

PROVIDE RESTAURANT INSPECTION INFORMATION TO THE PUBLIC
September 15, 2000

Friday, September 15, 2000

Supervisor Donald Gage, Chairperson
Office of the Board of Supervisors
County of Santa Clara
70 West Hedding St., 10th Floor
San Jose, CA 95110

Dear Supervisor Gage,

Please allow me to introduce my organization. S.T.O.P. Safe Tables Our Priority is a national nonprofit consisting of victims of foodborne illness, families and friends and others concerned about the hazards of microbial pathogens in our food supply. We count among our members victims of many different types of organisms, including *Salmonella*, *E. coli* O157:H7, *Vibrio vulnificus*, *Listeria monocytogenes*, *Campylobacter*, and hepatitis A, by many different foods, including ground beef, poultry, alfalfa sprouts, unpasteurized juice, organic lettuce, and oysters. I am a Board Member for S.T.O.P. and a resident of Saratoga, California.

We are writing today to let you know that Supervisor Simitian's proposal to make available to the public the most basic restaurant inspection information is absolutely essential to ensuring safe food handling and preparation within the restaurant industry and particularly within Santa Clara County. Dining out has become an American past time. The latest available figures indicate that in 1993, consumers spent a record 46% of their food dollar on food eaten away from home, up from 39% in 1980. Nowhere is this more evident than in Silicon Valley, where families-on-the-run, working late and eating out are the norm.

S.T.O.P.'s mission is to prevent unnecessary suffering and death from foodborne illness. We want to be sure that you understand that when we discuss disease causing microorganisms, we are not just talking about a little diarrhea, a stomach ache or "the runs." The *E. coli* referred to in foodborne illness is not the kind that causes urinary tract infections. The organisms S.T.O.P. is concerned with are biohazards that require laboratories and physicians to take enteric precautions. The diseases they cause are a matter of life or death to at-risk groups: children, seniors, the immune impaired, pregnant women, and the elderly. Note that "immune impaired" is a loosely defined group that includes recovering cancer patients, and patients who unknowingly harbor liver disease such as hepatitis, as well as people who are taking antacids and antibiotics. This last group has often not been educated about its increased risk of complications due to infection.

As a government official, it is important for you to understand that many of the microbes that cause what are known as "foodborne" diseases are "recent developments", having evolved in the last twenty years by exchanging genetic material with other organisms to become unusually virulent. Many, but not all, reside normally in animal feces. Thus, foodborne illness is often the direct result of animal feces coming into contact with food. In restaurant settings, restaurant workers can also spread their own illnesses to food and thus create "foodborne illnesses" out of human fecal organisms and viruses such as hepatitis.

In all the at-risk groups and even some healthy adults, emerging organisms can cause diarrhea so terrific that the patient appears to be hemorrhaging from the rectum. *E. coli* O157:H7 and *Shigella* put a toxin into the bloodstream that shreds basic blood components. The level of pain is so high that adults and teenagers are often given morphine. In autopsies of *E. coli* victims that die, organs are described as having been liquefied. One organism, *Listeria monocytogenes*, infects a pregnant woman and the child she carries, resulting in second and third trimester stillbirth. If a baby is delivered alive with this infection, he or she can quickly develop meningitis and be left with brain damage. The suffering from these diseases is exacerbated by physicians' inability to provide a cure. Strains of *Salmonella* are now antibiotic resistant. Antibiotics mistakenly prescribed for a child with *E. coli* O157:H7 are now believed to actually hasten development of complications. Depending on the course of their illness, patients that appear to recover from the initial acute phase can develop long term, chronic complications. One Santa Clara County resident had to have her gall bladder removed after *Salmonella* "set up" in it. Children who appear to recover from complications of *E. coli* O157:H7 can develop full kidney failure before adulthood.

Santa Clara County disease reporting statistics indicate the following levels of some foodborne diseases in Santa Clara County:

	Jan- June/2000	1999	1998
Campylobacter	156	389	327
E. coli O157:H7	7	17	18
Listeria	4	5	3
Salmonella	127	289	280
Shigella	33	139	189

It is possible that not all of these were caused by food. Some may be spread person-to-person; others through water. Different percentages are caused by packaged foods, restaurants, and in-home handling, but are not presently tracked.

