Transcript of FDA Media Briefing on FDA Food Industry Guidance for Voluntarily **Reducing Sodium in Processed and Packaged Foods**

Moderator: Kim DiFonzo

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9:00 am ET

Coordinator:

Welcome and thank you for standing by. At this time all participants are in a listen-only mode until the question-and-answer session of today's call. At that time you may press Star 1 to ask a question. This call is also being recorded. If you have any objections you may disconnect at this time. I would now like to turn today's call over to your moderator, Kim DiFonzo. Thank you.

Kim DiFonzo:

Good morning and welcome to the U.S. Food and Drug Administration's media briefing regarding the FDA's final guidance for sodium reduction targets for the food industry. I'm Kim DiFonzo with the FDA's Office of Media Affairs.

By now our press statement has been issued with details about our announcement. In a moment I will turn it over to HHS Secretary, Xavier Becerra, and Acting FDA Commissioner, Dr. Janet Woodcock, for opening remarks.

Following Secretary Becerra and Dr. Woodcock, Dr. Susan Mayne, Director of the FDA's Center for Food Safety and Applied Nutrition, will also provide brief remarks. After the remarks we will then move to the question and answer portion of the call. The remarks, as well as the responses in the Q&A, are on the record.

Reporters on the phone will be in a listen-only mode until we open the call for questions. As a reminder this audio call is being recorded and live streamed on the FDA's YouTube channel.

Reporters, when asking a question during the question-and-answer portion of today's briefing please state your name and affiliation. Also please ensure questions pertain to today's announcement and limit yourself to one question, and one follow-up, so we can get to as many questions as possible.

With that I will now turn the call over to Acting FDA Commissioner Dr. Janet Woodcock.

Dr. Janet Woodcock: Thank you Kim and thank you all for joining. Today is really a pivotal day for the health of our nation as the FDA is announcing a critical step in our efforts to reduce the burden of diet related chronic disease and advance health equity.

We're excited to be speaking with you today about this important effort which we believe will become one of the most significant public health nutrition interventions in a generation. To start, I'd now I'd like to welcome HHS Secretary Becerra to our call. Mr. Secretary.

Xavier Becerra:

Dr. Woodcock, thank you very much. And to you as our Commissioner at FDA, to Dr. Mayne, as the Director in charge of the agency that really is key to this decision here, I would just want to say thank you to you and everyone at the team at FDA for what you've done.

Today's announcement is critically important, but I think we have to remember first and foremost how indispensable FDA has been to the health of the American public. Today we're talking sodium, but we could be talking vaccines, or we could be talking say tobacco.

And in every way, FDA has been important--in fact I'd say, an indispensable part of health in America. And, so thank you, Dr. Woodcock, to you and your team for everything that FDA does every day including today's important announcement.

I'd say the pandemic has graphically illustrated why today's announcement is so important and why it's so important that we take care of our health. Clearly if we don't mask up, if we don't keep social distance, if we don't get vaccinated, if we don't maintain personal hygiene, we run the risk of contracting COVID and perhaps of dying as more than 700,000 Americans have learned.

It is important for us to take care of our health. And it is important to us to know what it takes to make sure we're maintaining our health. One of those things is to not do things in excess; and here, on sodium, Americans unfortunately consume sodium in excess--about 50% more sodium than is recommended.

The consequences can be catastrophic personally and for the country. Most of us now have a clear understanding of what the science tells us that increased sodium consumption can lead to high blood pressure. And, of course, high blood pressure -- as my uncle and my aunt can tell you because both had it -- and both perished -- can lead to things like heart attack and stroke.

It's unfortunate that we have so many avenues by which we can consume more sodium than we need to. And that's why it's so important that today the FDA is issuing this sodium reduction guidance. It keeps Americans on track to stay healthier as we move forward.

Human and economic costs of diet-related diseases are staggering. And hundreds of thousands of Americans are learning that the hard way as they contract these chronic diseases and they face the consequences of poor nutrition.

