

Sodium Reduction: A Public Health Priority

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Presenter Disclosure Information

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FINANCIAL DISCLOSURE:

No relevant financial relationship exists

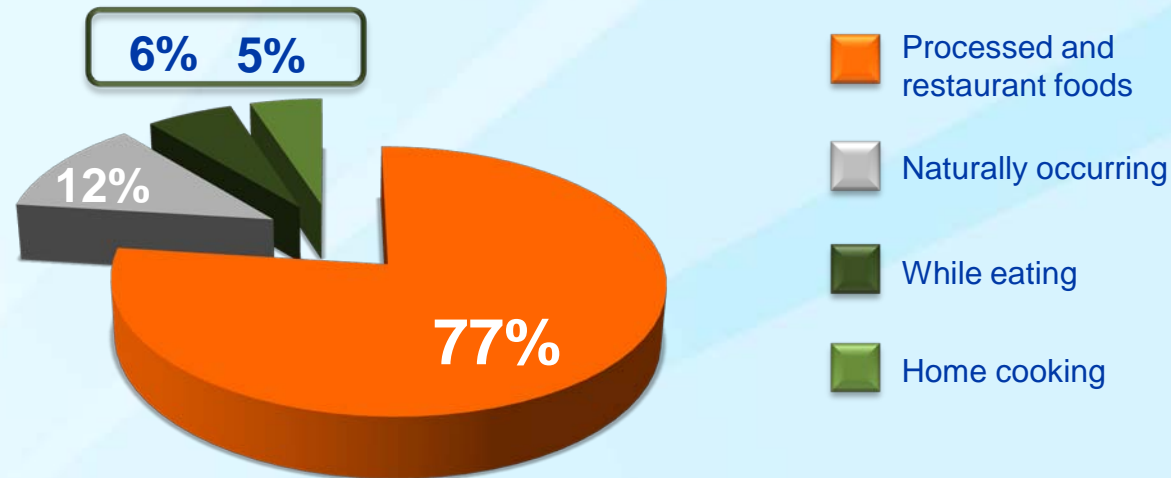
Agenda

- ❑ **Opportunities**
- ❑ **CDC Actions**
- ❑ **Sodium Reduction in Communities**
- ❑ **What can you do?**
- ❑ **Questions & Answers**

SODIUM REDUCTION : OPPORTUNITIES

The Opportunity: Reducing Sodium in the Food Supply

- Most sodium is already in the food we eat and is mostly invisible
 - It comes from processed and restaurant food



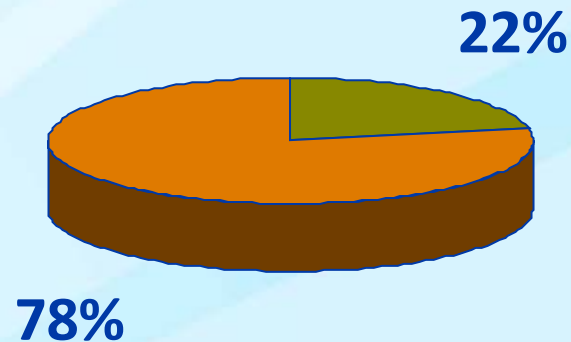
- It is not just the salt shaker!

Brain Break

Sodium: True or False?

An effective public health intervention to reduce sodium intake is to ban table salt from retail venues and to ban the use of table salt at restaurants.

1. True
2. False



The Opportunities

- ❑ **Enhancing monitoring and surveillance**
- ❑ **Increasing choice**
 - Availability
 - Affordability
 - Labeling
- ❑ **Increasing demand**
 - Consumer Education
 - Procurement
 - Nutrition standards
- ❑ **Building the evidence base for state and local level work**



SODIUM REDUCTION: CDC EFFORTS

CDC Efforts

- ❑ Procurement
- ❑ Industry Collaboration
- ❑ International Collaboration
- ❑ Sodium Targets
- ❑ Resource Development and Dissemination
- ❑ Monitoring and Surveillance
- ❑ Programmatic Support and Technical Assistance

