

## Guest Editorial



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### More Evidence Salt Substitutes Lower Risk of CVD and Death

Dietary salt substitutes not only lower blood pressure but also have a clear impact on hard clinical endpoints, lowering the risk of myocardial infarction (MI), stroke, and death from all causes and cardiovascular disease (CVD), a meta-analysis show.

The blood pressure–mediated protective effects of salt substitutes on CVD and death are likely to apply to the roughly 1.28 billion people around the world who have high blood pressure, the researchers say.

"These findings are unlikely to reflect the play of chance and support the adoption of salt substitutes in clinical practice and public health policy as a strategy to reduce dietary sodium intake, increase dietary potassium intake, lower blood pressure and prevent major cardiovascular events," they write.

The study was published online August 10 in *Heart*.

#### Strong Support for Landmark Study

In salt substitutes, a proportion of sodium chloride is replaced with potassium chloride. They are known to help lower blood pressure, but less is known about their impact on hard clinical endpoints, Maoyi Tian, PhD, with Harbin Medical University, Harbin, China, and the George Institute for Global Health, Sydney, Australia, and colleagues note in their article. In the landmark Salt Substitute and Stroke Study (SSaSS), salt substitutes cut the risk of MI, stroke, and early death, as reported previously by [theheart.org](http://theheart.org) | [Medscape Cardiology](http://MedscapeCardiology.com). But SSaSS was conducted in China, and it was unclear whether these benefits would apply to people in other parts of the world.

The proportion of sodium chloride in the salt substitutes varied from 33% to 75%; the proportion of potassium ranged from 25% to 65%. Each 10% lower proportion of sodium chloride in the salt substitute was associated with a 1.53 mm Hg (95% CI, –3.02 to –0.03;  $P = .045$ ) greater reduction in SBP and a 0.95 mm Hg (95% CI, –1.78 to –0.12;  $P = .025$ ) greater reduction in DBP. Reductions in blood pressure appeared consistent, irrespective of country, age, sex, history of high blood pressure, weight, baseline blood pressure, and baseline levels of urinary sodium and potassium. Americans put salt on everything and don't even think about it. The salt substitutes are very helpful," Contreras told [theheart.org](http://theheart.org) | [Medscape Cardiology](http://MedscapeCardiology.com). "People who don't have high blood pressure should limit salt intake because what we have seen is that if you have high blood pressure in your family — even if you don't have high blood pressure in your 20s or 30s — you're likely to develop high blood pressure," Contreras said. "Therefore, it's wise early on to start protecting yourself and using low salt and salt substitutes