

Reducing salt; saving lives

A focus on reducing the global burden of non-communicable disease (NCDs) in low and middle income countries



Salt and Sodium

Salt is also called sodium chloride. It's the sodium in salt that can be bad for your health. Sodium, or salt, is usually listed in the nutritional information on food labels.

Salt = sodium x 2.5 e.g. 1g sodium = 2.5g salt

Salt damages your health

Raised blood pressure is the biggest cause of death in the world (7million deaths a year) and is responsible for two thirds of strokes and half of all heart disease.

Salt is the major factor that puts up our blood pressure, the biggest killer worldwide.

We are all eating too much salt

Small amounts of salt (sodium and chloride) are essential for our wellbeing. Adults need less than 1 gram of salt per day. However we all eat much more than required: salt intakes range from 8 to 18 grams a day around the world; hence we have a global epidemic of blood pressure-related disease.

In developed countries most of the salt is hidden in foods that we buy, however in developing countries most of the salt that we eat is added during cooking, in cooking sauces and at the table.

Why 5g?

Adults should consume less than 5g per day, about a level teaspoon. It is particularly important that children do not eat too much salt, as blood pressure first starts to rise in childhood.

The WHO set a worldwide target of 5g in 1983, which was further endorsed in 2003, 2006 and 2012.

Salt reduction will save lives

Worldwide, it is estimated that a reduction of 6g/day in salt intake would prevent approximately 2.5 million stroke and coronary heart disease deaths a year. Over a longer period of time, there would be an even greater effect as it prevents the rise in blood pressure that occurs with age.

A 15% reduction in low and middle income countries over 10 years would save more than 8.5 million deaths.

Salt reduction is easy and cheap

Salt reduction is the simplest, most cost effective measure for reducing cardiovascular disease because of its high impact on health, high feasibility and low cost of implementation.

The cost for salt reducing measures in low and middle income countries is estimated at US\$ 0.09/person per year.

Salt reduction has been identified as a priority intervention and listed as a 'best buy' in NCD prevention; each country should now develop a salt reduction programme.

¹ He FJ, MacGregor GA. A comprehensive review on salt and health and current experience of worldwide salt reduction programmes. *J Hum Hypertens* 2009; 23 : 363–84.

² Asaria P, Chisholm D, Mathers C et al. Chronic disease prevention: health effects and financial costs of strategies to reduce salt intake and control tobacco use. *Lancet* 2007; 370: 2044–2053.

5 steps before developing a salt reduction programme:

1. **Gather the support of scientific experts** and highly regarded health and consumer organizations. They can help you engage with the public and politicians.
2. **Quantify the current salt intake in your country** (ideally using urinary-sodium analysis). You can then estimate the health benefits of a salt reduction programme.
3. **Identify the biggest sources of dietary salt in your country.** In many low and middle income countries the main sources of sodium include salt and condiments containing monosodium glutamate which are added to food during cooking or prior to eating to enhance flavour. In high income countries, the majority of salt comes from 'processed foods' e.g. Bread, meat, cheese and sauces.
4. **Develop a policy strategy.** Include the scientific rationale for salt reduction and the actions required by government, industry and individuals.
5. **Engage the public, politicians and the food industry.** Once the salt reduction strategy has been developed, disseminate the policy statement through the media to raise awareness of the benefits to your country's health.

From this, develop a programme to best meet the needs of your country, combining these two clear strategies;

1. **Public Health Campaign** to raise awareness about the health impacts of excess salt consumption and the ways in which salt consumption can be reduced (e.g. added salt and lower salt food products).
 - Campaigns need to be informed by research for maximum impact, as part of a long-term strategy and not as a 'onetime' event.
 - Examples of research could include surveys comparing the salt/sodium content of commonly used condiments such as cooking seasonings and sauces, and/or diet and nutrition surveys to estimate the main sources of salt in the diet
 - Highlight simple tips for consumers and households such as:
 - Don't add salt when cooking for example to rice, pasta, and vegetables such as potatoes, cabbage etc
 - Limit the use of salty ingredients e.g. soy sauce, stock cubes, powdered seasonings, pre mixed seasonings
 - Substitute salt and salty seasonings with alternatives such as herbs, garlic, fresh chilli, ginger, lemon etc
 - Try using lower salt seasonings and sauces, if available
 - Don't provide salt at the table for people to add when serving food



2. **Target setting** - for condiments and processed foods available in your country; a) set salt reduction targets for manufacturers to achieve and b) get food companies to clearly label the salt content of processed foods and condiments to help consumers make an informed choice.
 - Aim for progressive targets with gradual reductions of 10-20% a year, so consumers don't notice.

For example: targets to be achieved for sauces by 2020:

 - All table sauces should contain less than 2g salt (800mg sodium) per 100g
 - All cooking sauces should contain less than 1g salt (400mg sodium) per 100g
 - All cooking pastes should contain less than 5g salt (2000mg sodium) per 100g
 - Targets can be implemented on a voluntary, or legislative basis, depending on the political landscape of your country
 - Monitor progress towards reaching the targets, and set further targets as the original ones are met
 - Generate continuous media publicity to ensure the industry collaborates. E.g. praise companies that achieve the targets, name and shame those that have not

Salt reduction programmes are directed towards the entire population and can therefore benefit everyone regardless of age, economic status or ethnicity.

Civil society organisations including expert, professional and consumer groups have a significant role in national salt reduction programmes. Key functions include public campaigns, technical input and monitoring the progress of the food industry. World Action on Salt and Health (WASH), a global advocacy group is working with its members to support their Governments on salt reduction.

Our goal, in line with the WHO recommended target, is to reduce worldwide salt intake to less than 5g per day for all adults by 2025. Reducing salt intake will save lives at very little cost.

ⁱⁱⁱ Condiments include cooking seasonings and sauces. Monosodium glutamate is a commonly used flavour enhancer in in condiments.