





Meet the AAFES Food & Drug Safety/Defense Team:


 LTC Boris Brglez arrived at HQ AAFES in May 2021 replacing LTC Michael Hansen as the Headquarters Staff Veterinarian.

 LTC Jasmine Dede joined the HQ team the summer of 2020 as first ever AAFES HealthCare Services Officer.

 MAJ Camille Effler joined AAFES in August 2021 and serves as the Europe/CENTCOM Region Staff Veterinarian

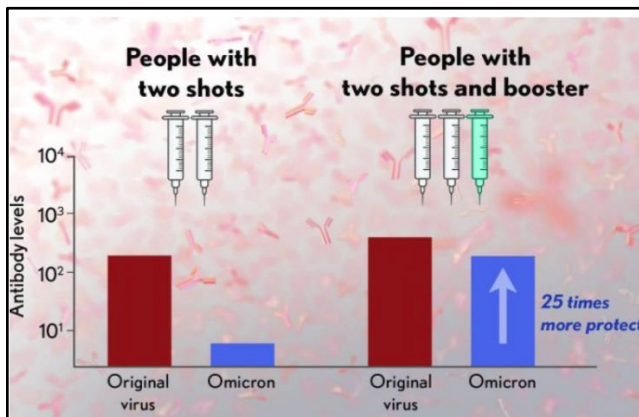
 CW3(P) Leanna Lester joined AAFES in the summer of 2020 as the AAFES Pacific Staff Food Safety Officer

 SMSgt Sonja Berry is the Air Force Public Health Senior Enlisted Advisor who joined HQ AAFES in August 2019 and serves as the Food and Drug Safety/Defense assistant director.

 Ms. Dorsi Cooper is our quality assurance specialist and manages the food and drug recall program.

Do I Need a COVID-19 Booster vaccination?

Unfortunately, despite developing successful COVID-19 vaccines, the variant strains of the coronavirus continue to prevent us from enjoying a mask free workplace. Breakthrough cases are still occurring and generally have minor or mild symptoms. The CDC and other health agencies are urging everyone to get a booster vaccine to increase immunity. The data is preliminary but suggests that getting a booster will help protect people already vaccinated from breakthrough or possible severe infections with the Omicron during the winter months.



<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html>
<https://www.precisionvaccinations.com/2021/12/19/mrna-boosters-may-protect-people-omicron>

Fraudulent COVID-19 Dietary Supplements:

Products that claim enhanced abilities to prevent COVID 19 have become more prevalent in the retail industry as the pandemic rages on. This is particularly true within the Dietary Supplement industry where consumers are constantly looking for ways to improve their health and also boost their immune system to fight such ailments.



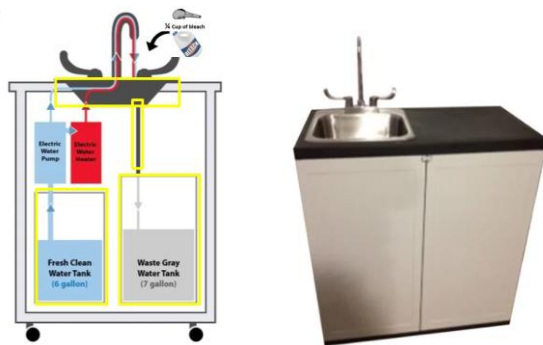
The National Institutes of Health (NIH) Office of Dietary Supplements (ODS) has stated that there is insufficient data to support recommendations for/against the use of any vitamin, mineral, herb or other botanical, fatty acid, or other dietary supplement ingredient to prevent or treat COVID-19. Additionally, the FDA Dietary Supplement Health and Education Act of 1994, commonly referred to as “the DSHEA,” prohibits Diet Supplement manufacturers from making statements on the product labels that claim the ability to diagnose, mitigate, treat, cure, or prevent a specific disease or class of diseases. The FDA does not preapprove diet supplement before they go to market, but they continuously monitor and look into products based on labeling concerns and will issue warning letters to manufacturers if such claims are exist.

Questions on how the Exchange handles such products may come up at the local level, so it’s important that SBMS and GMs are aware that the Exchange has a proactive program. It starts with the Quality Assurance department monitoring the FDA and DOD ALFOODACT notification sites as well as other sites for various consumable and product alerts, they will then send out a notification to the appropriate Exchange buyer with info on the recall and the required disposition. The Exchange Nutrition Center concessionaires are also required (by contract) to have a comparable quality assurance program in place and are also required to monitor product composition to ensure they are compliant with the DOD prohibited ingredient list. Local concerns with diet supplements and adverse reactions should be brought to the attention of the HQ Exchange Public Health Office, Contracting Officer and Program Manager, so that immediate action can be taken if needed.