However, the Centers for Disease Control has indicated that actual rate of infection as high as *20 times* these reported rates of illness. Foodborne illness is underreported because many people choose to stay at home rather than go to a physician, physicians and laboratories do not always test for them, and even when the test is positive, sometimes it is not reported. Few if any obstetricians test for *Listeria* upon stillbirth. In the fall of 1996, when my daughter was transferred to Lucile Salter Packard Children's Hospital suffering from Hemolytic Uremic Syndrome, the doctor told us that we were not part of an outbreak because he wasn't seeing more cases. We were also told her disease did not need to be reported to authorities. In fact, HUS is required to be reported in California, and the organism in our daughter's stool was ultimately genetically linked to organisms in Odwalla brand apple juice. Thus, the levels of *identified* illnesses in the county are much more likely to track only the most severe cases of foodborne disease.

Standing between the most vulnerable in our society and this onslaught of pathogens are the most minimal food safety regulations, uneven and infrequent inspection and

lax enforcement. Retail facilities are required to keep foods at certain temperatures. Yet, in December, 1998, I personally found cases of eggs kept outside the refrigerated case at the Whole Foods on Stevens Creek in Cupertino. The workers told me this was a legitimate practice because they would put them back into the refrigerated case from time-to-time. Another state law now mandates proper cooking temperatures foods that are known to harbor pathogens regularly, particularly meat and eggs, are required to be cooked to a specific temperature, thereby killing pathogens.

We also have cross-contamination laws designed to keep germs like *E. coli* and *Salmonella*, from being spread from a food, like hamburger or poultry, that is supposed to be served cooked to a food that would traditionally be consumed raw, such as watermelon or lettuce. In July of this year, inappropriate cross contamination between meat and fruit and vegetables at a salad bar is believed to have infected more than 60 people at two Sizzlers in Wisconsin, killing a three year-old. This restaurant had suffered repeated temperature violations within months of the outbreak. Two years earlier, the restaurant had also received a warning letter threatening citation if the violations were not corrected. The San Jose Mercury News has reported that Santa Clara County has not revoked a restaurant permit since 1993.

Due to the very real threat to their health, all consumers, but particularly at-risk consumers, need to know the trackrecords of the establishments they frequent. Restaurants and retail establishments that repeatedly fail or have flawed inspections have demonstrated an inability to adhere to these most basic sanitation laws. They also circumvent the expense in education, training and cleaning of a law-abiding retailer, enabling them to compete on an uneven playing field against law-abiding retailers while their customers pay the price.

S.T.O.P. Safe Tables Our Priority strongly supports Supervisor Simitian's proposal for publishing restaurant inspection information and providing grades for restaurants. We believe that it needs to go even further. We strongly believe that grading placards should be mandatory, and it is imperative that the same system be applied to grocery stores and other retail storefronts like juicebars. Currently, the same Cupertino Whole Foods that had unrefrigerated eggs in 1998 provides school lunches to private schools in Santa Clara county. In the last four years, school lunch programs have caused multiple outbreaks in the United States, including one infecting thousands of children with hepatitis A through strawberries in Minnesota in 1997; one attributed to *E. coli* O157:H7 in taco meat in the state of Washington in 1998, and one under investigation in Washington, DC just last week. Needless to say, schools need easily accessible inspection information to evaluate the quality of their school lunch suppliers. Inspection information about large warehouse retailers like Costco and small storefronts such as juicebars must be made available to the public as well.

At present, Santa Clara County consumers have no choice, no way to distinguish between restaurants that take food safety seriously and those that are uncommitted reducing the spread of lifethreatening disease. Supervisor Simitian's proposal would give consumers the power to make an informed choice to support facilities that take appropriate (and *required*) steps to protect the public's health. This proposal would reward conscientious restauranteurs and provide incentives to encourage the laggards to comply. Your vote on Tuesday, supporting Supervisor Simitian's

proposal, enables the Supervisory Board to literally save many lives, but particularly the lives of children, before it is too late. We look forward to passage of this measure.

Sincerely,

Laurie Girard

S.T.O.P. Board Member