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Estimating Sodium & Potassium Intakes and their Ratio in the American Diet

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U.S.A







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Conflicts of Interest/Disclosures

Consultant: Nestle, Nutrition Impact LLC, NIH

Other: ILSI NA (Scientific Advisor), IFIC (Board of Trustees)

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The opinions expressed here are my own and not a reflection of the NIH, the federal government, or Purdue University



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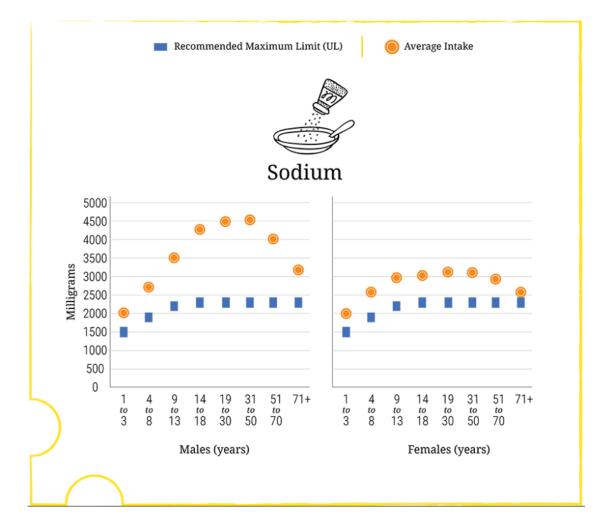
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SODIUM: Intakes and Limits Average Intake of Sodium in Milligrams per Day by Age-Sex Groups Compared to Tolerable Upper Intake Levels



Data Sources: What We Eat in America, NHANES 2007-2010 for average intakes by agesex group. Institute of Medicine Dietary Reference Intakes for Tolerable Upper Intake Levels (UL).



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OVERVIEW

 Na & K are two minerals that have consistently remained as nutrients of concern in the American diet¹



¹ Dietary Guidelines for Americans





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WHAT YOU NEED TO KNOW:

	WHO	U.S. DRI
Na	< 2000 mg/day	< 2300 mg/day
К	3510 mg/day	4700 mg/day
Na:K	< 0.57	<0.49

World Health Organization. Guidelines: Sodium and Potassium intake for adults and children; 2012. Food and Nutrition Board.

Dietary reference intakes for Water, Potassium, Sodium, Chloride, and Sulfate; 2005.

Drewnowski A, et al. Reducing the sodium-potassium ratio in the US diet: a challenge for public health. Am J Clin Nutr 2012;96:439-44



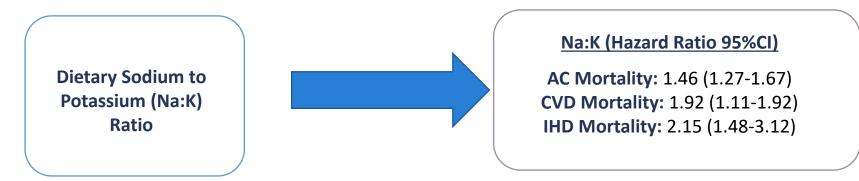
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Sodium in the context of Potassium

• Dietary sodium to potassium <u>ratio</u> (Na:K) is more strongly associated with an increased risk of CVDrelated mortality



Yang Q, et al. Sodium and potassium intake and mortality among US adults: prospective data from the Third National Health and Nutrition Examination Survey. Arch Intern Med 2011;171:1183-91.



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STUDY AIMS

- To estimate sodium and potassium intakes and the Na:K ratio in the diet of U.S. adults
 - Mean estimates
 - Energy-adjusted (per 1,000 kcal)
- To determine the percentage (%) of individuals who meet the recommended dietary Na:K ratio target of <1.0
 - Race/ethnicity, age, sex
 - Examine food sources

Bailey RL, et al. Estimating Sodium and Potassium Intakes and Their Ratio in the American Diet: Data from the 2011-2012 NHANES. Journal of Nutrition; 2016; 146: 745-750.



