Proposal Number: 05-226

Proposal Subject

Vibrio vulnificus Risk Management Plan

Specific NSSP Guide Reference Model Ordinance Chapter II. Risk Assessment and Risk Management @ .04 Vibrio vulnificus Risk Management for Oysters

Text of Proposal/ Requested Action Modify Chapter II. @ .04 B. as follows:

B. The Source State's Vibrio vulnificus management plan shall define the administrative procedures and resources necessary to accomplish (i.e. establish and maintain) involvement by the state in a collective illness reduction and maintenance program. The goal of the Vibrio vulnificus Management Plan will be to reduce the rate of etiologically confirmed shellfish-borne Vibrio vulnificus septicemia illnesses reported collectively by California, Florida, Louisiana, Texas, from the consumption of commercially harvested raw or undercooked oysters by 40 percent, for years 2005 and 2006 (average) and by 60 percent for years 2007 and 2008 (average) from the average illness rate for the years 1995 -1999 of 0.306/million. The list of states (California, Florida, Louisiana, Texas) used to calculate rate reduction may be adjusted if after a thorough review, epidemiological and statistical data demonstrates that it would be appropriate. The illness rate shall be calculated as the number of illnesses per unit of population. The goal may be reevaluated prior to the year 2006 and adjusted in the event that new science, data, or information becomes available. States' compliance with the Plan will require States to maintain a minimum of 60% reduction in years subsequent to 2008. Determination and compliance after 2008 will be based on two-year averages beginning in 2009.

Public Health Significance:

The illness reduction goals required of states implementing the Vibrio vulnificus Risk Management Plan, as adopted by the ISSC in 2001, should be maintained in years following 2008.

Cost Information (if available):

Unavailable.

Action by 2005 Task Force II Recommended referral of Proposal 05-226 to appropriate committee as determined by the Conference Chairman.

Action by 2005 General Assembly Adopted recommendation of 2005 Task Force II.

Action by USFDA

Concurred with Conference action.