Salt and obesity / CASH.

CASH
Consensus Action on Salt & Health

Published January 2010

Salt and Obesity

Introduction

Obesity is an increasing problem in the UK. A third of all British adults (13 million people) will be obese by 2012 if current trends continue.

Overall, obesity (a Body Mass Index over 30) has increased from 13.2% of men in 1993 to 23.1% in 2005 and from 16.4% to 24.8% of women (NHS, 2006). Obesity amongst children is also a problem. Obesity amongst boys aged 2 -15 increased from 10.9% in 1995 to 18.0% in 2005 and for girls there was an increase from 12.0% to 18.1% (NHS, 2006).

Obesity is huge health burden and is associated with many health conditions. These can include diabetes, hypertension, cardiovascular disease, sleep apnoea and shortness of breath. In 2002, the direct cost of treating obesity was between 45.8 and 49.0 million and the indirect cost (treating consequences) was between 945 million and 1,075 million(NHS, 2006).

Who is at risk?

Everyone is at risk of obesity if they consume an unhealthy diet or have an unhealthy lifestyle. However, the highest risk is in ex-smokers, African Caribbean's, inactive individuals and children (or adults) who also have a high intake of sugared-soft drinks (NHS, 2006).

How does salt contribute?

Whilst salt is not a direct cause of obesity it is a major influencing factor through its effect on soft drink consumption. Salt makes you thirsty and increases the amount of fluid you drink. 31% of the fluid drunk by 4-18 year olds is sugary soft drinks (He et al, 2008) which have been shown to be related to childhood obesity (Ludwig et al, 2001, James et al, 2004).

It has been estimated that a reduction in salt intake from 10s g/d to the WHO recommended level of 5 g/d would reduce fluid consumption by ≈350 mL/day. A study which analysed the sales of salt and carbonated beverages in the USA between 1985 and 2005 showed a close link between the two, as well as a parallel link with obesity (Karppanen & Mervaala, 2006)

An analysis of the NDNS Survey for young people (4 - 18years) showed salt intake was associated with both fluid intake and sugar-sweetened soft drink consumption (He et al, 2008). A reduction in salt intake by 1 g/d was found to be associated with a difference of 100g/day in total fluid and 27 g/d in sugar-sweetened soft drinks. This demonstrates that salt intake is an important determinant of total fluid and sugar-sweetened soft drink consumption in children. Reducing salt intake could therefore be important in reversing the current trend of increasing childhood obesity.

Current Salt Intake & Dietary Advice

Almost everyone in the UK (and the rest of the Western world) eats too much salt. The daily recommended amount is no more than 6 grams a day but the current average salt intake is 8.6g a day although many people are eating more than this.

People with or considered at risk of obesity should ensure that they keep their salt intake below the recommended maximum of 6g. This can be achieved by simple changes, such as consuming less processed foods and checking product labels before purchase.

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For more information and advice on how to reduce your salt intake, please visit our website www.actiononhealth.org.uk

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