

CODEX ALIMENTARIUS COMMISSION



Food and Agriculture
Organization of the
United Nations



World Health
Organization

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JOINT FAO/WHO FOOD STANDARDS PROGRAMME

CODEX ALIMENTARIUS COMMISSION

Forty-fourth Session

COMMENTS ON DRAFT STANDARDS AND RELATED TEXTS SUBMITTED BY THE 8TH SESSION OF THE AD HOC CODEX INTERGOVERNMENTAL TASK FORCE ON ANTIMICROBIAL RESISTANCE¹

BACKGROUND

This document compiles the comments on the draft standards submitted at Step 8 or Step 5/8 and the proposed draft standards submitted at Step 5 of the Procedure. The comments are those received through the Codex Online Commenting Systems (OCS), or via email by the time this document was issued. The comments are as shown in Appendix I.

OCS is an online tool that enables Codex Contact Points to submit comments on draft texts in a standardised way, thus providing more transparency and better management of comments on different Codex texts as requested through Circular Letters. Since its launching at CAC39 (2016), the OCS has been used for different Codex Committees.

EXPLANATORY NOTES ON APPENDIX I

The comments received are presented in a table format, with two columns as follows:

First column – Presents the comments with the rationale.

Second column – Presents the provider of the comments (name of country or observer)

¹ This document compiles comments submitted through OCS, or via email by the time this document was issued, in reply to CL 2021/73-AMR

Appendix I

Comments in regard to: (i) Revised Code of Practice to Contain and Minimize Foodborne Antimicrobial Resistance (CXC 61-2005) (At Step 8) and (ii) Guidelines on Integrated Monitoring and Surveillance of Foodborne Antimicrobial Resistance (At Step 5/8).

in reply to CL 2021/73-AMR

Comments of: Canada, Chile, China, Colombia, Costa Rica, Cuba, Egypt, India, Indonesia, Kenya, Norway, Thailand, Uruguay, USA

COMMENT	MEMBER / OBSERVER
<p>Canada would like to thank the Task Force and acknowledge the leadership of the Chairperson, Dr. Yong Ho Park, the chairs of the EWGs and the Codex Secretariat for their significant accomplishments to advance both the Code of practice and Guidelines to step 8 and step 5/8 respectively.</p> <p>Regarding the draft revised Code of Practice to Minimize and Contain Foodborne AMR, Canada would like to reiterate the concerns expressed during TFAMR8 and our reservation on the inclusion of footnote 5 to “veterinary medical use” (“Footnote 5: Also recognized as therapeutic use in some jurisdictions/organizations”). The inclusion of this footnote implies that the term “therapeutic use” is a synonym of “veterinary medical use”, i.e., it will be misunderstood as encompassing treatment, control and prevention, which deviates from the guidance in the current Code of Practice (CAC/RCP 61-2005) where “therapeutic use” is a synonym for treatment. Similarly, it would deviate from the OIE wording, which adopted the term “veterinary medical use” to refer to “treatment, control and prevention” instead of “therapeutic use” at its 86th Session in 2018. The inclusion of footnote 5 introduces confusion and inconsistencies and would favour continued non-responsible uses of medically important antimicrobials in animals. While Canada has registered a specific reservation on the inclusion of this footnote, we support the adoption of the draft revised Code of Practice to Minimize and Contain Antimicrobial Resistance at Step 8 at CAC 44.</p> <p>Regarding the proposed draft Guidelines on Integrated Monitoring and Surveillance of Foodborne Antimicrobial Resistance, Canada strongly supports its adoption at Step 5/8.</p>	<p>Canada</p>
<p>Chile thanks all the work done by TFAMR 8 on finding consensus on the development of the Revised version for the Code of Practice to Contain and Minimize Foodborne Antimicrobial Resistance and it is our strong believe that should be adopted at step 8 by the CAC.</p> <p>Chile supports the recommendation made by TFAMR 8 to adopt the Guidelines on Integrated Monitoring and Surveillance of Foodborne Antimicrobial Resistance at step 5/8. We consider this guidelines as a good start point for countries to developed their Monitoring and Surveillance Programs for foodborne AMR.</p>	<p>Chile</p>
<p>Antimicrobial resistance(AMR) is an important, complex and global issue, the Code of practice and the Guidelines are needed for combating AMR.</p> <p>As one of the co-chairs of the EWGs of the Code of practice and the Guidelines, China would like to thank all the contribution on these two documents.</p> <p>After long-term of discussion, negotiation, and compromise, the Code of practice and Guidelines are almost finished, China would like to support the final adoption of these two documents.</p>	<p>China</p>
<p>Estamos de acuerdo con el avance de los dos documentos, con la reserva respectiva, en la que participó Colombia</p>	<p>Colombia</p>
<p>Costa Rica would like to congratulate the eWG and the TFRAM presidents for the excellent work done. We would also like to express our support for the final adoption of the CoP</p>	<p>Costa Rica</p>
<p>Cuba agradece la oportunidad de responder la carta circular CL2021/73-AMR, y considera que el Código de prácticas y las Directrices están listas para su adoción final en la 44 CAC.</p>	<p>Cuba</p>

