

3月26日

大家好！

本周的美国疾病预防控制中心《盐摄入电子报》的更新内容包括近期疾病预防控制中心发表的两篇文章，一篇刊登在华尔街日报(WSJ)的有关减少盐摄入的对比性文章，以及美国心脏协会刊出的有关减少学校膳食中盐含量的信息图表材料。

**疾病预防控制中心对美国碘盐销售的分析**

虽然大多数钠摄入主要来自包装和餐厅食品，加碘盐仍然是微量元素碘的重要来源。近日，疾病预防控制中心完成的一项分析发现，在美国只有53％的零售食盐加了碘。随着减少盐摄入和确保碘摄入充足的努力不断加强，对碘盐销售的长期跟踪将有助于描述其对美国市场份额的潜在变化的影响。

[这篇题为《美国碘盐销售》的文章刊登在Nutrients期刊上，并有电子版可供查阅。](http://www.mdpi.com/2072-6643/7/3/1691/html)

**美国婴儿和儿童膳食盐的主要来源**

对事物口味的喜好，包括对咸味的反应，在婴儿出生的前两年就确立了。最近一份发表在《美国临床营养学》杂志的文章确认了从初生婴儿到2周岁儿童所消耗的膳食盐的主要来源，同时还有受人口特征，比如年龄、性别、种族或民族，在摄入量和食物来源的差异。从0岁到5.9个月以及1岁到23.9个月的儿童，食盐的平均摄入量增加了近9倍，而平均能量摄入只增加了2倍。加工的婴儿食品、汤类和面食混合食品是美国6至11.9个月婴儿盐摄入的主要来源；而汤、奶酪、面食混合菜肴和法兰克福香肠和腊肠是12至24个月婴儿盐摄入的主要来源。研究结果表明，儿童从出生到24个月期间每卡路里会消耗更多的盐和盐含量丰富的食物。

[该文章现已在网上刊登，计划于五月份发表在纸质版刊物上。](http://ajcn.nutrition.org/content/early/2015/03/11/ajcn.114.099770)

**膳食盐的两个观察角度**

本周，华尔街日报刊登了关于“大多数人是否需要低盐饮食（或这是否健康）”这个问题的两种争论观点。波士顿布莱根妇女医院的心脏科医生兼美国心脏协会会长艾略特·安特曼博士主张美国人广泛减少盐摄入以降低死亡风险。争论的另一方，加州大学戴维斯分校营养学院兼职教授兼美国营养医学协会/营养理事会当选主席大卫A·麦卡伦博士则认为，低盐饮食既不可行，也不安全。

[阅读该报告。](http://www.wsj.com/articles/are-low-salt-diets-necessary-or-healthy-for-most-people-1427079651)

**减少学校膳食中的盐含量**

美国心脏协会（AHA）开发的信息图表资源支持学校根据学生不同年级来减少膳食中的盐含量，并证明膳食的变化成功实现了既定目标。

[该信息图表可在新学校膳食的网站上查阅。](http://www.heart.org/idc/groups/heart-public/%40wcm/%40adv/documents/downloadable/ucm_472940.pdf)

感谢您对减少钠摄入长期以来的关注和支持！

请注意：

本简讯英文版由美国疾病预防控制中心发布，中文版由骄阳翻译公司翻译，如有歧义，请以英文版本为准。

(该信息为与减钠的相关伙伴机构和个人分享将正在进行的减钠活动信息。目的是为相关同仁提供持续更新的信息，并为对减钠工作感兴趣或致力于减钠工作的个人或机构创建一个合作网络。《减盐电子周刊》将每两周发布一期，如果你知道一些应该添加进来的人，或者你希望被从该通信人中删除，请联系蔡颖女士(caiy@cn.cdc.gov))。

《减盐电子周刊》在内容上只基于新闻价值和读者的潜在兴趣进行选择。美国疾病预防控制中心对所提供文章的真实准确性不承担任何责任。文章的选择、省略或文章内容并不意味着美国疾病预防控制中心对其内容有支持或其它观点。《减盐电子周刊》中原作者的观点或者引用，完全是其个人观点，绝不代表美国疾病预防控制中心的官方立场。所提及的产品、商业名称、出版物、新闻来源以及网站等，仅作参考之用，并不意味着美国疾病预防控制中心的认可。

March 26

Hello –

This week’s CDC Salt e-Update includes 2 recently published CDC articles, a WSJ report of contrasting perspectives on sodium reduction, and the release of infographic materials from AHA on lowering sodium in school meals.

