isn't collected centrally at the CDC (it is held at sites).

- vi. Proposal to provide dataset (held at CDC) which would include information to county level. After results of preliminary analysis, can hold discussions with sites that are interested in making their data available at a more detailed (i.e. census tract) level. CDC can facilitate a working group call to discuss.
 - vii. There were no objections to this proposal.
3. HUS Surveillance: Use of Hospital Discharge Data to Supplement Case Finding (Liane Ong).
- i. Liane intends to expand upon her 2005 ICEID poster to include two additional years of data and additional analysis. Any interested co-authors should contact Liane.
 - ii. There were no objections to this proposal.
4. Antimotility and Antimicrobial Use in Persons with *E. coli* 0157 Infections in FoodNet Sites (Jennifer Nelson).
- i. Any interested co-authors should contact Elaine.
 - ii. There were no objections to this proposal.

F. Surveillance Data

- 1. Active
 - i. There have been increases in *Salmonella* all serotypes and in *Shigella* all species. There has been a decline in *Vibrio* all species.
 - ii. Questions for follow-up:
 - 1. Does "all others" category include unknown species?
 - 2. Which serotypes (e.g. I 4,5,12:i:-) are driving the increase in "all species"?
 - 3. What proportion of the increase in cases can be attributed to outbreaks?
- 2. Outbreak
 - i. Table 1 (1998-2006): there has been an increase in the percentage of known etiology of foodborne outbreaks with ≥ 2 persons and an increase in number of stool samples collected. Restaurant-associated illnesses have remained relatively stable.
 - ii. Table 2 (1998-2006): identification of known etiology from foodborne outbreaks with ≥ 10 people has improved.
- 3. HUS
 - i. There are 100 cases in the catchment area. All of which meet the updated case definition agreed upon by the STEC/HUS working group.

G. Closing

- 1. Elaine would like to remind everyone to think about the possibility of a scientific day at the Vision Meeting in March. Also, be sure to get abstract ideas for ICEID to Mary by September 7th.