



December 2, 2016

Dr. Robert M. Califf
Commissioner
Food and Drug Administration
10903 New Hampshire Avenue
Silver Spring, MD 20093

RE: Voluntary Ten-year Sodium Reduction Goals: Target Mean and Upper Bound Concentrations for Sodium in Commercially Processed, Packaged, and Prepared Foods; Docket No. FDA-2014-D-0055.

Dear Commissioner Califf:

On behalf of Trust for America's Health, an organization dedicated to promoting better health and preventing chronic conditions, we are pleased to support the Food and Drug Administration's (FDA) proposal to set voluntary sodium-reduction targets and upper bound concentrations for commercially processed, packaged, and prepared foods. Trust for America's Health (TFAH) is a non-profit, non-partisan organization dedicated to saving lives by protecting the health of every community. We applaud the FDA for moving forward with this important proposal.

TFAH supports the Food and Drug Administration's (FDA) proposed voluntary guidance for sodium reduction in the food supply and its 10-year targets and upper bounds. The reduction goals should be finalized quickly, given the potential number of lives saved and magnitude of disease prevented by reducing excessive sodium in our foods, and FDA should consider a quicker timetable than 10 years. Researchers estimate that reducing current sodium intakes by 1,200 mg a day (which would bring most people close to the 2,300 mg per day goal of FDA's long-term targets) would prevent 60,000 to 120,000 cases of coronary heart disease and 32,000 to 60,000 cases of stroke.¹ Reducing sodium intake to 2,300 mg per day would save an estimated \$10 billion to \$24 billion in health-care costs and 44,000 to 92,000 lives annually.²

In support of the FDA moving toward a more aggressive timetable than 10 years for the long-term targets for sodium reduction in processed, packaged and restaurant foods, we would make the following points regarding its feasibility and benefits:

- The comments offered to the FDA on its food categories did not call into question the fundamental approach the agency took and should not delay finalizing the long-term targets;
- The proposed potential revision of the Dietary Reference Intake (DRI) for sodium should be accomplished by early 2019 and, if any resulting modifications of the long-term targets were needed, that can be accomplished with minimal disruption,³ and

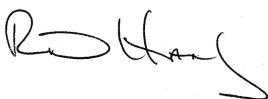
- The upper bounds for individual products need to be maintained because they are the one element of the FDA proposed guidance that gives consumers information to assist in making healthy choices.

The current timetable for the 10-year targets will result in a 17-year lag between the FDA's baseline data and its goal for sodium reduction. The United States will be "shooting for" voluntary compliance by 2027. The imperative for quicker action is evident from the recently published technical document by the World Health Organization on sodium reduction: "The WHO Member States in [World Health Assembly] 66.10 have agreed on a voluntary global [non-communicable disease] target for a 30 percent relative reduction in mean population intake of salt, with the aim of *achieving a target of less than 5 grams per day (approximately 2g sodium) by 2025*. They have also agreed on a voluntary global NCD target for a 25 percent relative reduction in the prevalence of raised blood pressure (defined as systolic blood pressure ≥ 140 mmHg and/or diastolic blood pressure ≥ 90 mmHg) by 2025."⁴

TFAH supports FDA's proposal and urges the agency to move expeditiously in its finalization of the 10-year targets for sodium reduction, and suggests considering a more aggressive timetable. The sooner the agency issues final guidance, the sooner a level playing field will be established for the food landscape. Most importantly, however, tens of thousands of Americans will enjoy a lower risk of heart disease and stroke, leading to healthier lives and healthier communities.

Thank you for the opportunity to provide these comments on this proposal. If you have any questions, please do not hesitate to contact Jack Rayburn, Senior Government Relations Manager, Trust for America's Health (202-223-9870, x 28 or jrayburn@tfah.org).

Sincerely,



Richard Hamburg
Interim President and CEO
Trust for America's Health

¹ Bibbins-Domingo K, Chertow GM, Coxson PG, et al. (2010). Projected Effect of Dietary Salt Reductions on Future Cardiovascular Disease. *The New England Journal of Medicine*, 362(7): 590-599.

² Ibid.

³ Office of Disease Prevention and Health Promotion. (2016). DRI Activities Update – June 2016. Available at <https://health.gov/dietaryguidelines/dri/updates.asp>.

⁴ World Health Organization. Population sodium reduction strategies. Available at <http://www.who.int/dietphysicalactivity/reducingsalt/en/>.