

Dietary constituents minimally attenuate sodium-BP link

5 March 2018



but not sodium/potassium-BP, correlations were attenuated with control for [body mass index](#). Significant positive relations to BP of urinary sodium were seen for normal-weight and obese participants; overweight individuals had weaker correlations. Potassium intake blunted the sodium-BP correlation at lower, but not higher, levels of 24-hour sodium excretion.

"These findings underscore the importance of reducing salt intake for the prevention and control of prehypertension and hypertension," the authors write.

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(HealthDay)—Other dietary components have a minimal impact on attenuating the adverse association of dietary sodium with blood pressure (BP), according to a study published online March 5 in *Hypertension*.

Jeremiah Stamler, M.D., from Northwestern University in Chicago, and colleagues examined whether the relationship between [dietary sodium](#) and BP is modulated by other dietary factors.

The researchers observed direct relations to BP for 24-hour [urinary sodium excretion](#) and the urinary sodium/potassium ratio among 4,680 men and women aged 40 to 59 years of age, with control for multiple non-dietary factors, but not body mass index. Among the 2,195 American participants, two standard deviation higher 24-hour urinary sodium excretion correlated with a 3.7 mm Hg higher systolic BP. After controlling for 13 macronutrients, 12 vitamins, seven minerals, and 18 amino acids, as well as for sex, age, race, and socioeconomic strata, these correlations persisted. Sodium-BP,

APA citation: Dietary constituents minimally attenuate sodium-BP link (2018, March 5) retrieved 10 October 2022 from <https://medicalxpress.com/news/2018-03-dietary-constituents-minimally-attenuate-sodium-bp.html>

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