THE CASE FOR SODIUM REDUCTION IN CANADA

HIGH DIETARY SODIUM IS A HEALTH RISK
- Unhealthy diet was the leading risk for death and disability in Canada estimated to cause over 50,000 deaths in 2013 (1).
- High dietary sodium is a key dietary risk contributing to the disease burden in Canada, causing an estimated 164,000 years of disability in 2013 (1).
- High dietary sodium was the leading dietary risk associated with death in 2013 (over 10,000 deaths) (1).
- An estimated 2 million Canadians have hypertension caused by excess dietary sodium (2,3). Hypertension is the second leading risk factor for death globally and affects more than one in five Canadians (1,2). Over thirty percent of hypertension is attributed to high dietary sodium (3).
- Roughly 90 per cent of Canadians are expected to develop hypertension over their life span (4).
- Increased consumption of fresh or freshly frozen fruits and vegetables and avoidance of processed and restaurant foods are key strategies to reduce dietary salt and improve Canadian diets.

SODIUM REDUCTION IS A COST-EFFECTIVE STRATEGY TO REDUCE HYPERTENSION
- Reducing Canadians’ sodium intake to 1,700 mg per day would lead to an estimated 30 per cent reduction in hypertension prevalence and save $1.38 billion annually (5).
- Canada’s most vulnerable populations (such as Aboriginal peoples, new Canadians, low-income Canadians, and black Canadians) have high burdens of hypertension and are expected to benefit the most from reducing salt in processed foods.
- Regulatory approaches to reduce sodium in foods are more cost-effective than voluntary, industry-led reduction initiatives or the use of medications to lower blood pressure (6).
- Population wide interventions to reduce sodium intake are considered a ‘best buy’ by the World Health Organization to prevent non-communicable disease (7).

Canadians are exceeding current dietary recommendations for sodium
- Currently, it is recommended to consume no more than 2,300 mg of sodium per day (5). At close to 3,800 mg per day, the average sodium consumption by Canadians far exceeds this limit (8,9).
- The World Health Assembly has set a target to reduce dietary sodium by 30 per cent by the year 2025.
- More than 90 per cent of Canadian children aged four to eight years are exceeding dietary sodium guidelines, putting them at increased risk for hypertension (9).
- Over 75 per cent of the sodium consumed by Canadians comes from processed, packaged and restaurant foods (5).

Priority Actions
Inform
Include sodium in the nutrition information listed on restaurant menus.

Alert
Require warning labels on restaurant and processed foods that contain more than maximum recommended levels of sodium per serving

Report
Provide the public with product-specific sodium level information on all processed food products semi-annually.

About this Publication: This fact sheet is a product of the HSFC/CIHR Chair in Hypertension Prevention and Control and Hypertension Canada and is intended for information and policy guidance purposes. For more information and to download visit: www.hypertensiontalk.com and www.hypertension.ca
SODIUM REDUCTION IS STRONGLY SUPPORTED BY NATIONAL AND INTERNATIONAL HEALTH AND CONSUMER GROUPS

- Uniformly reducing dietary sodium to 2,300 mg per day or less is internationally recommended (Table 1).
- Many leading health groups around the world have called for action to reduce dietary sodium (10-11). In 2013, 60 health and citizen groups signed a joint statement of support for a Sodium Reduction Strategy for Canada Act (12).
- There is strong public support for sodium reduction strategies: 76 per cent of Canadians support mandatory warning labels on high-sodium products and 68 per cent believe that regulations about allowable levels of sodium in foods are very or extremely important (13).
- Studies and reviews challenging the evidence in support of population sodium reduction have been criticized as being methodologically flawed; focused on limited evidence (i.e. cohort studies) and/or outcomes (i.e. cardiovascular); and fraught with potential financial conflicts of interest (14,15).

### Table 1: Canadian and International Recommendations for Dietary Sodium Reduction

<table>
<thead>
<tr>
<th>Report</th>
<th>Recommendations &amp; Conclusions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institute of Medicine Dietary Reference Intake for sodium (2004, reiterated 2014)</td>
<td>Less than 2,300 mg sodium/day in adults with adequate intake 1500 mg/day for middle-aged adults.</td>
</tr>
<tr>
<td>Sodium Reduction Strategy for Canada: recommendations of the Sodium Working Group (2010)</td>
<td>Average intake of 2,300 mg sodium/day by 2016 with an ultimate goal of (95% of) Canadians consuming less than 2,300mg sodium/day.</td>
</tr>
<tr>
<td>Provincial and territorial progress report on reducing sodium intake of Canadians (2012)</td>
<td>Average intake of 2,300 mg sodium/day by 2016</td>
</tr>
<tr>
<td>WHO Guidelines: Sodium intake for adults and children (2012)</td>
<td>Adults should consume less than 2,000 mg of sodium/day, or 5 grams of salt, with lower levels of intake in children.</td>
</tr>
<tr>
<td>American Heart Association Sodium Reduction Recommendations (updated 2012)</td>
<td>Adults to limit daily sodium intake to 1,500 mg sodium/day</td>
</tr>
<tr>
<td>Hypertension Canada CHEP Guidelines</td>
<td>Individuals to reduce sodium intake towards 2,000 mg (5g of salt) / per day</td>
</tr>
</tbody>
</table>

Dietary Sodium Reduction Opportunities for Canada

**Federal, Provincial and Territorial Governments**

- Commit to implementing the key policy recommendations of the Sodium Working Group, which include:
  - Restricting food and beverage marketing to children;
  - Cautionary labels to help consumers better identify high sodium foods and beverages; and
  - Implementation of healthy food and beverage procurement policies in all settings where food products are served and sold.
- Commit to monitoring industry compliance at the individual product level with the sodium levels set out in the 2012 Guidance Report for the Food Industry on Reducing Sodium in Processed Foods (16).
- Update the 2012 Guidance Report to include targets and timelines for restaurant foods as recommended by the Sodium Working Group.
- Require restaurants to disclose and display sodium levels of their food products on overhead and table menus.
- Move from voluntary benchmarks to mandatory policy for industry to reduce sodium content.
- Improve cross-provincial consistency of school-food nutrition criteria.

**Health and Scientific Organizations**

- Fund and prioritize population based sodium reduction interventions.
- Work with the federal government to monitor industry compliance with the 2012 Guidance Report for the Food Industry on Reducing Sodium in Processed Foods (16).
- Work with the federal, provincial and territorial governments to educate Canadians about sodium reduction.

**Industry**

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REFERENCES

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