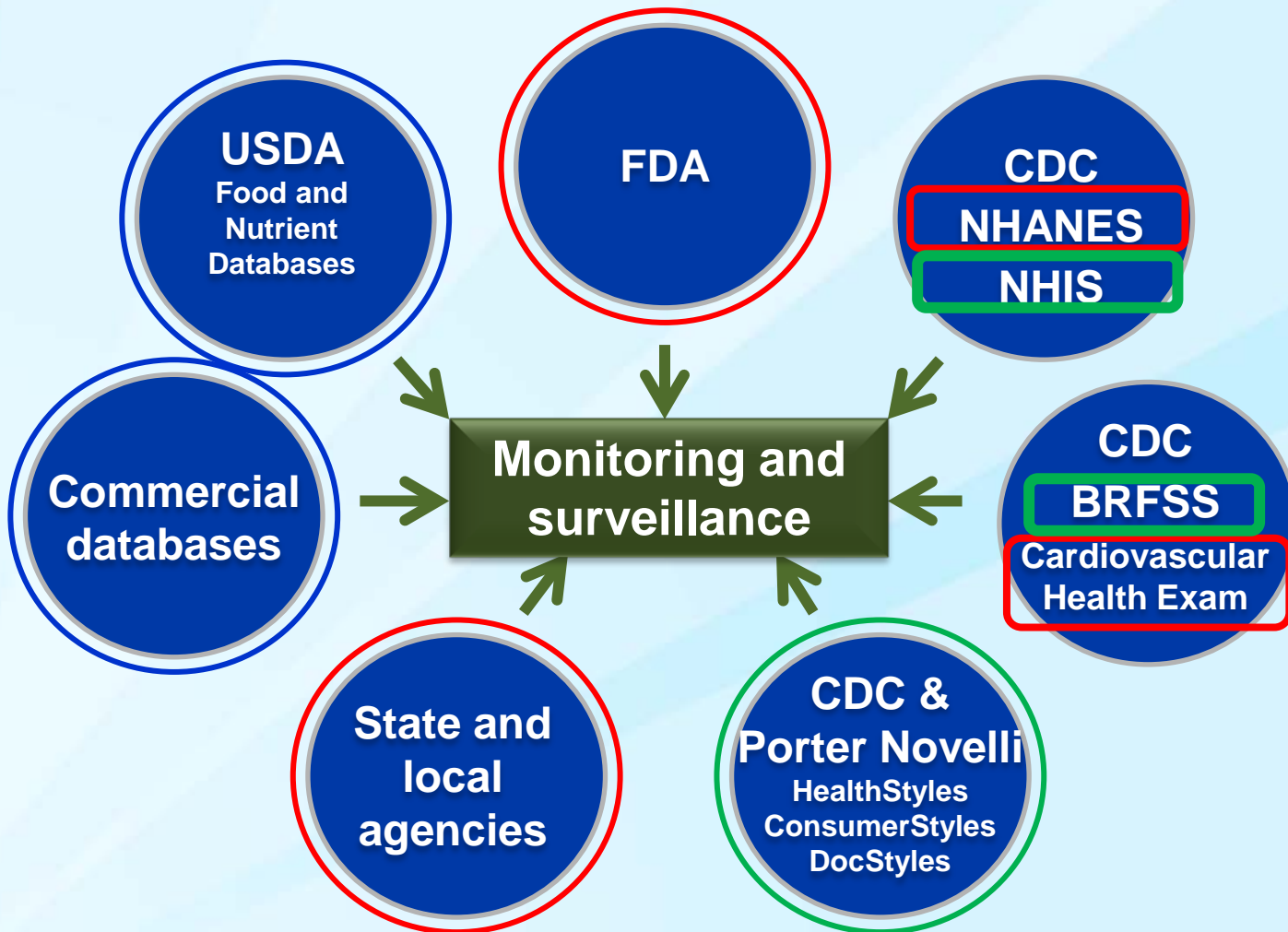


Monitoring and Surveillance

- **Sodium in food supply**
 - How much sodium is in the food we eat?
 - How much sodium do we consume?
- **Morbidity and mortality related outcomes**
- **Knowledge, attitudes and behaviors**
- **Policy Changes**

