

forward

Reducing risks - improving outcomes

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Salt Assault

Think of a deadly white chemical and salt would probably not feature in your top five. Time to think again. Salt is receiving increasing attention from health professionals in New Zealand and around the world. But why? What's wrong with the extra splash of salt across my fish and chips? What dangerous substance is lurking inside that pie or loaf of bread? In a word, 'sodium'.

Too much sodium raises the blood pressure, and raised blood pressure increases the risk of stroke and heart attack. In fact, high blood pressure is one of the leading causes of preventable death. One way of significantly reducing blood pressure is to reduce sodium intake.

Exactly how sodium contributes to a rise in blood pressure is not clear. The kidney seems unable to cope with increased levels of sodium so leaves it in the bloodstream where it can cause havoc. But whatever the cause, medical specialists are unified in their cry to reduce salt intake to improve the future health of many New Zealanders.

New Zealanders consume an average of 9 grams (9000mg) of salt a day. The World Health Organisation recommends an intake limit of between 3g to 6g a day depending on body mass. This means most Nzers need to reduce their salt intake by at least 50 per cent. But how?

According to Stroke Foundation of NZ Medical Adviser, Dr Harry McNaughton, there needs to be clearer dietary information on food to enable consumers a better choice. He would also like to see legislation limiting salt content in processed food: "It would be lovely to think food manufacturers and restaurants would limit

Reduced sodium intake can reduce risks of stroke and heart attack

the amount of salt in their foods simply by recommending it, but it hasn't happened so far."

The traditional reason for not lowering salt content in processed foods has been taste. According to Dr McNaughton, this argument no longer has credibility: "Studies have clearly shown a consumer will not taste a five per cent salt reduction in processed foods. Reduce content by this amount over four to five years and that is a change of more than 20 per cent salt content, which is good news for any consumer. This kind of reduction can lower blood pressure dramatically in many cases."

Part of the problem is you cannot even taste most of the salt in processed foods. According to Samantha Heller, senior clinical nutritionist at New York University Medical Centre in New York City: "high sodium foods do not necessarily taste salty, because sodium is used not just for taste but as a preservative, flavour enhancer and for texture."

A quick look at the dietary information on most processed foods reveals some amazingly high sodium levels. Just one cup of canned soup can contain more than 50 percent of the recommended sodium daily intake. A serving of some menu items in a restaurant can put a diner over their recommended intake in just one meal.

A loaf of bread, pack of cereal or can of baked beans indicates just how dangerously high sodium and carbohydrate levels are in many processed foods (see table on back page). These examples stress the importance of a national reduction in the amount of sodium in processed and restaurant foods.

"a small reduction in salt intake can make a large difference to future health prospects"

- Dr Harry McNaughton

Sodium intake

- Most Nzers consume an average 9grams of salt a day - this is about 3.6 grams of sodium. This intake needs to be reduced by at least 50 per cent.
- Most of someone's sodium intake comes in hidden forms by way of processed or manufactured foods - with about 15% added by way of home cooking or salt shaker.
- Foods in NZ that contribute a large amount of sodium include: bread, butter, cheese, biscuits, canned fish, processed meats, some breakfast cereals, most take-away food, most sauces and most canned or processed food.
- The change in blood pressure for any given amount of sodium consumption depends on the person's age and existing blood pressure. Blood pressure decreases from reducing salt intake are greater for those who are older and have higher existing blood pressure.
- Reducing sodium intake should be one part of a wider strategy of lowering blood pressure - sodium is not the only contributor.

Stroke Foundation Contact Details

If you have any questions about stroke or the Stroke Foundation please contact the National Office or your Regional Office.

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SPARCL sheds new light on stroke treatment

A landmark clinical trial in the USA has produced some good news for stroke survivors. The trial showed Lipitor® can reduce the chances of additional strokes or heart attacks for survivors.

The Stroke Prevention by Aggressive Reduction in Cholesterol Levels (SPARCL) trial showed 80mg of Lipitor a day could reduce the possibility of further stroke and heart attack for patients with a recent stroke or transient ischemic attack, and without known coronary heart disease.

The trial showed additional strokes were reduced by up to 16 percent, with a 35 percent reduction in the risk of major heart attacks. The trial did show

a very small increase in the amount of haemorrhagic stroke.

According to SPARCL investigator, Dr Michael Welch, the SPARCL trial findings are significant because they show Lipitor may be a significant help to patients who have had a stroke as they are at a much greater risk of suffering another one. To date, treatment options to reduce this risk have been limited.

In praising this trial, the New England Medical Journal also lamented the previous lack of stroke-focused clinical trials. According to the Journal, stroke neurologists have so often had to rely on findings from heart-focused clinical trials. In these trials, impact on stroke would often be a "side-effect" of statin therapy for the heart, rather than a specific look at stroke.

Lipitor Consumer Information.