The following is a list of websites that are great resources for information on the current concern with Fraudulent COVID 19 claims on Diet Supplements:

<https://www.fda.gov/consumers/health-fraud-scams/fraudulent-coronavirus-disease-2019-covid-19-products>
<https://ods.od.nih.gov/factsheets/COVID19-HealthProfessional/>
<https://www.consumerreports.org/dietary-supplements/beware-dietary-supplements-marketed-online-a6110635120/>

Not All Sinks Are Created Equal



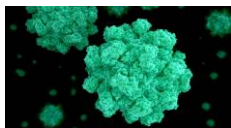
Did you know that not all handwashing sinks are connected to plumbing? Various AAFES Quick Service Restaurants (commonly some Hunts Brothers) and food trucks require food employees to manage and disinfect both clean and wastewater tanks. See below Exchange Website link for detailed instructions for disinfecting portable handwashing sinks.

<http://h2.aafes.com/Documents/Home.aspx> [Portable Hand Washing Sink Disinfection Procedures](#)

In Other News: What is this stomach bug?

Food Safety Myths and Facts:

Myth: "Norovirus is a cruise ship phenomenon."



Fact: Norovirus is second to the common cold in reported illnesses. Worldwide, about one out of every five cases of acute gastroenteritis (inflammation of the stomach or intestines) that leads to diarrhea and vomiting is caused by norovirus.

Transmission of norovirus occurs primarily through the fecal-oral route, including direct person-to-person contact and indirect transmission through contaminated food, water, or environmental surfaces.

Food handler contact with raw or other RTE foods is the most common scenario resulting in foodborne norovirus outbreaks. Norovirus contamination of produce and shellfish can also occur during production. Noroviruses are highly contagious, and it is thought that an inoculum of as few as 18 viral particles may be sufficient to infect an individual. Noroviruses are environmentally stable, able to survive both freezing and heating (although not thorough cooking), are resistant to many common chemical disinfectants, and can persist on surfaces for up to 2 weeks. Proper hand hygiene and exclusion of food employees exhibiting symptoms of norovirus disease (that is, diarrhea or vomiting) are critical for norovirus control.

• <https://www.cdc.gov/norovirus/trends-outbreaks/worldwide.html>
• 2019 Tin Service Food Code
• Selvanegra | Getty Images
• <https://www.cnn.com/2017/01/25/norovirus-outbreak-why-its-easy-to-catch-and-hard-to-get-rid-of.html>

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Diseases You Can Catch from the Salon or Spa:



Photo from mrsamd.com



Photo from Creative Commons CC0.

Barber, beauty, nail, and spa services are a relaxing luxury, especially following the busy holiday season. However, if not careful, these beauty rituals can cause infections such as MRSA (methicillin-resistant *Staphylococcus aureus*), spread by contact with infected people or things that are carrying the bacteria. This includes through contact with a contaminated wound or by sharing personal items, such as towels or razors, that have touched infected skin. Therefore, it's vital that personal service employees know the signs and symptoms of MRSA, as well understand the precautions necessary to prevent the spread in-order to keep our community safe. Most *S. aureus* skin infections, including MRSA, appear as a bump or infected area on the skin that might be: *red, swollen, painful, warm to the touch, full of pus or other drainage, accompanied by a fever.*

Chapter 9, of EOP 30-01, Services outlines sanitization practices for barber, beauty, nail, and spa services. https://h5.aafes.com/formspubs/PUBS/30_01eop.pdf

See below link for additional information regarding MRSA. [General Information | MRSA | CDC](#)

The Exchange Food Safety & Defense Internet Portal:

Are you looking for past newsletters on food safety, food defense and barber/beauty/spa sanitation? Previous editions are found by accessing either of the Staff Vet/Food & Drug Safety links at the end of this newsletter. Associates are also able to consult the site for quick access to commonly required AF and DA regulations, references, Exchange policies, and guidance.

- [Past Exchange Public Health Newsletters](#)

Useful links (control-click to use links):

- [Worldwide Directory for Sanitarily Approved Food Establishments for Armed Forces Procurement](#)

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