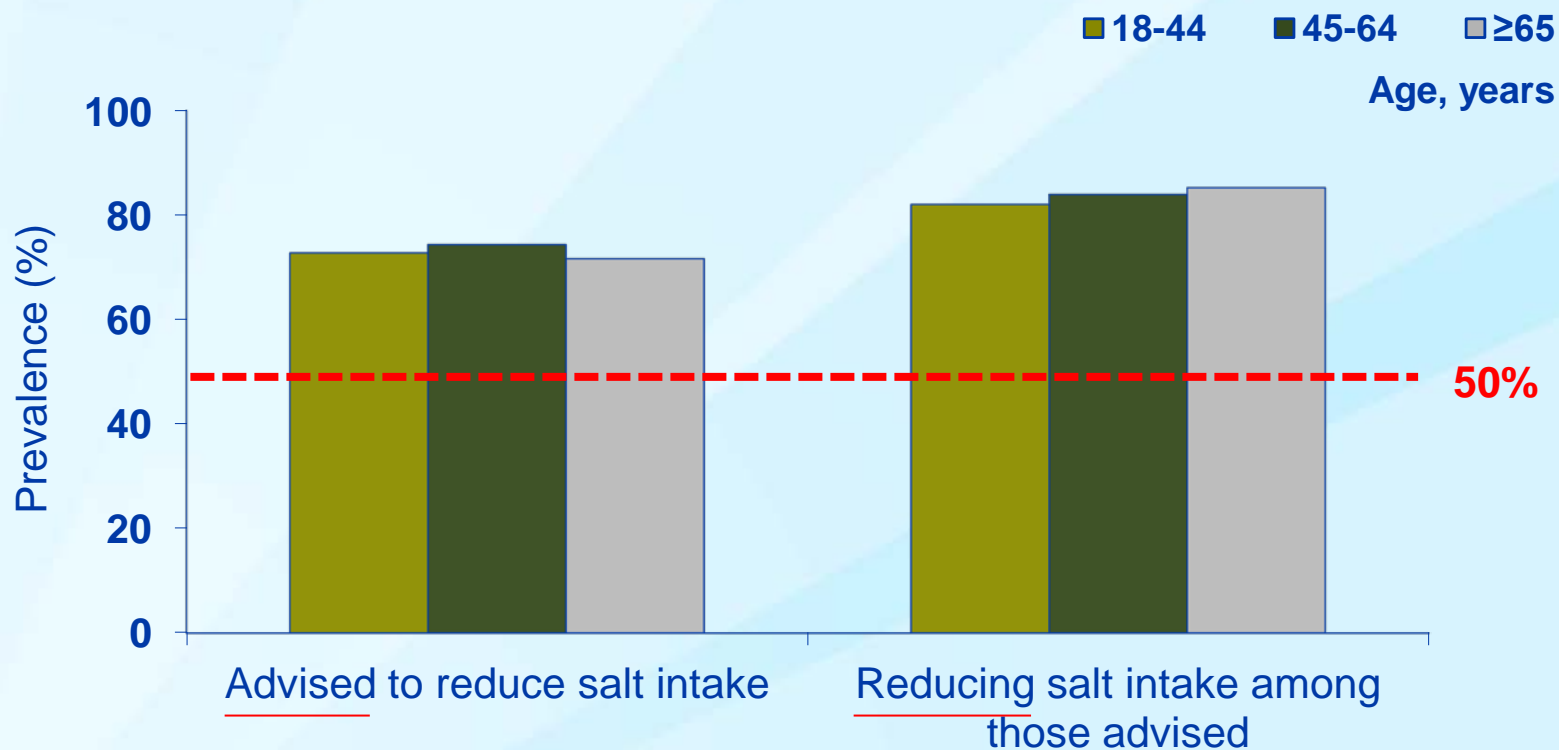


Sodium in Food and People: Data Sources



FDA, Food and Drug Administration; USDA, US Department of Agriculture; NHANES, National Health and Nutrition Examination Survey; NHIS, National Health Interview Survey; BRFSS, Behavioral Risk Factor Surveillance System