Lipitor (atorvastatin 10 mg, 20 mg and 40 mg tablets) is a prescription medicine for the treatment of raised blood lipid levels (cholesterol) and for the reduction in the risk of events like stroke or a coronary in patients with existing CHD. Further information on Lipitor is available from www.medsafe.govt.nz or from Pfizer New Zealand Limited, P O Box 3998, Auckland. Phone 09 638 0000. Lipitor is a registered trademark of Pfizer New Zealand Limited.

Go Ask Alice

Eleven year old Alice Johns used her creative talents to promote the South Canterbury Stroke Club at the CCS Xmas Tree Festival in Timaru. Alice used Stroke Club brochures to make origami trees, butterflies and peacocks.

Alice John's striking creation ▶



First Aiders Clear on Stroke

Thanks to New Zealand Red Cross (NZRC) and St Johns for taking up a consistent Stroke awareness and risk reduction message.

Yvonne Gray, NZRC's National Training Manager, has incorporated the Stroke FAST and risk reduction information into their latest First Aid manual, which goes out to more than 30,000 First Aid trainees annually.

St John's External Education Manager, Ken Coombes, is also incorporating the Stroke message more clearly into their training, as well as distributing Stroke FAST cards. Like NZRC, St Johns train thousands of First Aiders annually.

This cooperation is a great example of how Stroke works with First Aid and Healthcare professionals to ensure New Zealanders receive a consistent message about Stroke recognition and response. Together we can save lives and reduce the risk of stroke.



▲ Mark Vivian, Stroke Foundation CEO

Guardian Alarm Saves Stroke Survivor from Wasps

Earlier this year, Masterton's Mary Everitt survived a frenzied half hour wasp attack after suffering a stroke in her garden. Her Guardian Healthcare personal medical alarm proved to be her lifesaver.

Mrs Everitt, 85, had a stroke while gardening. She fell near a wasp nest and was attacked by thousands of wasps. She activated her Guardian healthcare personal alarm – the first time she had needed to use it since getting it in 2002. Help arrived within minutes.

"If it wasn't for the alarm and neighbours, things would have been very different," her daughter, Trish Cameron, told the Wairarapa Times Age.

According to Guardian Healthcare, Mrs Everitt had responded to a telephone reminder to test her medical alarm just two days prior to the stroke and wasp attack. The alarm proved to be in good working order.

Mrs Everitt is currently doing well and has regular contact with her Stroke Foundation Field Officer.

How the alarm system works:

The Guardian Healthcare personal alarm system provides two-way voice communication and is monitored 24 hours, seven days a week by a team of dedicated healthcare professionals. Guardian stays on line until help arrives. Alarm customers are encouraged to test their alarms each month.

For more information about the alarms, contact Guardian Healthcare on 0800 60 80 99 or visit the website www.guardianhealthcare.co.nz.

Reducing Risk - Improving Outcomes

Yesterday, I heard the experience of a 57-year-old businessman at a large city hospital with a suspected stroke. His caregivers rushed him to the hospital where the duty nurse told them he would have to wait over night until stroke-qualified staff could see him. The man was left to wait on a hospital trolley for hours and hours. He had to wait days for the result of a scan.

This is simply not good enough! The man needed to be seen within three hours of having the suspected stroke and treated if necessary.

While the Stroke Foundation has made some significant progress in recent years - and we do hear some very encouraging stories - this story highlights how inconsistent stroke awareness and treatment still is in this country. It has got to change and we are committed to help make that happen.

Our National Council has crystallised our mission - reducing risk, improving outcomes. We have committed to four priorities: saving lives, improving stroke outcomes, enhancing life after stroke, and building the capacity of the Foundation.

Our four regions continue to improve their strong Field Officer services to stroke survivors and families - a major part of our work to enhance life after stroke. With your financial support we will also publish a caregivers booklet and resource for

young people affected by stroke.

To continue to improve outcomes for stroke victims, I will be seeking funding to continue our work with DHB's. We want to expand this to include a project to assist GP's and PHO's improve the quality of stroke risk factor management and post-stroke health care.

We have several large projects underway which we believe will save lives. We will be posting stroke awareness information to at least 100,000 households this year, thanks to a grant from Pub Charities NZ. In 2008, we intend focussing public awareness on blood pressure as a stroke risk factor. Not enough NZers understand the importance of regularly checking their blood pressure and reducing high blood pressure. Again, I am sourcing the necessary funding for this project we'll call "Take the pressure off stroke", which will involve free blood pressure checks at prominent venues throughout NZ.

Over the next 12 months, I hope we can strengthen our partnership with you to build on our legacy of innovation and achievement. We expect to be able to report gains in stroke awareness and risk reduction this time next year. Enclosed you will find a request for your financial support. For the sake of thousands of New Zealanders, please consider making a donation toward our successes.

