

# REDUCE BIOMEDICAL RISK FACTORS



2025 TARGET

# 30%

reduction in average salt intake

## REDUCE SALT

More than four million Australians have high blood pressure – a major risk factor for cardiovascular disease (CVD).

Product reformulation to reduce salt can lower consumption across the entire population and trigger reductions in blood pressure and disease prevalence.

Reducing population salt intake by 30% by 2025 has the potential to save 3,500 lives a year through reductions in the incidences of heart disease, stroke and kidney disease. It is one of the most cost-effective population interventions available.

## THE PROBLEM

Australia's *Health Tracker* reports 23% of Australian adults have high blood pressure, which is the most important modifiable risk factor for CVD. Excess consumption of salt substantially increases blood pressure. Average adult daily consumption in Australia is estimated to be 8.1 g – despite the currently recommended maximum of 5 g daily.

Cardiovascular disease is both the leading cause of death and the second-largest contributor to Australia's disease burden<sup>41</sup>. CVD remains the most expensive disease group in Australia, costing about \$7.47 billion in 2008–09<sup>42</sup>. Vascular dementia and kidney disease have also been linked with high blood pressure. Therefore, a diet high in salt is implicated in a range of adverse health outcomes.

Reducing population salt intake through food reformulation reduces the risk of CVD and other diseases. It lowers blood pressure at 1–2% of the cost of clinical hypertension programs, and a 30% reduction in population salt intake would save the Australian healthcare system an estimated \$200 million dollars<sup>43</sup>.

## THE EVIDENCE

**Food reformulation can reduce salt intake.** Around 75% of the salt Australians eat comes from processed foods and pre-prepared meals. Therefore, reducing the average level of salt in the food supply can measurably reduce Australia's high salt intake. Population salt reduction is recommended by the World Health Organization as a 'best buy' for tackling non-communicable diseases; it is highly cost-effective, very cheap and highly feasible.

**A government-led approach is effective for population health outcomes.** In 2009, the Australian Government established the Food and Health Dialogue and worked with the food industry to voluntarily reduce salt levels in a selected range of processed foods. Consequently, the average sodium (a component of salt) content of bread, breakfast cereals and processed meats fell by 9%, 25% and 8% respectively<sup>44</sup>, as well as in selected fast food products<sup>45</sup>.

**Food reformulation is cost-effective.** Limiting the amount of salt permitted in both staple foods and highly processed foods which contribute significantly to average salt intake could reduce Australian health expenditure by \$4.8 billion. This would be the most cost-effective strategy for the primary prevention of CVD in Australia, saving more money than drug therapy or lifestyle programs targeting behaviour change<sup>46</sup>. There are also indirect savings associated with economic productivity and reduced disability<sup>47</sup>.

**Actionable.** The Healthy Food Partnership established in 2015 comprises government, industry and preventative health agencies and works on "strategies to educate consumers on consuming fresh produce and accelerate efforts to reformulate foods to make it healthier".

Consistent salt reduction targets in specific food categories provide a level playing field for industry action. The Healthy Food Partnership complements the Health Star Ratings system and facilitates government and industry collaboration on progressively reducing salt levels in a broad range of food categories.

## PRIORITY POLICY ACTIONS

The Healthy Food Partnership should:	
1.	adopt previous Food and Health Dialogue targets for selected product categories;
2.	consult on the adoption of the UK 2017 salt content targets for the remaining food categories and agree on targets within a reasonable time frame;
3.	support independent monitoring of industry progress towards reaching these targets;
4.	ensure that the national Health Star Rating scheme has appropriate criteria for salt;
5.	publish reports to highlight progress on salt reduction; and
6.	promote product reformulation for salt reduction in the Quick Service Restaurants sector.

	LATEST AUSTRALIAN DATA	2025 TARGET	BASELINE DATA AGAINST LATEST DATA	TREND	LATEST INDIGENOUS DATA
 Adults consuming too much salt	8.1g	5.7g	No new data	Inadequate data to assess trend	Not available