Adults with Self-Reported Hypertension Who Received and Acted on Low-Salt Advice

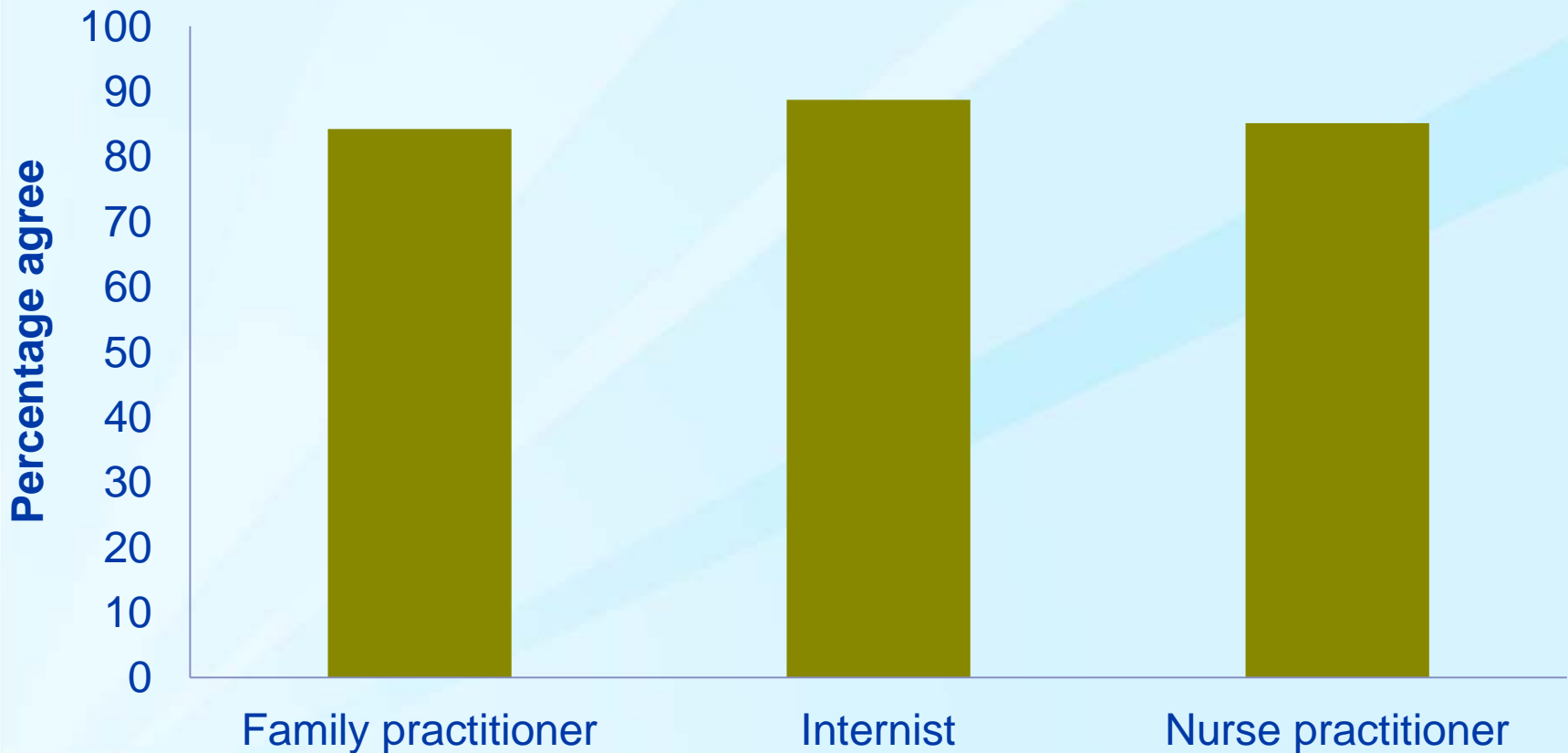


Advice and Behavioral Change

Behavioral Risk Factor Surveillance System, 19 states, 1 territory, and Washington, DC, 2007

