High Level Forum on Elimination of IDD in China
—Celebration of the 17th National IDD Day

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Health News and Communication Centre, Ministry of Health (MOH), People’s Republic of China and China Center of Diseases Control (CDC) organized the “High Level Forum on Elimination of IDD”, supported by UNICEF, on May 15, 2010 to celebrate the 17th National IDD Day. More than 100 participants were invited to attend the one-day Forum in Beijing. Representatives from relative ministries including MOH, Ministry of Industry and Information, Bureau of Radio and Television, General Bureau of Industrial and Commercial Administration, General Administration of Quality and Supervision, All-China Federation of Women, China Disable Person’s Federation, Women and Children Working Committee of State Council and China Salt), and from international organizations (WHO,UNICEF, ICCIDD and GAIN ) were invited. Scientists from China CDC, National IDD Advisory Committee (NIDDAC), China Endocrinology Association, China Nutrition Association, China Endemic Diseases Association, Medical Universities and China Food Safety and Risk Evaluation Committee; public health workers from Tibet, Xinjiang, Shanghai, Liaoning, Zhejiang, Fujian, Hainan Provinces participated the meeting. Journalists from news media were also invited.

In the opening session, after the forum was opened by Dr. Bai Huqun, Deputy Director, Department of Disease Prevention and Control, MOH, Dr. Yin Yin Nwe, UNICEF Representative to China and Mr. Cris Tunon, Senior Program Manager, WHO China Representative Office gave their speeches highlighting the remarkable achievements China has made in the effort to eliminate IDD through USI as a major public health problem in China. They also stressed the importance of China’s success in setting the example for the world.

The first session was the following invited lectures focusing on different hot issues raised recently by public media of China:

1. Global trends in programming to eliminate iodine deficiency (Jonathan Gorstein, From University of Washington, USA);
2. The National Regulation on Salt Iodization needs to be modified (Weipin Teng, from China Endocrinology Association);
3. The historical progress and further challenge in the elimination of iodine deficiency in China (Zupei Chen, from NIDDAC and ICCIDD);
4. Iodine intake and incidence and prevalence of thyroid diseases (Rajan Sankar, from Gain);
5. The impacts of iodine on current Chinese health status and their strategy (Bingyin Shi, from China Endocrinology Association).

The second session was for reporting results from the investigation on iodine nutritional status and analysis on iodine content in daily food in the population living in coastal areas. This project, supported by MOH and UNICEF, was carried out in response to recent complains on USI (such as iodine excess, increasing incidence of thyroid diseases including papillary thyroid cancer,
after USI and the possibility of the “double tracts” salt supply in the coastal areas due to too much more intake of seafood.). Liaoning, Shanghai, Zhejiang and Fujian Provinces were selected from 10 coastal provinces for this important study. There are four presentations showing the results as follows:

1. Recent iodine nutritional status in the population living in four coastal provinces (Hongmei Shen, from National Endemic Disease Control Centre, China CDC and Shurong Zhou, from Shanghai CDC);
2. The iodine intake from daily food in the population of 4 provinces Yongning Wu, from China CDC);
3. The risk evaluation of USI on iodine nutritional status in China (Zhaoping Liu, from new National Food Safety and Risk Evaluation Committee);
4. knowledge assessment in urban population from selected cities for the “double tracks” salt supply (Dianjun Sun, from National Endemic Disease Control Centre, China CDC)

All the presentations provided very valuable data for continuous need to have USI program in these areas regarding the following facts:

(1) The 2009 coastal residents’ dietary iodine intake survey was carried out independently, aimed to assess the actual dietary iodine exposure in the 4 coastal province/municipality. The report showed that since China adopted USI, the population iodine intake level can meet the daily requirement; and it is below the WHO and European Union’s Tolerable Daily Intake (TDI 600µg/d) and the upper limit (UL) specified by WHO/UNICEF/ICCIDD (1100µg/d) and Chinese Nutrition Society (1000µg/d); iodine from USI is the major contributor to iodine intake in people’s diet, the contribution rate of iodine from iodized salt is 63.5%; therefore the population average dietary iodine intake level is adequate and safe, not in excess.

(2) The aim of risk evaluation was to address whether under the current USI strategy, the residents in coastal areas are exposed to excessive dietary iodine intake. The Evaluation concludes:

   a. The urinary iodine concentrations and dietary iodine intake data are consistent, the overall iodine nutrition of the residents living in coastal areas is appropriate and safe; salt iodization did not cause excessive dietary iodine intake in residents living in coastal areas. In contrast, due to relatively low iodized salt coverage rate in both coastal urban and rural areas, iodine nutrition of the coastal residents is lower than inland rural areas in the same province. Iodine nutrition is insufficient in some pregnant women living in coastal areas, has a higher risk of iodine deficiency, require special attention.

   b. In areas of water iodine concentration < 150µg/L, the residents’ overall iodine nutrition is appropriate and safe; the risk of iodine deficiency is greater than iodine excess, particularly if iodized salt is not consumed, it is extremely necessary to continue the salt iodization strategy in order to control the risk of iodine deficiency.

   c. There are different levels of iodine deficiency in different parts of China, iodine from iodized salt is the dominant source of iodine in people’s diet; in light of the achievements have made in China in the prevention and control of IDD through salt iodization, it is considered the health benefit of salt iodization is far greater than the possible health risk.

The presentations from 4 provinces or municipality reported the results of
population iodine nutrition survey in the respective 4 coastal Municipality/provinces. In addition, Representatives from Xijiang and Tibet reported recent progresses made in these two Autonomous Regions under the leadership and support from both central and local governments in the third session of the Forum. The subsidy policy on salt iodization program in these two Autonomous Regions are still persisted by local governments. The total input has been increased to 30 million RMB in Tibet in 2009.

The Health News and Communication Centre of MOH hold a press conference during the Forum, Zupei Chen, Weixin Dai (endocrinologist) Yongning Wu, Zhaoping Liu and Hongmei Shen participated in the conference met with news journalists to introduce the major achievements, recent results of the survey in coastal provinces and the following conclusion of the Forum, and they answered questions from journalists. China Central Television News reported the hot issues from the Forum and the Press Conference in the evening National news, and at the same day, a special program entitled “The road to the health” focus on IDD and USI. Zupei Chen, Weixin Dai (endocrinologist) and Junshi Chen (nutritionist) were invited as guests to the program.

In conclusion:
1. The current iodine nutritional status is adequate and safe, in the population of China, including the people living in coastal provinces and there is no iodine excess.
2. Iodine intake from iodized salt is the major contributor to iodine intake, which covered 63% of the total iodine from daily food. It reveals that USI program should be strengthened. Otherwise, iodine deficiency will be re-emerged if USI is stopped.
3. Although there were different views as to the causal adverse effect of USI and thyroid diseases there was unanimous agreement that USI is the most effective way of eliminating IDD in China and as a national policy it must be sustained.
4. The independent evaluation on safety and risk of USI, recently by the newly established “China Food Safety and Risk Evaluation Committee” under the leadership directly by State Council, strongly declares that the population (including the people living in coastal areas) average dietary iodine intake level is adequate and safe after USI program and salt iodization did not cause excessive dietary iodine intake in residents living in coastal areas although they consume more seafood than people living in inland.
5. Recognizing the great achievements have been made in the passing 15 years, USI is successful in sustained elimination of iodine deficiency in China, combined with effective monitoring system with reliable quality control and data communication.