And so it's time for us to do much better at knowing what we're doing when it comes to the food we consume. That means thinking about the food we eat, or better put, the food we don't. These new recommendations and targets by the FDA take us a step closer to improving health outcomes for all Americans.

And as someone who, as I said, had a family member who perished from the consequences of diabetes, it is important for me to make sure that my health, and the health of my family, is paramount in my mind – and in our minds. And I hope that what we'll do at HHS and at FDA is to continue to let the American people know that their health is paramount in our minds.

And so I'm pleased to join Dr. Woodcock and Dr. Mayne today for this very important announcement for the American people. I'll turn it over to Dr. Woodcock.

Dr. Janet Woodcock: Thank you very much, Secretary Becerra. We really appreciate your passion for this issue. You know, we as a nation, as we just said, face a growing epidemic of diet-related chronic diseases, such as cardiovascular disease, obesity and diabetes which disproportionately impact racial and ethnic minority groups.

As a result, thousands of lives are lost, and billions of dollars are spent in health care costs each year for these preventable illnesses. Unfortunately, we know that people with these diseases are also at increased risk for severe outcomes from COVID-19. And that has played out over the last 18 months.

We also know that limiting certain nutrients such as sodium in our diet can play a huge role in helping to prevent diseases such as hypertension, cardiovascular disease, and renal disease. The guidance we're issuing today seeks to directly address these problems head on by providing voluntary short-term sodium reduction targets for food manufacturers, restaurants and food service operators for 163 three categories of processed, packaged or prepared foods. The targets seek to decrease average sodium intake by 12% over the next 2-1/2 years.

As many of you may know, sodium plays a role in food technology and food safety. Therefore, we recognize this isn't a change that will happen overnight. It will require an iterative approach that supports gradual reductions in sodium levels broadly across the food supply over time.

This approach will also allow consumers tastes to adjust and result in better health outcomes for consumers in the U.S. Importantly, this approach has been designated in a way that no one company or category of food is singled out or scrutinized. We recognize there's a lot of critical work that needs to be done to reduce diet-related chronic diseases and we appreciate the efforts already underway by a number of companies in the food industry.

The FDA is also working closely with our federal partners on many nutritionrelated efforts and exploring new ways to coordinate, leverage and amplify other agencies nutrition work. It's my hope that today's announcement will encourage others to also join in.

If we can act together, we're confident we will have a profound impact on the health of millions of people. Thank you. And now I'll turn to Dr. Mayne to discuss the guidance for sodium reduction targets in more detail. Dr. Mayne/

Dr. Susan Mayne: Thank you Dr. Woodcock, and thank you Secretary Becerra, for joining us today. It's really a pleasure being here with you both today.

First, I'd like to reiterate that our goals to reduce sodium intake are critical to reduce certain diet-related chronic diseases, improve our health and reduce health care costs. Reducing sodium across the food supply is a significant step in our efforts to achieve these goals by creating a healthier food supply.

On average, people in the U.S. consume 50% more than the recommended limit for sodium. This includes our youngest and most vulnerable populations with more than 95% of children aged two to 13-years-old exceeding recommended limits for sodium for their age groups, which can have profound impacts on later health outcomes.

We recognize that cutting down on sodium in your diet is hard to do on your own because about 70% of the sodium we eat comes from processed, packaged and prepared foods, which makes it challenging. Therefore, the guidance we are announcing today recognizes that successful sodium reduction needs to take place across the overall food supply making it easier for consumers to access lower-sodium options and reduce sodium even in the absence of behavior change.

The sodium reduction targets we are announcing seek to decrease average sodium intake from approximately 3,400 milligrams to 3,000 milligrams per day over the next 2-1/2 years. By reducing sodium by just 400 milligrams per day that would mean the average person would consume roughly 60 teaspoons less table salt every year.

Although the average intake would still be above the recommended limit of 2,300 milligrams per day for those 14 and older, we know that even these modest reductions made slowly over the next few years will substantially decrease nutrition-related diseases, make for a healthier population overall and lower the burden of health care costs in this country.