Health Care Providers Who Agree with Importance of Sodium Reduction for their Patients

Statement: “Most of my patients should reduce their sodium intake”



Fang J, et al. DocStyles [unpublished data]. 2010

Physicians Advise Patients to Consume Less Salt

Disease Category

Prehypertension	77.7%
* <i>Hypertension</i>	86.8%
Chronic kidney disease	74.4%
Diabetes	49.3%

Race/Ethnicity

* <i>African American</i>	43.3%
American Indian	18.4%
Asian	13.8%
Hispanic	22.5%

Brain Break

Which Breakfast Cereal Has the Most Sodium?

	No Milk	With Milk
<input type="checkbox"/> Raisin Bran	350 mg	485 mg
<input type="checkbox"/> Lucky Charms	240 mg	375 mg
<input type="checkbox"/> Cheerios	190 mg	325 mg
<input type="checkbox"/> Shredded Wheat	0 mg	135 mg



1 cup fat-free milk = an additional
135 mg

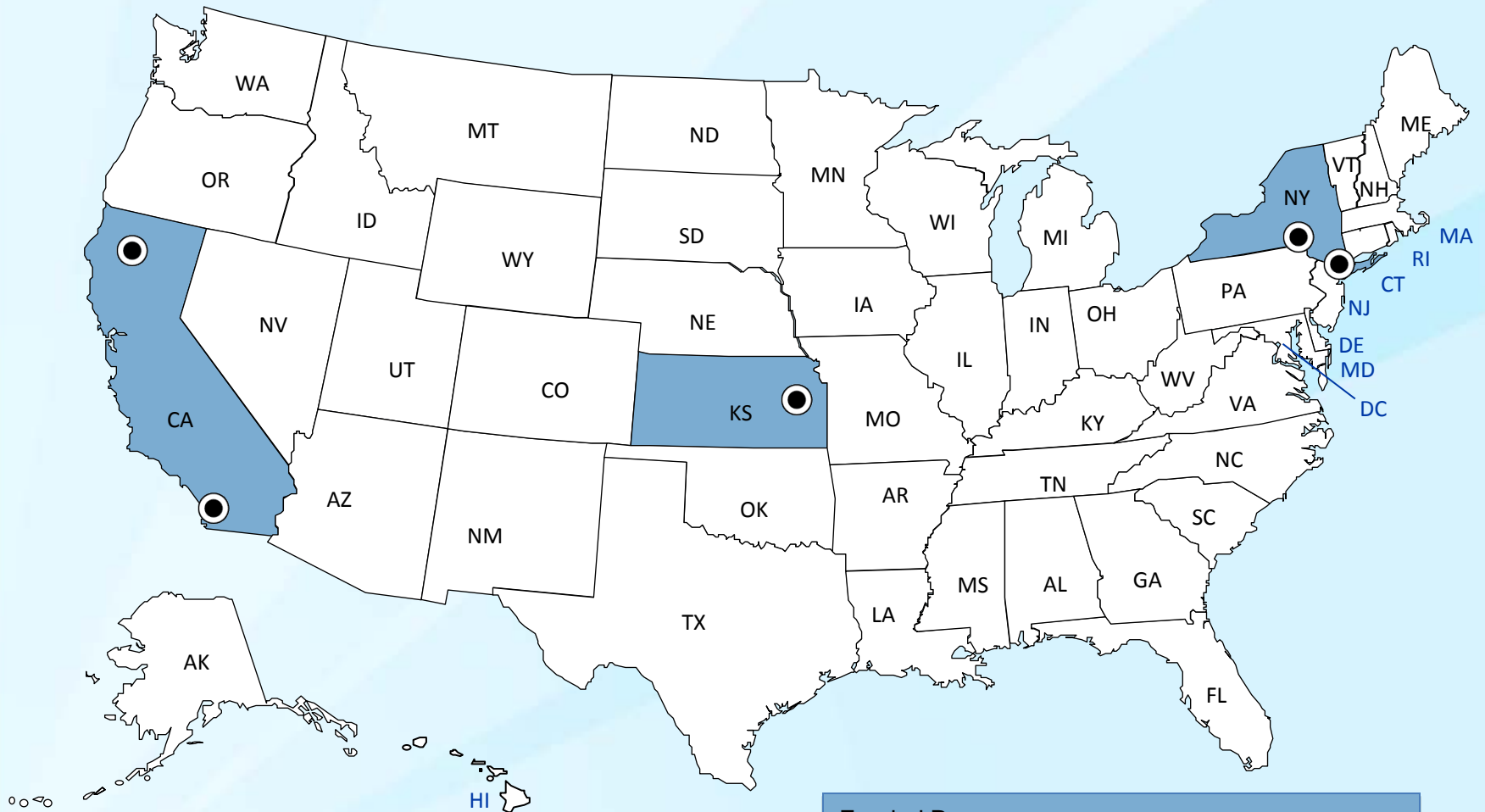
SODIUM REDUCTION IN COMMUNITIES

CDC- Funded Sodium Reduction in Communities (SRC)

- ❑ Five grantees (6 communities)
- ❑ Reduce sodium intake across population through policy, systems, and environmental change strategies
- ❑ \$1.9 million annually over 3-year funding period
- ❑ Build upon existing community policies and coalitions
- ❑ Implement at least one policy
- ❑ Evaluation
- ❑ Media component



Sodium Reduction in Communities Program, Funded Communities – 2011



● Sodium Reduction Communities

Funded Programs:

California: Working with Shasta County

Kansas: working with Shawnee County

Los Angeles County

New York City

New York State: working with Broome and

Schenectady counties

Sodium Reduction in Communities: Overview by Venue

Venue	CA	KS	LA County	NYC	NY	
					S	B
Restaurants	•		•	•	•	
Grocery/convenience stores		•				•
Hospitals			•	•		
Schools	•		•			•
Government agencies	•	•				
Private businesses		•				
Senior centers, congregate meal sites, home-delivered meals					•	

Project Lessons Learned

- ❑ Policy, systems, and environmental change strategies are still evolving
- ❑ Need for flexibility:
 - Challenges
 - Opportunities
- ❑ Resources do exist
- ❑ Collaboration is key!



MA Consumer Campaign

□ Goals:

- Increase consumer awareness of the dangers of excessive sodium consumption
- Encourage consumers to compare labels for sodium content and choose the lower sodium product

□ More Information:

- Posters, DVDs, and factsheets available free of charge at: www.maclearinghouse.com
- More about MA efforts on sodium reduction www.mass.gov/dph/salt
- Susan Svencer, Sodium Reduction Specialist with MDPH susan.svencer@state.ma.us



Health Professionals: Patient Education

- Importance of blood pressure control**
- Sodium in processed and packaged foods**
- Compare sodium content of food labels**
- Eat and prepare meals at home and use herbs and spices instead of salt**
- Purchase fresh poultry instead of enhanced poultry**
- Ask for no salt added when eating out**
- Request lower sodium options if not available in grocery store**
- Refer to dietitian**

Health Professionals: Systems Changes

- ❑ Consider how to work sodium reduction into community programs such as in schools and community education**
- ❑ Incorporate sodium reduction into other standard educational messages**
- ❑ Encourage advice on sodium reduction as part of standard protocol for patients**
- ❑ Inform other allied health professionals**
- ❑ Work with management to establish procurement policies**

Summary

- ❑ **Excess sodium intake causes hypertension**
- ❑ **Average daily sodium intake for U.S. adults is more than double what is recommended for most adults**
- ❑ **Changes in the food supply are needed**
- ❑ **Government has a critical role to play at federal, state, and local levels**
- ❑ **Health care providers report readiness to work with patients on sodium reduction**

More Information

- ❑ www.cdc.gov/salt
- ❑ www.cdc.gov/dhdsp
- ❑ Kristy Mugavero: frc9@cdc.gov

Questions?

Comments?

For more information please contact Centers for Disease Control and Prevention

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National Center for Chronic Disease Prevention and Health Promotion

Division for Heart Disease and Stroke Prevention

