The European Union would like to share its views on the draft MRLs for rBST due for consideration by the 38th CAC in July 2015.

The EU recalls that, at the request of the 35th session of the CAC, JECFA 78 re-evaluated rBST. This re-evaluation looked at the safety of the substance in terms of a number of factors, including concerns linked to Antimicrobial Resistance (AMR). These AMR concerns were specifically introduced into the request to JECFA at CAC 35 due to the increasing health threat posed by growing AMR.

The EU appreciates the work done by JECFA in its re-evaluation. While it appears from JECFA's conclusions that there was sufficient data to make an informed assessment in relation to the safety of rBST residues, this does not seem to be the case for AMR. There was insufficient data to fully explore the links between the use of rBST and the incidence of AMR. The risk of mastitis in animals, arising from the increased milk yield brought about by the use of rBST, and the consequent need to use antimicrobials to treat such infection, is not a matter that can be ignored, even if the link is an indirect one.

Both the issue of residues in food and AMR fall firmly within the Codex mandate. While JECFA appears to have sufficiently addressed concerns related to rBST residues in food, this is not the case with the AMR aspects. Simply put, while the conclusions relating to residues in food can be supported, those related to AMR remain insufficiently explored and thus, concerns related to AMR remain outstanding. Codex clearly has further work to do before a decision can be taken.

AMR is a serious issue which needs to be tackled with urgency. This can been seen from recent global developments, including within the parent organisations of Codex: the FAO and WHO, where two far-reaching resolutions and a Global Action Plan have been adopted. These resolutions call for united and determined action to be taken to stem the threat of antimicrobial resistance. In particular, emphasis is placed on the One Health approach which calls for action in both the human and veterinary fields. These resolutions are addressed to, and have been supported by, the very same countries, all of whom are Members of Codex. Under the CAC's agenda this week, we are again reminded of the importance of these
undertakings under Item 9(a) where clear recommendations are made by WHO and FAO to Codex to take action.¹

The EU would like to draw attention to the fact that the use of rBST also has a negative impact on animal health and welfare. It is for these reasons that the use of rBST is banned in the EU, as well as many other countries. The EU also has a longstanding policy of not allowing the use of veterinary drugs in the absence of a therapeutic purpose i.e. for growth promotion. rBST is used solely for increasing the milk yield in dairy cows without any therapeutic indications.

In conclusion, the EU feels very strongly that it would be unwise to proceed with setting an international standard for a substance where further knowledge is required in order to rule out concerns related to AMR. Indeed Codex - as the leading, international standard-setting body for food safety - should be prudent in its approach. A standard for rBST also does not appear necessary for the purpose of ensuring safe, international trade given that rBST has been on the market and in use by 21 countries worldwide for a number of years.

For these reasons, the EU remains opposed to the adoption of an international standard for rBST at this stage.

The adoption of decisions on the basis of consensus is a core value of Codex. The EU is fully committed to this principle and trusts that a way forward to achieve consensus will be found.

¹ CX/CAC 15/38/16 Add. 1.