

America: Time to shake the salt habit?

March 28 2013

The love affair between U.S. residents and salt is making us sick: high sodium intake increases blood pressure, and leads to higher rates of heart attack and strokes. Nonetheless, Americans continue to ingest far higher amounts of sodium than those recommended by physicians and national guidelines.

A balanced review of the relevant literature has been published in the March 27, 2013 edition of *The New England Journal of Medicine*. Theodore A. Kotchen, M.D., professor of medicine (endocrinology), and associate dean for clinical research at the Medical College of Wisconsin, is the lead author of the article.

Dr. Kotchen cites correlations between blood pressure and [salt intake](#) in a number of different studies; typically, the causation between lowering salt intake and decreased levels of blood pressure occur in individuals who have been diagnosed with hypertension. Although not as pronounced, there is also a link between salt intake and blood pressure in non-hypertensive individuals. Additionally, recent studies have demonstrated that a reduced salt intake is associated with decreased cardiovascular disease and decreased mortality.

In national studies in Finland and Great Britain, instituting a national salt-reduction program led to decreased sodium intake. In Finland, the resulting decrease in systolic and [diastolic blood pressures](#) corresponded to a 75 – 80 percent decrease in death due to stroke and [coronary heart disease](#). Nevertheless, not all investigators concur with population-based recommendations to lower salt intake, and the reasons for this position

are reviewed.

"Salt is essential for life, but it has been difficult to distinguish salt need from salt preference," said Dr. Kotchen. "Given the medical evidence, it seems that recommendations for reducing levels of [salt consumption](#) in the general population would be justifiable at this time." However, in terms of safety, the lower limit of salt consumption has not been clearly identified. In certain patient groups, less rigorous targets for salt reduction may be appropriate.

Provided by Medical College of Wisconsin

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