



WEEKLY EPIDEMIOLOGICAL REPORT

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

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Excess salt consumption and risk of NCD Part I

This is the first of series of two articles

Overview

With the rapid urbanization and changing, lifestyles people around the world are consuming more energy-dense foods that are high in saturated fats, trans-fats, sugars and salt. Highly processed foods are increasing in availability and becoming more affordable. At the same time, as their eating patterns shift, people are consuming fewer fruit vegetables and dietary fibre (such as whole grains), which are key components of a healthy diet.

Salt is the main source of sodium and increased consumption is associated with hypertension and increased risk of heart disease and stroke, whereas fruits and vegetables contain potassium, which contributes to reducing blood pressure. Salt in the diet can come from processed foods, either because they are particularly high in salt (such as ready meals, processed meats like bacon, ham, cheese, salty

snack foods, and instant noodles, among others) or because they are consumed frequently in large quantities (such as bread and processed cereal products), other than added salt during cooking or at the table (soy sauce, fish sauce and table salt). Sodium is also found naturally in a variety of foods, such as milk, meat and shellfish and food additives contained in sodium glutamate. However, some manufacturers are reformulating recipes to reduce the salt content of their products and consumers should read food labels and choose products low in sodium.

WHO Recommendations for salt reduction

- For adults: WHO recommends that adults consume less than 5 g (just under a teaspoon) of salt per day
- For children: WHO recommends that the recommended maximum intake of salt for adults be adjusted downward for children aged 2 to 15 years based on their energy

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requirements relative to those of adults. This recommendation for children does not apply to the period of exclusive breastfeeding (0–6 months) or complementary feeding with continued breastfeeding (6–24 months). All salt that is consumed should be iodized or “fortified” with iodine, a mineral essential for healthy brain development in the foetus and young child, and for optimizing mental function in general.

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Ministry of health

Effects of Salt, sodium and potassium on the human body

- Sodium is an essential nutrient necessary for the maintenance of plasma volume, acid-base balance, transmission of nerve impulses and normal cell function.
- Excess sodium intake is associated with adverse health outcomes, including increased blood pressure.
- Potassium is an essential nutrient needed for the maintenance of total body fluid volume, acid and electrolyte balance, and normal cell function. Increased potassium intake as opposed to sodium reduced systolic and diastolic blood pressure in adults.

Source

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

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

Table 1 : Water Quality Surveillance Number of microbiological water samples November 2021			
District	MOH areas	No: Expected *	No: Received
Colombo	15	90	NR
Gampaha	15	90	NR
Kalutara	12	72	NR
Kalutara NIHS	2	12	NR
Kandy	23	138	NR
Matale	13	78	NR
Nuwara Eliya	13	78	NR
Galle	20	120	NR
Matara	17	102	NR
Hambantota	12	72	NR
Jaffna	12	72	NR
Kilinochchi	4	24	NR
Manner	5	30	NR
Vavuniya	4	24	NR
Mullatvu	5	30	NR
Batticaloa	14	84	NR
Ampara	7	42	NR
Trincomalee	11	66	NR
Kurunegala	29	174	NR
Puttalam	13	78	NR
Anuradhapura	19	114	NR
Polonnaruwa	7	42	NR
Badulla	16	96	NR
Moneragala	11	66	NR
Rathnapura	18	108	NR
Kegalle	11	66	NR
Kalmunai	13	78	NR

* No of samples expected (6 / MOH area / Month)
NR = Return not received

Table 1: Selected notifiable diseases reported by Medical Officers of Health 11th-17th Dec 2021 (51st 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 (esurveillance.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

11th–17th Dec 2021 (51st 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*	00	01	00	00	00	00	00	00	00	01	01	70	33	112.1,%
Diphtheria	00	00	00	00	00	00	00	00	00	00	00	00	00	0%
Mumps	00	00	00	00	00	01	00	00	00	01	00	70	167	- 58.0 %
Measles	00	00	00	00	00	00	00	00	00	00	00	13	50	- 74.%
Rubella	00	00	00	00	00	00	00	00	00	00	00	00	00	0%
CRS**	00	00	00	00	00	00	00	00	00	00	00	00	00	0%
Tetanus	00	00	00	00	00	00	00	00	00	00	00	05	07	-28.5 %
Neonatal Tetanus	00	00	00	00	00	00	00	00	00	00	00	00	00	0%
Japanese Encephalitis	00	00	00	00	00	00	00	00	00	00	00	04	31	- 87 %
Whooping Cough	00	00	00	00	00	00	00	00	00	00	00	00	09	- 100%
Tuberculosis	81	00	24	00	02	00	08	01	12	134	83	5002	6187	- 19.1 %

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

Influenza Surveillance in Sentinel Hospitals - ILI & SARI							
Month	Human				Animal		
	No Total	No Positive	Infl A	Infl B	Pooled samples	Serum Samples	Positives
December							

Source: Medical Research Institute & Veterinary Research Institute

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@slt.net.lk. **Prior approval should be obtained from the Epidemiology Unit before publishing data in this publication**

ON STATE SERVICE

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