WEEKLY EPIDEMIOLOGICAL REPORT

A publication of the Epidemiology Unit
Ministry of Health, Nutrition & Indigenous Medicine

231, de Saram Place, Colombo 01000, Sri Lanka
Tele: + 94 11 2695112, Fax: +94 11 2696583, E mail: epidunit@sltnet.lk
Epidemiologist: +94 11 2681548, E mail: chepid@sltnet.lk
Web: http://www.epid.gov.lk

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Excess salt consumption and risk of NCD Part II

This is the last of series of two articles.

How to reduce salt in diets

Government policies and strategies should create environments that enable populations to consume adequate quantities of safe and nutritious foods that make up a healthy diet including low salt.

Key broad strategies for salt reduction include:

- Government policies - including economic policies and regulations to ensure food manufacturers and stores produce healthier foods or make healthy products available and affordable
- Collaboration with the private sector to improve the availability and accessibility of low-salt products
- Consumer awareness through social marketing to raise awareness of the need to reduce salt consumption
- Promotion of "healthy food" settings such as schools, workplaces and communities
- Monitoring of population salt intake, sources of salt in the diet and consumer knowledge, attitudes and behaviours relating to salt to inform policy decisions Salt reduction programmes and programmes that promote fortification with micronutrients of salt can complement each other.

Salt consumption at home can be reduced by measures such as:

- Addition of low/no salt during the preparation of food
- Non-availability of a salt shaker on the table
- Limiting the consumption of salty snacks

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• Choosing products with lower sodium content

Other local practical actions to reduce salt intake include:

- integrating salt reduction into the training curriculum of food handlers
- Removal of salt shakers and soy sauce from tables in restaurants
- Introduction of product or shelf labels making it clear that certain products are high in sodium
- Education of children and provision of a supportive environment for children so that they start early with adopting low salt diets
- Actions by the food industry should include:
- incremental reduction of salt in products over time so that consumers adapt to the taste and don't switch to alternative products
- consumer awareness activities in food outlets
- labelling sodium content of foods and meals

Response adopted by WHO

WHO guidelines on sodium and potassium provide thresholds for healthy intake. The guidelines also outline measures for improving diets and preventing NCDs in adults and children. The "Global Strategy on Diet, Physical Activity and Health" was adopted in 2004 by the World Health Assembly (WHA). It calls on governments, WHO, international partners, the private sector and civil society to take action at global, regional and local levels to support healthy diets and physical activity. In 2011, world leaders committed to reducing people's exposure to unhealthy diets and the commitment was made through a Political Declaration of the High-level Meeting of the United Nations General Assembly on Prevention and Control of NCDs. In 2013, the WHA agreed on 9 global voluntary targets for the prevention and control of NCDs, which include a halt to the rise in diabetes and obesity and a 30% relative reduction in the intake of salt by 2025. The "Implementation roadmap 2023-2030 for the global action plan for the prevention and control of NCD 2013-2030" gives guidance and a menu of policy options for Member States, WHO and other UN agencies to achieve the targets.

Source

Salt reduction global report on surveillance, available at http:// www.who.int/mediacentre/factsheets/fs393/en/

https://www.who.int/teams/noncommunicable-diseases/governance/roadmap

Compiled by

Dr M R K Perera

Epidemiology Unit

Ministry of health

Table 1: Selected notifiable diseases reported by Medical Officers of Health 18th– 24th Dec 2021 (52nd Week)

