Australian Government
Department of Health and Ageing
National Health and Medical Research Council

MINISTRY OF HEALTH
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Nutrient Reference Values for Australia and New Zealand

BRIEF: Revised Sodium Nutrient Reference Values (2017)

REVISED SODIUM NUTRIENT REFERENCE VALUES REAFFIRM PUBLIC HEALTH NEED TO REDUCE SODIUM INTAKES AT A POPULATION LEVEL

KEY POINTS

- Sodium is abundant in the Australian and New Zealand food supply.
- For most people a large proportion of their daily salt (sodium) comes from processed foods and takeaways.
- A high sodium intake is a significant public health issue because of the strong link between increasing sodium intakes and increased blood pressure in the population.
- Given this public health issue, the sodium Nutrient Reference Values (NRVs) have been prioritised for review.
- The Suggested Dietary Target (SDT) is a target set for daily average intake at a population level. The SDT for sodium has been determined as 2000 mg/day for adults.
- Current average sodium intake (3600 mg/day) is almost double the SDT.
- To achieve the SDT for Australia and New Zealand most individuals need to reduce their sodium intake.
- A reduction of sodium intake at a population level would support a reduction in average population blood pressure.

BACKGROUND

Sodium is a nutrient with an essential role in the maintenance of key physiological functions including fluid balance and blood pressure. Sodium occurs naturally in foods and is added during food processing, meal preparation and at the dining table, usually as table salt (sodium chloride). For most people, a large proportion of their daily salt (sodium) intake comes from discretionary and processed foods, and ready prepared foods.

Sodium is abundant in the Australian and New Zealand food supply. A high sodium intake is a significant public health issue because of the strong relationship between increasing sodium intakes and increased blood pressure in the population. Hypertension (high blood pressure) is a significant risk factor for cardiovascular disease, which is a major cause of premature death in the Australian and New Zealand populations.

Given this public health issue, the sodium Nutrient Reference Values (NRVs) were prioritised for review, with the Suggested Dietary Target (SDT) and Upper Level of Intake (UL) for adults considered the most appropriate NRVs to review.

NRVs are health based guidance values designed to be used as reference standards by dietitians and other health professionals /practitioners working in different settings.

The National Health and Medical Research Council (NHMRC) approved the 2017 NRV recommendations for the sodium SDT and UL for adults on 13 July 2017.

The 2017 NRV recommendations are an outcome of a review of the sodium SDT and UL for adults for Australia and New Zealand, published by NHMRC in 2006. The review process was managed by the Australian Government Department of Health and the New Zealand Ministry of Health. The evidence based recommendations utilised a methodological framework developed in 2015 specifically for NRV reviews. They followed current NHMRC guidelines ensuring the recommendations were developed to rigorous standards which are continuously updated.

2017 SDT REVISIONS FOR SODIUM FOR ADULTS – 2000 MG/DAY

The SDT is a target for daily average intake at a population level. SDTs are set for nutrients that may help in the prevention of chronic disease in the population. For individuals, sodium intake should be evaluated on a case-by-case basis. Using the new methodological framework the value of the SDT for sodium was revised from 1600 mg/day to 2000 mg/day. The new target of 2000 mg/day is more realistic as it allows for a total diet that meets all nutritional requirements, given the current food supply. The current average sodium intake of the Australian and New Zealand population is about 3600 mg/day (almost double the SDT). Evidence shows that reducing the average sodium intake at a population level to 2000 mg/day may also contribute to a reduction in average population blood pressure.

To achieve the SDT for Australia and New Zealand most individuals still need to reduce their sodium intake.

2017 UL REVISION FOR SODIUM FOR ADULTS – 'NOT DETERMINED'

The UL is defined as the highest average intake likely to pose no risk in the general population. There is convincing evidence that as sodium intake increases, blood pressure increases. An analysis of data (currently available between 1200 and 3300 mg) failed to determine an identifiable point at which the relationship between higher sodium intakes and higher blood pressure did not occur. This means that increased sodium intake was associated with increased blood pressure at all measured levels of intake. Thus, the UL was revised from the 2006 UL of 2300 mg/day to 'not determined', reflecting the inability to identify a single point below which there is low risk. This should be interpreted as a need to reduce sodium intake in the general population, as there was no identifiably safe upper limit.

APPLICATION AND FUTURE DIRECTIONS

The evidence for the sodium-blood pressure relationship continues to support the current public health activities aimed at reducing sodium intake in the population. The SDT provides a suitable target for these activities.

Where a sodium NRV has not been reviewed, the current values stand for the Adequate Intake (the level of intake that assumes adequate intake in healthy people) for all age groups and the SDT for children as stated in NHMRC's 2006 *Nutrient Reference Values for Australia and New Zealand*. The 2017 sodium NRV review report recommends that the remaining NRVs for sodium be reviewed.

Further information is available at www.nrv.gov.au.