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National Health and Nutrition Examination Survey (NHANES)

• To assess the health and nutritional status of adults and children in the United States



National Health and Nutrition Examination Survey





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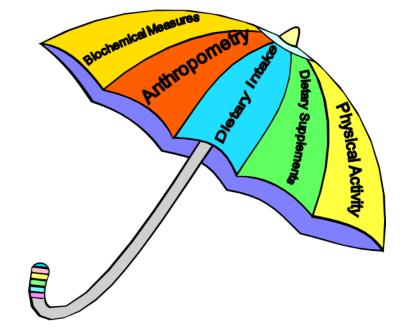
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NHANES Dietary Data

- n=4,730 adults >20 years
 - USDA's Automated Multiple-Pass Method
 - ✓ Two 24-hour dietary recalls
 - USDA Food and Nutrient Database for Dietary Studies was used to convert foods & beverages to accurate gram equivalents





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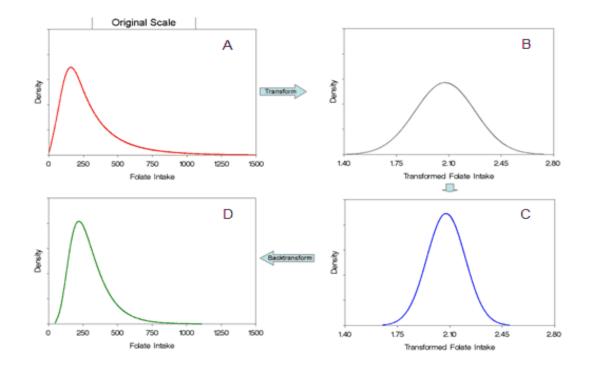
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METHODS: REDUCE RANDOM ERROR

- National Cancer Institute (NCI) Method
 - Adjusted within-person variability to estimate usual intake distributions





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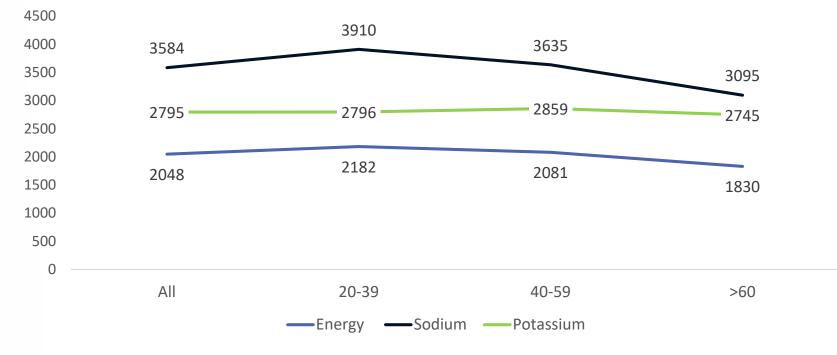
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MEAN ENERGY, SODIUM & POTASSIUM







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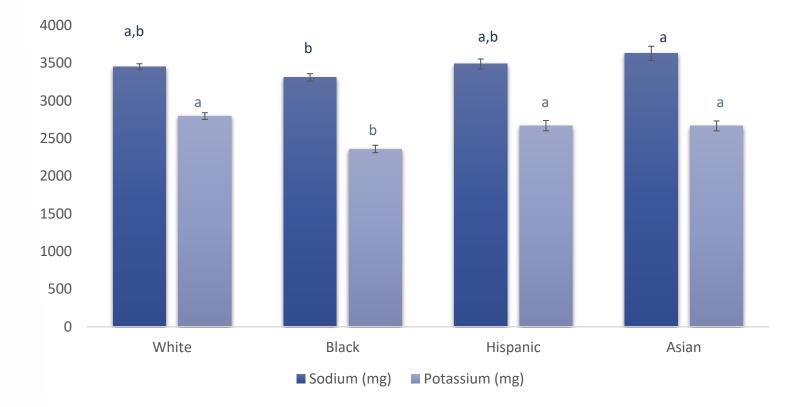
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SODIUM & POTASSIUM INTAKES U.S. Adults, Age 20 y. & older, by Race/Ethnicity





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KEY FINDINGS:

- Within sex, intakes of <u>sodium decreased</u> and <u>potassium</u> <u>increased</u> with age
- Asian men and women had the highest sodium intakes
- Men
 - ✓ White and Asian males had higher potassium intakes than Blacks or Hispanics
- Women
 - ✓ Black women had lower potassium than all other race/ethnic groups