Stroke Input to Carers Strategy

About one in every six New Zealanders provides significant care for sick or disabled family members. Carers of stroke survivors will need no reminding that their care and commitment can so often be lonely and unsupported. In recognition of this, the Stroke Foundation, as part of the NZ Carers Alliance, has helped convince the NZ government of the importance of a comprehensive Carers Strategy.

Legislation to achieve thoughtful support of carers is in place in the United Kingdom, where Prime Minister Tony Blair championed a strategy in 1999. Blair's father had a stroke when he was child and the experience influenced his support for progressive family care policies. Australia is also progressive for carers, with legislation and services in place nationally and in all

states: services for carers include access to free counselling, and programs for young carers.

In announcing the NZ government's commitment to creating the Strategy, Disability Issues Minister, Hon. Ruth Dyson, announced a nationwide public consultation process, in partnership with the Carers Alliance.

This means the Stroke Foundation and caregivers of stroke survivors will have an opportunity to help shape future policy on a range of relevant issues such as: access to employment, support for carers, training and funding for carers.

To have your say, contact any Stroke Regional Office to register your desire to be included in the consultation.

Salt in America

The American Medical Association (AMA) has recommended the following:

- the Food and Drug Administration (FDA) should revoke the "generally recognized as safe" (GRAS) status of salt and to develop regulatory measures to limit sodium in processed and restaurant foods;
- a minimum 50 percent reduction in the amount of sodium in processed foods, fast food products and restaurant meals to be achieved over the next decade;

- work with appropriate partners to educate consumers about the benefits of long-term, moderate reductions in sodium intake;
- discuss with the FDA ways to improve labelling to assist consumers in understanding the amount of sodium contained in processed food products and to develop label markings and warnings for foods high in sodium.

Medical experts in New Zealand endorse these recommendations and want them to be accepted here too.

Who put the Salt in my Cornflakes?

How much sodium in salt? It is complex, and needs to be made simple by food manufacturers. Let's look at Skippy Cornflakes for example: 900mg of sodium in a 300g pack means there is 2700mg (2.7g) of sodium in that pack. Multiply this amount of sodium by about 2.5 and you get the approximate amount of salt content in that pack. In the case of Skippy cornflakes, some 6g of salt! This is approximately three teaspoons of salt (ie a teaspoon is about 2g of salt).

Some Cereal Brands	Sodium/100g
Sanitarium Skippy Cornflakes 300g	920mg
Kelloggs Special K	536mg
Kellogg's All Bran 350g	380mg
Hubbard's Light & Right 525g	330mg
Pam's Fruit & Fibre	311mg
Sanitarium Weetbix 375g	280mg
Sanitarium Simply Natural 750g	78mg
Hubbards Thank Goodness 400g	52mg
Pam's Toasted Breakfast Muesli 750g	42mg
Kelloggs Just Right 560g	30mg
Sanitarium Honey Puffs 250g	6mg

Some Bread Brands	Sodium/100g
Nature's Fresh White Sandwich 700g	545mg
Pam's White 700g	538mg
Budget White Toast 600g	537mg
Freya's Traditional White 750g	530mg
Nature's Fresh Multigrain Toast 700g	530mg
Mackenzie High Country Southern Grain 800g	525mg
Freya's Multigrain 750g	515mg
Country Split 450g	515mg
Ploughmans Barley & Sunflower 750g	510mg
Pam's Multigrain 700g	500mg
Simply Organic 700g	450mg
Molenberg Balance "67 calories a slice"	450mg
Vogels Original Mixed Grain 750g	425mg
Molenberg Complete 700g	410mg
Spicy fruit loaf 500g	360mg
Burgen Barley & Sunflower 700g	320mg

Random Food Items	Sodium/100g
Watties Baked Beans with sausages 300g	470mg
Watties Baked Beans 300g	333.3mg
Oak Cream of Corn 410g	135mg
Griffins Vanilla Wine 250g	120mg



Photo: Martin Robinson

Salt Assault: What should we do?

Resist adding salt to foods and only purchase salt-free canned goods. Since most salt comes from processed foods, breads and canned goods, it should not be that hard to avoid added sodium. But what if you truly crave salt?

Dr Fuhrman gives this advice from Eat to Live,

"If you desire to salt your food, do so only when it is on the table and you are ready to eat it. It will taste saltier if the salt is right on the surface of the food. You can add lots of salt and hardly taste it if the salt is added to the vegetables or soup while they are cooking. Condiments such as tomato sauce and so on are often very high in sodium, so either resist them or use them sparingly.

"If you don't use salt, your taste buds adjust over time and your sensitivity to salt taste increases. In fact, by reducing salt your taste sensitivity to all unprocessed foods will increase. You will taste flavour subtleties in fruits and vegetables."

Stroke Foundation of NZ Inc is grateful for the support of the following organisations:

