

Letters to the Editor

Dietary Sodium and the Health of Canadians



To the Editor:

We would like to alert the readers of the *Canadian Journal of Cardiology* to an updated fact sheet and call to action on dietary sodium (<https://hypertension.ca/wp-content/uploads/2019/01/Sodium-Fact-Sheet-FINAL-Jan-21-2019.pdf>). The fact sheet and call to action highlight that high dietary sodium remains a major health risk to Canadians. Approximately one third of hypertension is attributed to high dietary sodium, which translates to approximately 2 million Canadians with hypertension related to excess consumption of sodium. Other important dangers are that rapid ingestion of sodium (at 10 times or more the average daily level of consumption) can cause sudden death and that high sodium intake is a probable procarcinogen for gastric cancer.

Most are likely aware that Canadians ingest too much sodium and that current efforts to reduce dietary sodium have had little impact. Hence, the call to action makes important recommendations to Federal, Provincial, and Territorial governments to more effectively implement comprehensive policies to reduce sodium in Canada's food supply. Most of the call-to-action recommendations are included in the 2010 Sodium Reduction Strategy for Canada, which received very strong Provincial and Territorial support in 2012 but that, to date, has not been implemented.^{1,2}

Canada and other nations have made voluntary commitments to reduce dietary sodium by 30% by 2025.³ Perhaps, as a result, the mandate letter to the last 2 Federal Ministers of Health emphasized the need to reduce sodium in processed foods (Justin Trudeau, Prime Minister of Canada, <https://pm.gc.ca/eng/minister-health-mandate-letter>, accessed January 8, 2019). Recently, the health necessity for successfully reducing dietary sodium was highlighted by updated data from the Global Burden of Disease Study, indicating that excess dietary sodium was the leading dietary risk in Canada, with more than 12,000 deaths in 2017 associated with this health risk (Institute for Health Metrics and Evaluation, University of Washington, <http://www.healthdata.org/gbd/data-visualizations>, accessed January 8, 2019). A strong economic argument for markedly enhancing efforts to reduce dietary sodium was also made by a recent World Health Organization report, noting that reducing dietary sodium had the greatest return on investment of interventions to prevent and control noncommunicable chronic disease (\$13 returned for every \$ spent).⁴

We call Canadians, and especially Canadian health care professionals and scientists, to enlist politicians and policy makers to reinvigorate the Canadian effort to reduce dietary sodium.

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3. World Health Organization. Global Status Report on Noncommunicable Disease. Geneva: World Health Organization, 2014:iv-280.
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