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KEY FINDINGS

•90% of adults FAIL to meet the sodium targets

•<3% of adults MEET the potassium targets



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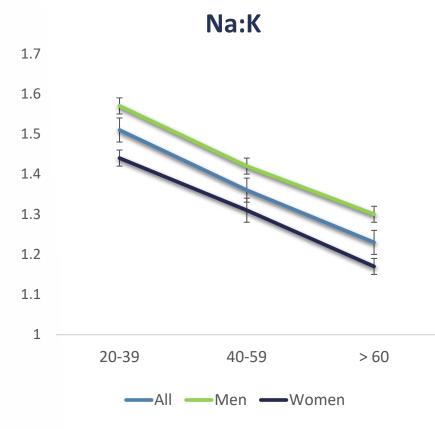
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Na:K Ratio

U.S. Adults, Age 20 y. & older, by Sex & Age



* All age group differences were statistically significant



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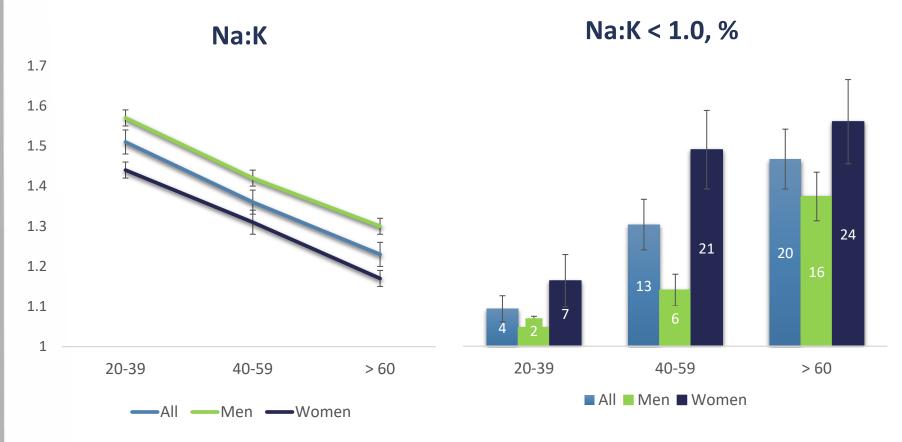
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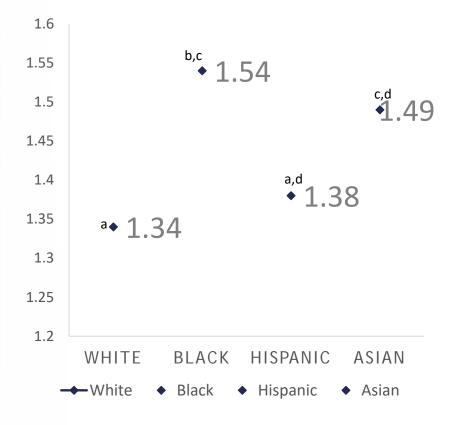
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Na:K Ratio U.S. Adults, Age 20 y. & older, by Race/Ethnicity





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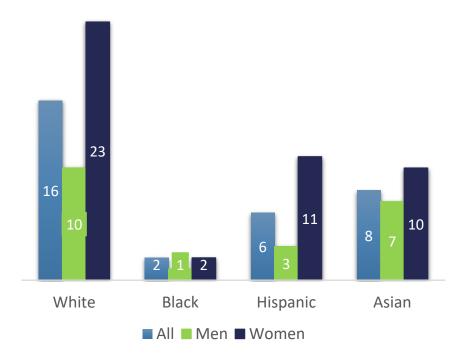
Na:K < 1.0, %



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Na:K Ratio

U.S. Adults, Age 20 y. & older, by Sex & Age





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KEY FINDINGS: Na:K RATIO

- •Overall 12% of U.S. adults have the Na:K associated with CVD protection
 - •Women (18%) > Men (7%)



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KEY FINDINGS: Na:K RATIO

- •Overall 12% of U.S. adults have the Na:K associated with CVD protection
 - •Women (18%) > Men (7%)
- Non-Hispanic White adults make up the largest percentage of the population (16%) who meet the Na:K <1.0 dietary target



