The FDA’s new guidance on sodium could be lifesaving. Here’s why.

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Sodium chloride. By that name, salt sounds rather mundane, even kind of unappetizing. But Americans have been so seduced by its many other monikers—sea salt, fleur de sel, grey Atlantic, Himalayan pink, Maldon, Balinese, the list goes on—and, even more so, by its intense and amplifying flavor that it’s now found in startling amounts in just about everything they buy in the market. It is found in large amounts in cheese, bread, frozen foods, even poultry, and it’s literally killing people.

While sodium does play an important role in human health by balancing fluid for example, the problem is that a huge number of Americans are getting way more than the necessary amount. That’s contributing to high blood pressure and, with it, heart disease and strokes. In fact, heart disease has been the leading cause of death for Americans for decades.

The Food and Drug Administration (FDA) has recognized the problem and has issued guidance on sodium consumption, which the AMA strongly supports.

Numbers to note

The FDA said its guidance “is intended to provide measurable voluntary short-term (2.5-year) goals for sodium content in commercially processed, packaged and prepared foods to reduce excess population sodium intake, while recognizing and supporting the important roles sodium plays in food technology and food safety.”

It includes both voluntary target mean sodium concentrations and voluntary upper bound sodium concentrations for foods in 16 categories and 163 sub-categories. These are designed to help cut sodium intake by roughly 12%—from the current average of about 3,400 milligrams per day to 3,000.
Read up on these seven myths about salt.

Why it matters

The FDA’s goal is modest considering the average sodium intake is nearly 50% more than agency’s recommended limit of 2,300 milligrams for people 14 or older. The AMA has policy that calls for a minimum 50% reduction in sodium in processed foods, fast food products and restaurant meals by 2026.

Consuming too much sodium can raise blood pressure, and hypertension is a major risk factor for both heart disease and stroke. Almost half of U.S. adults have high blood pressure and only one in four has it under control.

“Most dietary sodium is added by food processors and restaurants, making it difficult for even highly-motivated individuals to reduce their sodium intake,” said AMA President Gerald E. Harmon, MD.

“We urge food manufacturers and restaurants to accept the new voluntary sodium targets and immediately review their products and take steps to reduce sodium levels to the greatest extent possible,” he added. “By reducing overall sodium intake, we can together help lower blood pressure and help prevent more Americans from the devastating consequences of heart disease.”

The FDA will monitor changes in these categories over time, evaluate progress towards the targets and then reengage with stakeholders to develop new ones.

“Given that the onus is now on the food industry to voluntarily take the necessary steps to reduce sodium in its products, we also encourage the FDA in its monitoring process to publicly share the data as a way to hold the food industry accountable,” Dr. Harmon said.

The AMA has developed online tools and resources to help physicians manage their patients’ high BP with Target: BP™, a national initiative co-led by the AMA and AHA. Additional tools for are available through AMA MAP BP™, a leading evidence-based quality improvement program that provides a clear path to significant, sustained improvements in BP control. The program has demonstrated a 10% increase in BP control in six months with sustained results at one year.


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