RDHS	Dengue Fever		Dysentery		Encephaliti		Enteric Fever		Food Poi-		Leptospirosis		Typhus		Viral Hep-		Human		Chickenpox		Meningitis		Leishmania-		WRCD	
	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	T*	C**
Colombo	40	6681	0	12	0	1	0	5	0	4	12	236	0	3	0	2	0	3	1	27	0	14	0	1	**43**	**100**
Gampaha	43	4207	0	5	0	7	0	1	0	0	3	337	0	9	0	4	0	5	0	28	1	17	0	13	**22**	**74**
Kalutara	20	1812	0	15	0	2	0	3	0	5	23	729	0	3	0	1	0	1	3	80	1	25	0	0	**32**	**78**
Kandy	72	1020	3	27	0	1	1	6	0	15	6	298	2	45	0	4	0	0	0	48	1	23	1	35	**54**	**100**
Matale	4	266	0	13	0	4	0	0	0	0	1	95	0	6	0	3	0	1	2	15	0	8	1	287	**48**	**100**
NuwaraEliya	7	65	1	18	0	2	0	5	0	0	0	73	0	43	0	4	0	0	1	31	0	8	0	1	**28**	**100**
Galle	44	583	1	14	0	1	0	5	0	7	14	788	0	28	0	2	0	0	0	62	1	37	0	2	**37**	**100**
Hambantota	25	404	0	20	0	2	0	2	0	9	8	290	2	77	0	8	0	0	1	56	3	38	21	523	**64**	**100**
Matara	31	600	0	8	0	1	0	1	0	0	7	359	0	17	0	3	0	0	1	60	0	11	6	344	**40**	**100**
Jaffna	74	312	0	50	0	3	1	32	0	29	5	33	30	557	0	0	0	6	3	37	0	5	0	2	**20**	**87**
Kilinochchi	9	39	0	26	0	0	0	2	0	10	2	60	4	88	0	2	0	0	0	10	0	0	0	1	**50**	**100**
Mannar	18	391	1	10	0	1	1	5	0	0	2	32	0	2	0	0	0	0	0	6	2	24	0	1	**35**	**100**
Vavuniya	3	56	0	4	0	2	0	1	0	2	0	25	0	2	0	1	0	0	0	6	0	2	0	2	**37**	**100**
Mullaitivu	0	8	0	3	0	0	1	1	0	1	0	35	0	9	0	0	0	0	0	9	0	11	0	0	**21**	**100**
Batticaloa	25	3128	2	45	0	8	0	4	0	36	2	57	0	0	0	1	0	0	4	22	2	28	0	0	**48**	**100**
Ampara	1	67	0	12	0	0	0	1	0	7	0	75	0	1	0	3	0	0	0	48	0	20	0	14	**55**	**100**
Trincomalee	30	258	0	2	0	0	0	0	0	2	0	5	0	0	0	7	0	0	0	19	0	2	0	1	**26**	**100**
Kurunegala	23	1781	0	20	0	4	0	0	0	11	12	573	1	33	0	4	0	2	3	62	2	99	12	410	**33**	**100**
Puttalam	90	554	0	2	0	1	0	0	0	2	3	34	0	17	0	2	0	1	0	19	0	38	0	11	**38**	**96**
Anuradhapur	13	236	0	16	0	2	0	1	0	3	17	272	3	30	1	7	0	0	1	36	1	51	20	340	**21**	**91**
Polonnaruwa	8	101	0	8	0	1	0	3	0	10	7	156	0	3	0	3	0	0	0	31	0	3	7	516	**35**	**100**
Badulla	78	751	1	15	0	0	0	3	0	0	8	342	2	54	2	53	0	0	0	46	0	19	1	25	**40**	**100**
Monaragala	14	170	0	18	0	0	0	3	0	6	19	453	1	39	2	109	0	1	0	30	0	68	1	52	**47**	**100**
Ratnapura	47	658	1	34	0	8	0	0	1	8	25	919	0	24	0	11	0	1	1	57	4	94	1	123	**31**	**95**
Kegalle	42	603	0	4	0	11	0	0	1	3	16	648	0	15	0	3	0	0	1	96	2	38	0	32	**38**	**100**
Kalmune	10	333	3	36	0	2	0	4	0	5	0	22	0	1	0	2	0	2	0	20	2	23	0	2	**42**	**100**
SRILANKA	**20**	**25084**	**13**	**437**	**0**	**64**	**4**	**88**	**2**	**175**	**19**	**6946**	**45**	**110**	**5**	**23**	**0**	**23**	**22**	**961**	**22**	**706**	**71**	**2738**	**38**	**97**
																									41	