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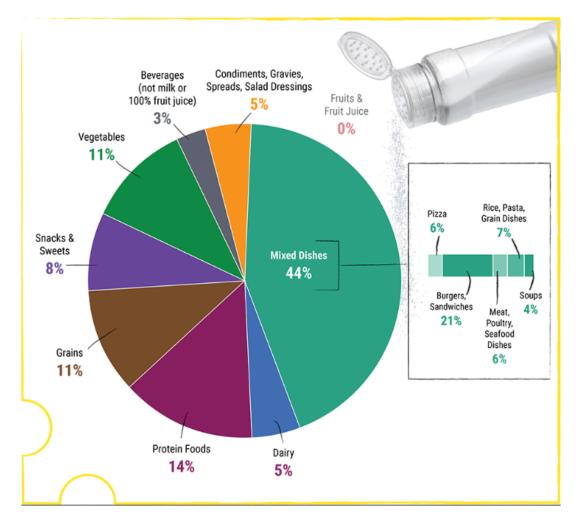


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FOOD SOURCES OF SODIUM

Food Category Sources of Sodium in the US Population Ages 2 Years and Older



Data Source: What We Eat in America (WWEIA) Food Category analyses for the 2015 Dietary Guidelines Advisory Committee. Estimates based on day 1 dietary recalls from WWEIA, NHANES 2009-2010.



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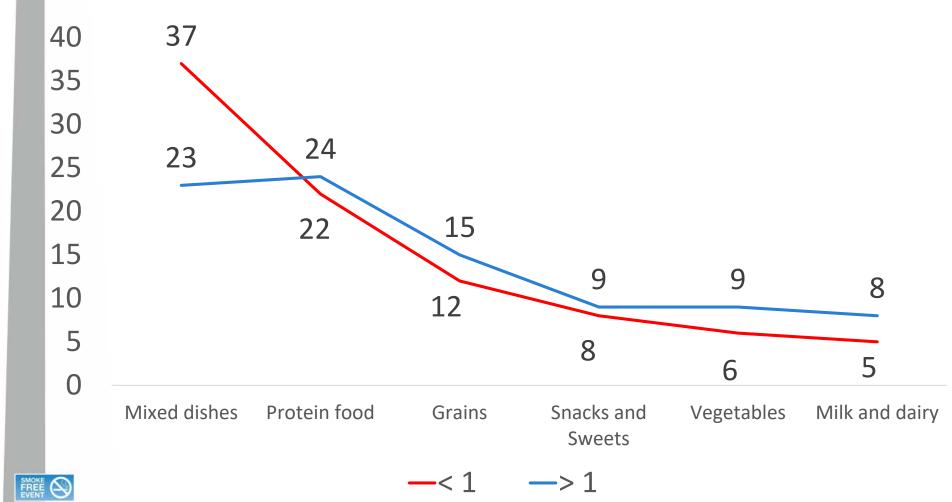
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FOOD SOURCES of <u>% CONTRIUBTION TO SODIUM</u>



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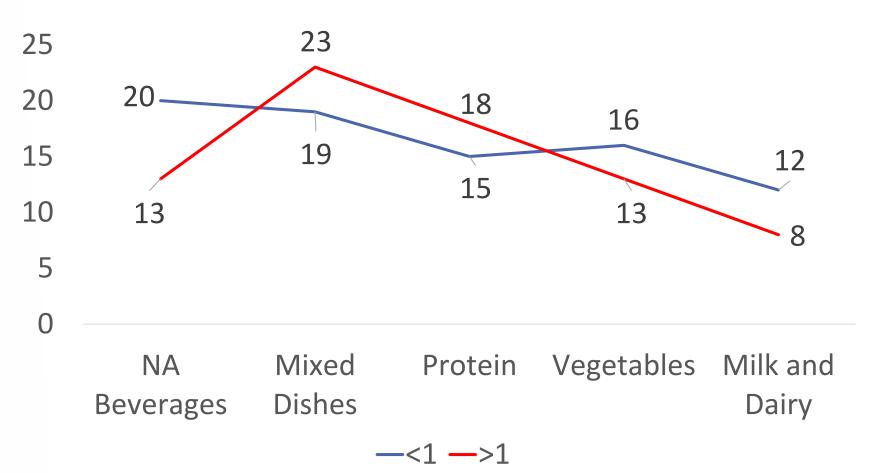
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FOOD SOURCES of <u>% CONTRIUBTION TO POTASSIUM</u>