<p>Egypt commends the chair and co-chairs of the eWG for the good work undertaken in developing the mentioned Code of practice and the Guidelines.</p> <p>Egypt recommends adoption of the proposed code of practice at step (8) and guidelines at step (5/8).</p>	Egypt
<p>India supports the adoption of code of practice and guidelines.</p>	India
<p>The revised COP and guidelines of Foodborne Antimicrobial Resistance have been discussed thoroughly during TFAMR8, in which several amendments have been made to tailor the recommendations of Codex Member States. Therefore, Indonesia supports the adoption of the COP and GLIS of Foodborne Antimicrobial Resistance at step 8 and 5/8, respectively.</p>	Indonesia
<p>Kenya supports adoption of the guidelines for monitoring and surveillance of foodborne antimicrobial resistance at step at step 5/8</p>	Kenya
<p>Norway supports the adoption of the Draft revised Code of practice to minimize and contain foodborne antimicrobial resistance (CXC 61-2005) at step 8. We would like to progress this important issue and therefore we support the adoption at step 8 in spite of still having concerns. In our opinion all antimicrobial agents used for growth promotion should be phased out. Furthermore, we continue to have strong concerns on the inclusion of the definition on "Veterinary medical use and phytosanitary use" and particular the footnote 5. We will raise our concerns and reservation during CAC44.</p> <p>Norway supports the adoption of the Proposed draft Guidelines on integrated monitoring and surveillance of foodborne antimicrobial resistance at step 5/8. The draft Guideline has been thoroughly discussed at TFAMR05 and TFAMR06, at a physical working group in advance of TFAMR07 and since then there had been a number of opportunities to provide input to the Guidelines through written comments; the EWG, a webinar and a virtual meeting of the working group, where five sessions were dedicated to discussion of the Guidelines. Therefore, we should not re-open any discussion at CAC.</p>	Norway
<p>In principle Thailand has no objection on the advancement of the COP for adoption at step 8. However, Thailand made reservation on Principle 12 regarding the use of antimicrobial for growth promotion during the TFAMR7, CAC43 and TFAMR8. Therefore, we reiterate our concern and reservation on Principle 12.</p>	Thailand
<p>Uruguay agrees with the final adoption of the Code of Practice to Minimize and Contain Foodborne Antimicrobial Resistance (CXC 61-2005) and the Guidelines on integrated monitoring and surveillance of foodborne antimicrobial resistance.</p>	Uruguay
<p>The United States would like to provide the following comments in response to Circular Letter (CL2021/73-AMR) on the revised Code of Practice to Minimize and Contain Foodborne Antimicrobial Resistance (COP) (CXC 61-2005) at Step 8 and the Guidelines on Integrated Monitoring and Surveillance of Foodborne Antimicrobial Resistance at Step 5/8 following the conclusion of the 8th Session of the ad hoc Codex Intergovernmental Task Force on Antimicrobial Resistance (TFAMR8).</p> <p>The United States supports final adoption of the revised Code of Practice to Minimize and Contain Foodborne Antimicrobial Resistance as agreed and recommended by TFAMR8. The revised Code of Practice fulfills the mandate of the TFAMR as described in the original project document for the work, as approved by the 39th Session of the Codex Alimentarius Commission (CAC) in 2016, by broadening the scope of the COP and developing risk-based guidance on the management of foodborne antimicrobial resistance that addresses the entire food chain, in line with the mandate of Codex, that is scientifically supported and takes into account new developments, including the establishment of Lists of Critically Important Antimicrobials and the work of FAO, WHO and OIE in this area. It also addresses risk mitigation measures including all uses of antimicrobial agents along the food chain and provides updated information. In particular, the revised COP includes references to the lists of Critically Important Antimicrobials, advises against the use of antimicrobials as growth promoters, and provides guidance on the use of alternatives to antimicrobials.</p> <p>With regard to the Guidelines on Integrated Monitoring and Surveillance of Foodborne</p>	USA

Antimicrobial Resistance (GLIS), the United States supports final adoption at Step 5/8. Upon further consideration of the final GLIS document, the United States would like to provide two edits that we believe would further improve the document.

In Paragraph 20, the United States would recommend replacing "appropriateness" with "effectiveness." The word, "effectiveness" is more technically appropriate for evaluating control measures.

20. Information from monitoring and surveillance program(s) and available data from other sources, are important for risk assessment and may inform decisions on the effectiveness of control measures to minimize and contain foodborne AMR.

The United States would also recommend an edit in Paragraph 64. For technical accuracy, "humans" should be inserted before "and animal species and countries or regions," as human interpretive criteria as well as information from animal species are commonly used in national foodborne AMR surveillance systems.

64. Categorization of the isolate and reporting of results may be undertaken based on the epidemiological cut off values (ECOFFs) which should be reported as wild-type, non-wild type or by clinical breakpoint which should be reported according to the interpretive category. The use of ECOFFs as interpretive criteria will allow for optimum sensitivity for detection of acquired resistance, temporal analysis of trends and comparability between isolates from different origins. Clinical breakpoints may differ between humans and animal species and countries or regions. The interpretive criteria or category used should be included in the analysis and reporting of the data.

With adoption of both the revised COP and the new GLIS by CAC44, the TFAMR will have completed its work, as outlined in the Terms of Reference established for the Task Force by CAC39 (2016), within the established time frame. We would like to congratulate the TFAMR for this extraordinary effort in completing these two very important documents in the global fight against AMR in four sessions of the Task Force.