Source: Weekly Returns of Communicable Diseases (esurvillance.epid.gov.lk). T=Timeliness refers to returns received on or before 17th Dec , 2021 Total number of reporting units 361 Number of reporting units data provided for the current week: 346 C**-Completeness

Table 2: Vaccine-Preventable Diseases & AFP

18th– 24th Dec 2021 (52nd Week)

Disease	No. of Cases by Province									Number of cases during current week in 2021	Number of cases during same week in 2020	Total number of cases to date in 2021	Total number of cases to date in 2020	Difference between the number of cases to date in 2021& 2020
	W	C	S	N	E	NW	NC	U	Sab					
AFP*	01	00	01	00	00	00	00	00	00	02	NA	72	NA	NA
Diphtheria	00	00	00	00	00	00	00	00	00	00	NA	00	NA	NA
Mumps	00	00	00	00	00	01	00	00	00	01	NA	70	NA	NA
Measles	00	00	00	00	00	00	00	00	00	00	NA	13	NA	NA
Rubella	00	00	00	00	00	00	00	00	00	00	NA	00	NA	NA
CRS**	00	00	00	00	00	00	00	00	00	00	NA	00	NA	NA
Tetanus	00	00	00	00	00	00	00	00	00	00	NA	05	NA	NA
Neonatal Tetanus	00	00	00	00	00	00	00	00	00	00	NA	00	NA	NA
Japanese Encephalitis	00	00	00	00	00	00	00	00	00	00	NA	04	NA	NA
Whooping Cough	00	00	00	00	00	00	00	00	00	00	NA	00	NA	NA
Tuberculosis	09	16	19	19	21	24	00	00	17	125	NA	5127	6187	NA

Key to Table 1 & 2

Provinces: **W**: Western, **C**: Central, **S**: Southern, **N**: North, **E**: East, **NC**: North Central, **NW**: North Western, **U**: Uva, **Sab**: Sabaragamuwa.

RDHS Divisions: **CB**: Colombo, **GM**: Gampaha, **KL**: Kalutara, **KD**: Kandy, **ML**: Matale, **NE**: Nuwara Eliya, **GL**: Galle, **HB**: Hambantota, **MT**: Matara, **JF**: Jaffna, **KN**: Killinochchi, **MN**: Mannar, **VA**: Vavuniya, **MU**: Mullaitivu, **BT**: Batticaloa, **AM**: Ampara, **TR**: Trincomalee, **KM**: Kalmunai, **KR**: Kurunegala, **PU**: Puttalam, **AP**: Anuradhapura, **PO**: Polonnaruwa, **BD**: Badulla, **MO**: Moneragala, **RP**: Ratnapura, **KG**: Kegalle.

Data Sources:

Weekly Return of Communicable Diseases: Diphtheria, Measles, Tetanus, Neonatal Tetanus, Whooping Cough, Chickenpox, Meningitis, Mumps., Rubella, CRS,

Special Surveillance: AFP* (Acute Flaccid Paralysis), Japanese Encephalitis

CRS =**Congenital Rubella Syndrome

NA = Not Available

Number of Malaria Cases Up to End of December 2021,

06

All are Imported!!!

Comments and contributions for publication in the WER Sri Lanka are welcome. However, the editor reserves the right to accept or reject items for publication. All correspondence should be mailed to The Editor, WER Sri Lanka, Epidemiological Unit, P.O. Box 1567, Colombo or sent by E-mail to **chepid@sltnet.lk. Prior approval should be obtained from the Epidemiology Unit before publishing data in this publication**

ON STATE SERVICE

Dr. Samitha Ginige
Actg. CHIEF EPIDEMIOLOGIST
EPIDEMIOLOGY UNIT
231, DE SARAM PLACE