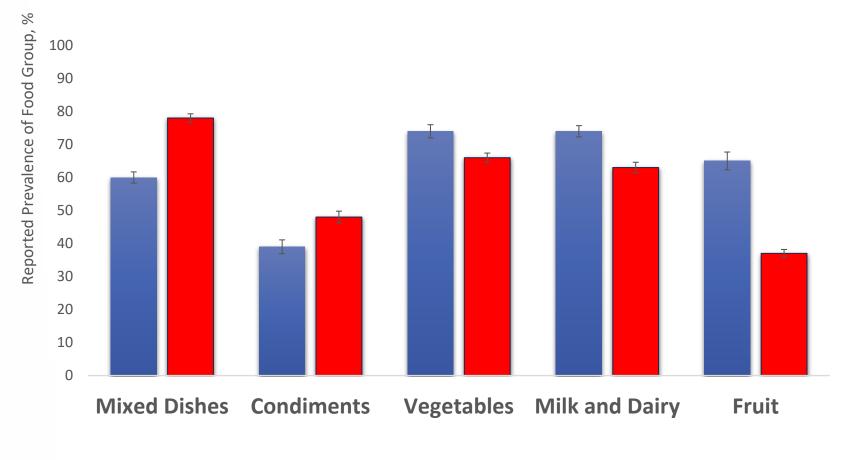
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OVERALL, WHAT'S THE DIFFERENCE??



■ Na:K < 1.0 ■ Na:K ≥ 1.0



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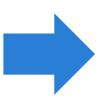


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WHAT DOES THIS TELL US?

- Individuals with a dietary Na:K ratio of <1.0 when compared to those with a dietary Na:K ≥ 1.0 were:
 - Less likely to consume:
 - Mixed dishes
 - Condiments
 - More likely to consume:
 - Vegetables
 - Milk & dairy products
 - Fruit



A dietary pattern that is lower in sodium and higher in potassium aligns with other recommendations for heart health.



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STUDY STRENGTHS & LIMITATIONS

- Only current data available on Non-Hispanic Asian Americans
- Does not include discretionary salt use



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STUDY STRENGTHS & LIMITATIONS

- Only current data available on Non-Hispanic Asian Americans
- Does not include discretionary salt use
- Measurement Error associated with Self-Report Data
 - Within-person variation
 - Easily adjusted with repeat applications and modeling
 - Systematic bias
 - Misreporting based on individual characteristics



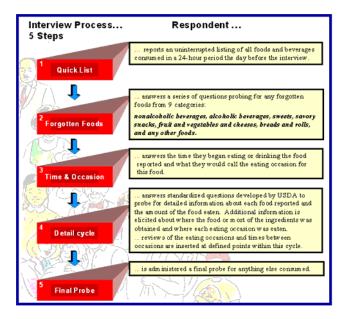
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USDA "AMPM" Method Validated

- Energy Under-reporting
 - Ranged from 3-11%
 - Dependent on weight status
- Sodium
 - 0.93 (05%Cl 0.89-0.97) for men
 - 0.90 (05%Cl 0.87-0.94) for women



Moshfegh AJ, et al. The US Department of Agriculture Automated Multiple-Pass Method reduces bias in the collection of energy intakes. Am J Clin Nutr 2008;88:324-32.



Rhodes DG, et al. The USDA Automated Multiple-Pass Method accurately assesses population sodium intakes. Am J Clin Nutr 2013;97:958-64.

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24 HOUR RECALLS: LIMITATIONS

- The OPEN STUDY: Observing Protein and Energy Nutrition
 - ✓ Potassium under-reporting (0-4%)
 - ✓ Sodium under-reporting (4-13%)
 - ✓ Na:K Under-reporting (5-9%)

Freedman LS, et al. Pooled results from 5 validation studies of dietary self-report instruments using recovery biomarkers for potassium and sodium intake. Am J Epidemiol 2015;181:473-87



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THE BIG PICTURE

- Continued efforts to reduce sodium in tandem with novel strategies to increase potassium intakes are warranted.
- Increasing potassium-rich food intakes while reducing intake of foods high in sodium would improve the dietary Na:K ratio
 - ✓ Mixed dishes and condiments easy targets
- Healthy overall combinations and patterns of foods & nutrients, rather than simply focusing on sodium reduction in isolation is optimal