**CDC Analyzes Iodized Salt Sales in the United States**

Although the majority of sodium intake is estimated to come from packaged and restaurant foods, iodized table salt is an important dietary source of the trace element iodine. Recently, CDC completed an analysis that found only 53% of table salt sold at the retail level in the United Sates is iodized. Tracking the sales of iodized salt over time will help describe potential shits in the U.S. market share in response to ongoing efforts to reduce salt intake and ensure iodine sufficiency.

[The article, titled "Iodized Salt Sales in the United States", was published in *Nutrients* and is available online*.*](http://www.mdpi.com/2072-6643/7/3/1691/html)

**Top Sources of Dietary Sodium in U.S. Infants and Children**

Taste preferences, including salty taste responses, are established during the first two years of life. A recent study, published in *American Journal of Clinical Nutrition*, identified the primary sources of dietary sodium consumed by children from birth to 24-months-old, as well as differences in intake and food source broken down by demographic characteristics including age, gender and race/ethnicity. Average sodium intake increased almost 9-fold from children aged 0-5.9 months to children aged 12-23.9 months, while the average energy intake increased 2-fold. Commercial baby foods, soups and pasta mixed dishes are top sodium contributors for U.S. infants 6 to 11.9 months, while soups, cheese, pasta mixed dishes and frankfurters and sausages are key contributors among toddlers aged 12 up to 24 months. The study results suggest children consume considerably more sodium per calorie or sodium-rich foods as they age from birth to 24 months.

[The paper is now published online. It is scheduled to publish in print in the full May issue.](http://ajcn.nutrition.org/content/early/2015/03/11/ajcn.114.099770)

**Two Perspectives on Dietary Sodium**

This week, Wall Street Journal featured two perspectives on the question “Are Low-Salt Diets Necessary (or Healthy) for Most People?” Dr. Elliott Antman, a cardiologist at Brigham and Women’s Hospital in Boston and president of the American Heart Association, argued in favor of a broad reduction in Americans’ salt consumption to lower risk of death. Arguing the other side, Dr. David A. McCarron, an adjunct professor in the University of California-Davis Department of Nutrition and chairman-elect of the American Society for Nutrition’s Medical/Nutrition Council, states a low-salt diet is neither feasible nor safe.

[Read the report.](http://www.wsj.com/articles/are-low-salt-diets-necessary-or-healthy-for-most-people-1427079651)

**Lowering Sodium in School Meals**

The American Heart Association (AHA) developed two infographic resources that support the targets for lower sodium in school meals by grade group and demonstrate changes in meals to successfully meet targets.

[The infographics are available on the new school meals website](http://www.heart.org/idc/groups/heart-public/%40wcm/%40adv/documents/downloadable/ucm_472940.pdf).

Thank you for your continued engagement in sodium reduction.

*We are sending this information in an effort to inform our stakeholders of relevant sodium reduction efforts that are occurring. The purpose of this communication is to provide continued follow up with stakeholders and create a network of partners working on and interested in sodium reduction. The Salt e-Update will be sent every two weeks. For questions or comments, or to be added or removed from this communication, contact Hadley Hickner at* *HHickner@cdc.gov**.*

*Salt e-Update* content is selected solely on the basis of newsworthiness and potential interest to readers. CDC assumes no responsibility for the factual accuracy of the items presented. The selection, omission, or content of items does not imply any endorsement or other position taken by CDC. Opinions expressed by the original authors of items included in *Salt e-Update*, or persons quoted therein, are strictly their own and are in no way meant to represent the official position of CDC. References to products, trade names, publications, news sources, and Websites are provided solely for informational purposes and do not imply endorsement by the CDC.