DRIVING INNOVATION, ENHANCING CARE: LIMITING SODIUM TO 2000 MG IN DAILY HOSPITAL MEALS

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CONTENT OF PRESENTATION

- Introduction
- Rationale and needs for the innovation
- Phase 1 Innovation
- Phase 2 Innovation
- Conclusion

INTRODUCTION

- Excessive sodium intake is a global public health concern, with significant implications for cardiovascular health, hypertension, and chronic kidney disease.
- The global mean sodium intake of adults is 4310 mg/day sodium.
- Studies have shown that excessive dietary sodium contributes to over 1.65 million deaths annually due to its' association with elevated blood pressure and related disease.
- A reduction in daily intake of about 1 gram can lower BP by an average of 2 mmHg, which can reduce the incidence of stroke by about 10% and that of heart disease by 5% (WHO 2010).

BURDEN IN MALAYSIA

- The prevalence of hypertension in Malaysian adult is currently at 29.2% (NHMS 2024).
- 76% of Malaysian adults consumed an average of 2,892 mg sodium per day, exceed WHO recommendation of 2000 mg/day (NHMS 2024).
- Malaysia's Salt Reduction Strategy to Prevent and Control Non-communicable Diseases (NCD) aims to lower the population's sodium intake to 2,400 mg per day by 2025.
- Therefore, more impactful and targeted interventions are urgently needed to achieve this goal.

RATIONALE

- Hospital diets play a critical role in managing sodium intake, particularly for patients with hypertension, heart disease, and kidney-related conditions.
- Challenges:
 - Inconsistent meal preparation practices
 - Inadequate nutritional training among kitchen staff
 - Limited use of sodium control tools
- Studies on sodium estimation tools, have demonstrated the feasibility of using technology to assess and manage sodium intake effectively.
- However, there is limited research on tools that assist meal preparation, specifically aimed at reducing sodium content in a systematic and user-friendly manner.

NEED FOR THE INNOVATION

- Existing sodium reduction strategies:
 - focus heavily on estimating sodium content in prepared meals or modifying procurement practices
 - Do not address the systematic integration of sodium reduction strategies during meal preparation
- Hospital food services require tools that not only estimate sodium but also guide kitchen staff in preparing meals that adhere to recommended sodium levels without compromising taste, variety, or patient satisfaction.

RECOMMENDATION

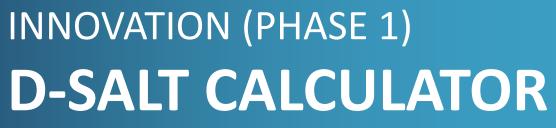
- Recommended Nutrient Intakes for Malaysia :
 - Adequate Intake (AI): 120-370mg/day(infants 0-12mths), 1000-1500mg/day (children & adolescent), 1500mg/day (adults);
 - Tolerable Upper Intake Levels (UL): 1000mg/day (1-3yr),1400mg/day (4-8yr), 2000mg/day (9-13 yr), 2300mg/day (14- adults).

(A report of the TWG on Nutritional Guidelines, 2017)

WHO recommended maximum level of **2** g/day sodium in adults, applies to all individuals with or without hypertension, including pregnant/lactating individuals, except for individuals with illness or taking drug therapy that may lead to hyponatremia or acute build-up of body water, or require physician-supervised diets (eg. Patient with heart failure and those with type 1 diabetes). (WHO 2012)









HOSPITAL FOOD SERVICES WORKFLOW PROCESSES









ANUGERAH INOVASI KEMENTERIAN KESIHATAN MALAYSIA

2023

Projek Inovasi Proses

KalkulatorDa



Pn Dalila Othman



Mengenal pasti kandungan sodium dalam makanan dan minuman menggunakan SISTEM POINT SODIUM dalam langkah pengurangan pengambilan garam

200mg SODIUM = 1 POINT SODIUM

HIDANGAN UTAMA

HIDANGAN SAMPINGAN

SARANAN PENGAMBILAN SEHARI: 2000mg SODIUM (1 paras sudu teh garam) = 10 POINT SODIUM KUMPULAN POINT SODIUM / HARI MAKANAN SEMULAJADI

6-8

0-2











GAN DAN FUNGSI **RESEPI PIAWAI** PENYEDIAAN MAKANAN DI HOSPITAL

TARIKH: 13 JUN 2023 HARI: SELASA MASA: 2.30PM SECARA ATAS TALIAN (GOOGLE MEET) SILA IMBAS KOD OR DIBAWAH BAGI PAUTAN GOOGLE ME





















INNOVATION (PHASE II)

- Collaboration with MMU (Final Year student project): Upgrade innovation from Excel to Desktop applications
- Since July 2024, Dietetic and Food Service Department HPSF has utilized a digital meal planning tool (PlanPrep), a more user-friendly sodium content estimation during meal preparation.
- It integrates sodium and macronutrient data with standard recipes and generates a quantity of ingredients to be prepared based on the total count of diet orders at each meal.
- This application ensures consistency and compliance in sodium control across a variety of menus in the hospital.





WAY FORWARD

- Limitation of current desktop application
 - Lacks multi-user interface capabilities, accessibility, scalable data storage
 - Not able to support real-time database updates
- Plan: Upgrade to a **web-based digital tool** to ensure optimal performance and feasibility of implementing hospital meal preparation that adheres to the <2000 mg sodium/day target.
- Research protocol on development and validation of a web-based digital tool already submitted through NMRR, applying for MOH Research Grant to support the cost.

CONCLUSION

- Adherence to sodium limitation of 2000 mg/day in MOH hospital diet is crucial in line with the commitment to the WHO Global Nutrition Target (30% salt reduction by 2025) and the Sustainable Development Goals (SDG 3: health and well-being).
- By using innovative processing techniques and creative combination of natural flavour enhancers, hospital food services can successfully lower sodium levels without compromising product quality.