We are recommending that the food industry implement these targets as quickly as possible in order to level the playing field across the food supply. We will continue our discussions with them as we monitor sodium content in the marketplace and evaluate progress.

Moving forward, we plan to issue subsequent targets to continue to lower the sodium content incrementally to further help reduce our sodium intake. We know that there will be questions as we go through this process together. We already have several consumer and media-related materials available on the FDA website and we're planning webinars for our industry stakeholders and constituents.

We will certainly keep you informed and we'll update you as progress continues to be made. At the FDA, we are strongly committed to our mission to reduce the burden of chronic disease through improved nutrition. Today's action is an important step in the FDA's broader efforts to address preventable diet-related chronic diseases and advance health equity that we hope will have a profound impact on the health of millions of people.

Now, I'd like to turn the press conference back over to our moderator to begin the question-and-answer portion of the call. Thank you.

Kim DiFonzo:

Thank you Secretary Becerra, Dr. Woodcock and Dr. Mayne. At this time, we will begin the question-and-answer portion of the media briefing. In addition

to Secretary Becerra, Dr. Woodcock and Dr. Mayne, Dr. Robin MacKinnon, Senior Advisor for Nutrition Policy, and Kasey Heintz, Nutrition Scientist, both from the FDA's Center for Food Safety and Applied Nutrition, have also joined us to address questions.

As a reminder, this call is being recorded. Reporters, when asking a question please state your name and affiliation. Also, please ensure questions pertain to today's announcement and limit yourself to one question, and one follow-up, so we can get to as many questions as possible. Operator, we'll now take the first question please.

Coordinator:

Thank you. As a reminder if you'd like to ask a question it is Star and then 1 on your devices. Please remember to unmute your phones as well. Once again that is Star and 1. Please allow a few moments as we wait for the first question.

Excuse me, it's the operator, if you were attempting to queue up, once again push Star and 1. All right, our first question is going to come from Helena Evich from Politico. Go ahead, your line is open.

Helena Evich:

Thank you. Helena Evich, from Politico here. I'm hoping, I don't know if Dr. Mayne or Janet Woodcock wants to take this question, but what is the plan going forward? Are there going to be longer term sodium reduction targets?

You know, as you're aware the FDA originally had proposed two year targets and ten year targets and some health advocates are urging going forward. So can you just talk about sort of what the next steps are likely to be? Thank you so much.

Dr. Janet Woodcock: Certainly, this is Janet Woodcock. Let me start and then I can turn over to Dr. Mayne. First of all, yes, right now we have given 2-1/2 years recognizing that because of the pandemic it may take the food industry a little bit longer to, you know, conform to these targets.

However, we're going to monitor this as we go along, watch who's doing well, what food groups are, you know, are getting there and when. And hopefully before we get to the end of the 2-1/2 year period we will have a good idea of what our plan should be for the next iteration.

So, we plan this to be an iterative process to keep reducing the targets to try to get down below the top-level consumption recommended in the dietary guidelines of 2,300 milligrams. But we know that will take time both for the industry to adjust and also for people's taste to adjust so the population generally becomes used to a less salty a food, you know, supply.

So we, yes, we have a plan both to monitor and then to ratchet further down. And what we learn over the next several years will tell us what magnitude of steps we can take. Dr. Mayne?

Dr. Susan Mayne: I think you covered it very well, Dr. Woodcock. Just that is our commitment to continue to reduce. And this is a very important initial step to try to get intakes down to 3,000 milligrams per day.

But we recognize that is still too high. It is still way over the recommended limit across all age groups, so there will need to be subsequent iterations to continue to reduce to get to healthier food supply.

Helena Evich:

And then one quick follow-up there. If the industry doesn't show a lot of progress towards these targets in 2-1/2 years will the agency consider mandatory limits or any sort of stricter action? Thank you.

Dr. Janet Woodcock: This is Janet Woodcock. Well, we'll be monitoring this, and we wish to work with our federal partners and - who are involved, of course, in the food supply in one way or another. We also want to reach out to the public because there is a large amount of the public who really desires healthier food but they're unable to obtain it either, you know, because it's inherent in the food that they get either if they're purchasing processed food, and preparing that at home, or if they're eating prepared food, so we hope also that there's a lot of consumer demand for this.

In addition, we know many companies have - are committed to lowering sodium and they'll be in the forefront of this. And we are seeking ways to recognize that.

And finally, you know, over 100 countries have taken forward sodium reduction programs and many of those are also seeking these reductions in the food supply. And so a lot of the multinational companies actually they're selling the exact same brand in another market may be selling it with lower - it may have lower sodium content. So they already know how to achieve this. So we think that many factors will come together to make this happen over the next several years.

Coordinator:

As a quick announcement if you push Star 1 to queue up before the Q&A session began you would not be in queue. So, if you did that please push Star 1 at this time.

I would now like to introduce the next question Sasha Pezenik, ABC News. Go ahead.

Sasha Pezenik:

Hey there guys, thank you for taking my question. I'm curious for a lot of Americans out there who are hearing this today covered in the media they're going to think - they're going to wonder how this applies to them. A lot of this is industry standard. Curious if you can sort of parse the individual responsibility aspect of this and what it means for people's everyday lives?

Dr. Janet Woodcock: Sure. This is Janet Woodcock, let me start, and I'm sure as Dr. Mayne and Dr. McKinnon will have some additional thoughts on this. But say, let me say as a physician, I would urge my patients of which more than I think half of American adults have hypertension -- urge them to reduce salt in their diet, right?

Well, how do they do that? Well, if they're purchasing bread at the supermarket, or soup, or salad dressing or any kind of process or prepared foods, okay, they need to look at those nutrition facts labels and try to figure out which is the lowest sodium content.

And I can tell you, because I try to do this myself and it's hard, and you don't always find what you're looking for. There aren't necessarily a lot of lower sodium choices that they can choose. And, you know, if you're at a restaurant, that's a chain restaurant, you can ask for menu labeling extension and get the nutrition information and find there.

But for those many Americans who are trying to have a healthier diet and eat healthier food this should help because it will get the whole food supply to have less sodium rather than them having to try and pick and choose and pick the healthy choices. And so the other message I'd like to get out is we're really relying on the public to ask for these and be positive about them because that will help of course drive us toward a healthier food supply as well. Dr. Mayne?

Dr. Susan Mayne: I think Dr. Woodcock highlighted that this is a big problem we have in this country. And today's action is asking industry to help us reduce the levels of sodium overall in the U.S. food supply. But there also is an important step that consumers can take in terms of looking for those labels, that's important.

So, we view this as something that consumers, and industry, and us, that the FDA, all need to work together on to address this enormous public health burden. And that's why we're here today to have this conversation to really see how we can all tackle this burden together to reduce the amount of sodium in the U.S. food supply, which would be one of the most impactful public health interventions we can do.

Helena Evich:

If you don't mind you hit on something important there that you're asking the food industry to adhere to these new recommendations. But it's voluntary so is there any concern or reservation about not putting further teeth behind what we're announcing today?

Dr. Janet Woodcock: This is Janet Woodcock. We're going to monitor this over time. And based on the experience of other countries, we feel we have a high probability of success in doing this, particularly, you know, if the public also supports this and our federal partners.

However, you know, we're going to monitor this over time. And, if we don't see success then we're going to have to evaluate what else we should do. But we think this is very likely to be successful.

Coordinator: Once again, if you'd like to ask a question, it is Star and then 1; or if you have

a follow-up to a question you already asked, it's again, Star and then 1.

Kim DiFonzo: Operator, do we have any other questions?

Coordinator: I am not seeing any questions at this time.

Kim DiFonzo: Just give one more moment if anyone has an additional questions.

Coordinator: We do have one that just came in, Ellyn Ferguson with CQ Roll Call. Go

ahead. Your line is open.

Ellyn Ferguson: Thank you. Thank you for having the call. Dr. Woodcock has made reference

several times to the importance of consumer demand helping to kind of drive food processes on the reduction in sodium. What indications do you have that

there is that kind of consumer demand for lower sodium besides the fact that,

you know, many people are suffering from a diet-related chronic diseases?

Dr. Janet Woodcock: Sure, I'll turn that over to CFSAN because there have been polls about

what people really want from their food and their desire for healthy food, so

Dr. Mayne?

Dr. Susan Mayne: And that is correct. We have surveys that we do within FDA and there's also

other national surveys. And more specifically what we've learned in our

surveys is that a majority of consumers say that they want to take action to

reduce sodium but they find it challenging.

The other thing that we hear consistently, even throughout the pandemic, is

that consumers are interested in eating healthier. They want healthier options.

And so what that has driven is increased demand for healthier products on the market.

We have seen many food companies respond with commitment to produce healthier portfolios, to produce portfolios with lower sodium in them. But what's really critical is in order for that to be very successful we need to bring along the entire industry at the same time to allow those consumer palates to adjust.

So that it is driven by consumer demand. But it's also, as we indicate, something we need to help consumers with to help really level that playing field and introduce these lower sodium options. If anyone from my team wants to add on any details on consumer surveys I can ask Robin McKinnon or Kasey Heintz to add in.

Dr. Robin McKinnon: This is Robin McKinnon. I think you covered it Dr. Mayne that we are seeing that consumers saying in surveys that they want to reduce their sodium intake. And there are things that are tools that they can use like the nutrition facts label. And they can ask for additional information in chain restaurants for the nutrition information.

But the goal of this will be to improve and expand consumers choices so that we are gradually, broadly, slowly across the food supply bringing down sodium and providing those allowing for those additional options to be available on the marketplace to support consumer demand.

Dr. Susan Mayne: And the other thing I think I can add, Robin, is what consumers may not realize is that there are so many hidden sources of sodium. And I hope that today's announcement will have people paying more attention. There are

many foods that we don't associate with being salty that contain a lot of sodium.

And if they are frequently consumed foods, they really contribute to adding sodium to our diets. And so if we can reduce the sodium in those frequently consumed foods, many of them with hidden sodium, that can help consumers reduce their sodium intake consistent with what we're hearing in our consumer survey data.

Dr. Janet Woodcock: Right, this is Janet, I mean who would think bread. Well bread is one of the highest sources of extra sodium that people are getting of added sodium.

And yet people don't think of white bread as this big source of salt.

So, the problem is it's so cumulative, everything, the tomato sauce, the cheese, the bread, the salad dressing. Pretty soon your whole meal has hidden salt in it.

And it's really hard right now for people to manage that on their own since most of the salt in the diet, the sodium in the diet, comes from processed or package or prepared foods, not from a salt shaker. So we're going to provide help here in targeting all the foods to come down.

Ellyn Ferguson: Thank you.

Dr. Susan Mayne: And perhaps one other thing I can add on, this is Susan Mayne, is that it also includes baby foods. We have targets out there -- foods that are frequently consumed by toddlers and young children. The data we have indicate that our very youngest are way over consuming sodium compared to the recommended limit for their age group.

And so these dietary habits start early in life and they persist. And they have ramifications for children's health and for their longer term health outcomes. And so we are looking at this across age groups and across the food supply including foods that are targeted for babies and young children.

Coordinator:

Once again, if you would like to ask a question, it is Star and then 1 on your phones. Please remember to unmute your phone when you ask a question.

Once again, it is Star and then 1.

Kim DiFonzo:

Operator, are there any other questions?

Coordinator:

I am not showing any questions at this time.

Kim DiFonzo:

Okay. This concludes today's FDA media briefing. A replay will be available on the FDA's YouTube page. Materials related to this briefing are available on the FDA website. If you have any follow-up questions please contact the FDA press office. Thank you all for joining us. Goodbye.