



**THE QUEENSLAND
HYPERTENSION
ASSOCIATION (INC.)**

PO Box 193
Holland Park
QLD 4121

THE B.P. MONITOR

EDUCATION AND RESEARCH IN THE FIGHT AGAINST HIGH BLOOD PRESSURE

Incorporating **SALT SKIP NEWS**

June 2023 NEWSLETTER – VOLUME 37, NUMBER 3

Last month QHA advertised the role of newsletter producer, hypertension advocate and much, much more. Unfortunately, we didn't get any interest and in the June edition you will see another advertisement for the position. It is a case that the current incumbent simply can't continue with the role due to lifestyle changes. If you have some interest in the role or can help that would be very much appreciated.

Vale ~ Rock Legend Tina Turner

Here, Tina Turner the musician, recounts her own journey with high blood pressure, dialysis and kidney transplantation:

'I have been suffering from hypertension for a long time, got diagnosed in 1978, but didn't care much about it. I can't remember ever getting an explanation about what high blood pressure means or how it affects the body. I considered high blood pressure my normal. Hence, I didn't really try to control it.

In 1985 a doctor gave me a prescription for pills of which I was supposed to take one a day, and that was it. I didn't give it any more thought. After suffering a stroke in 2009 because of my poorly controlled hypertension I struggled to get back up on my feet. This is when I first learned that my kidneys didn't work that well anymore. They had already lost thirty-five percent of their function. I tried to learn more about these organs' function and meaning.

'Most people probably don't even know where their kidneys are located and what they are for until their health is at stake'.

The Struggle For Healing Is Always Also A Struggle For Accurate Information



'I continued to be on prescriptions for controlling my hypertension. But I was convinced that they made me feel even worse. With time I developed a fatal dislike of these pills. I remembered relishing life before I started taking them and wished I could be as clear headed and energetic as I used to be. When a friend suggested a different approach and recommended a homeopathic doctor in France, I didn't hesitate. He replaced my conventional medication by homeopathic medicine. And I was told to always drink, drink, drink'.

'Indeed, I started feeling better after a while.

I had not told my doctors about my experiment, and when my next routine check-up was due, I was excited to see if the homeopathic medication had decreased my blood pressure and improved my kidney function. Rarely in my life had I been so wrong. I had not known that uncontrolled hypertension would worsen my renal disease and that I would kill my kidneys by giving up on controlling my blood pressure. I never would have replaced my medication by the homeopathic alternatives if I had had an idea how much was at stake for me. Thanks to my naivety I had ended up at the point where it was about life or death'.

'At first, I may not have noticed any signs of sickness but some of the symptoms that I blamed on the medication, like my fatigue, nausea or occasional irritability were really signs of my kidney disease in its final stage.

How could it occur to me to make treatment decisions all by myself? If I had had any idea about the risk I was taking I would never have taken any chance on alternative medicine. The doctors made it very clear that the consequences of my decision were irreversible. My kidney function had reached its all-time low'.

'Most People Probably Don't Even Know Where Their Kidneys Are Located'

'In order to survive, I had to start dialysis. It was my only option, but it was depressing to be connected to a machine for hours.

For the next nine months, all my life was about dialysis. I realised that the struggle for healing is always also a struggle for accurate information. For example, I had not been aware that chronic kidney failure is called "silent killer" because symptoms do not become noticeable until 80 percent of renal tissue is lost. As it happened to me, hypertension is one of the most frequent causes of kidney failure.

I was lucky that Erwin (my husband) offered to donate one of his kidneys to me. It was the first step to kidney transplantation, a very complex procedure.

The months after the transplantation were marked by a never ending up and down. From time to time my body tried to reject the donor kidney as it frequently happens after a transplantation. Every so often this required more hospital admissions. I kept feeling nauseous and dizzy, forgot things, and was

scared a lot. These problems are still not quite resolved. I am on multiple prescriptions and take great care to follow my doctors' orders meticulously. For I know that I can trust them and their therapies'.

Source: [Tina Turner's own words](#)

Prof Stowasser's View:

"In chronic kidney disease there is a reduction of kidney function. Your kidneys' main function is to filter wastes and excess fluids from your blood, which are then removed in your urine. In the early stages of chronic kidney disease, there are usually few signs or symptoms. Often the only way to tell that there is something wrong with the kidneys at this stage is through medical tests (especially on the blood and urine). It might not be until the condition becomes advanced that it is detected. Advanced chronic kidney disease can cause fluid, electrolytes and wastes to build up in your body and can progress to end stage renal failure, which is fatal without artificial filtering (dialysis) or a kidney transplant.

Treatment for chronic kidney disease focuses on slowing the progression of kidney damage, usually by controlling the cause, and medically correcting the fluid and electrolyte abnormalities as they arise.

After diabetes mellitus, hypertension is the next most common cause of chronic kidney disease. Early biochemical signs of hypertension-induced chronic kidney disease include leakage of protein (including albumin) into the urine and a rise in the concentration of a waste product, creatinine, in your blood. As Tina found out, failure to control hypertension can lead to a marked acceleration in the progression of the condition, as indicated by rising urinary protein and serum creatinine levels, and eventually to end-stage disease. Even controlling the cause might not keep kidney damage from progressing, but it gives you a better chance.

They key is prevention – have your blood pressure checked regularly and, if you have hypertension, measure it yourself to ensure early detection of rising levels. Try to keep your weight in a healthy range, avoid salt, exercise regularly and avoid excessive alcohol consumption. And of course, take your antihypertensive medications as prescribed and seek medical advice to discuss alternatives if you are unhappy with them for some reason." ~ *Professor Michael Stowasser, Specialist in Hypertension, PAH and Greenslopes Private.*

Is There A Link Between Hypertension And Mental And Physical Health?

New approaches for treating hypertension could focus on the interplay between mental and physical health.

Our mental health and that of our cardiovascular system have a complex interaction. A recent study from the [Max Planck Institute for Human Cognitive and Brain Sciences](#) in Leipzig, Germany, makes the link between higher blood pressure and depressive symptoms, well-being and emotion-related brain activity that may be relevant to the development of hypertension.

Several studies have already reported a link between mental health and hypertension, with mixed or even contradictory results. In their study, the researchers from the Max Planck Institute for Human Cognitive and Brain Sciences have now deeply analysed the relationship between mental health, higher blood pressure and hypertension, using extensive psychological, medical and imaging data from the elderly population. "To obtain statistically robust answers, we used the extremely large sample size of the UK Biobank with over 500,000 elderly study participants," reports Lina Schaare, first author of the study.

The researchers showed that higher systolic blood pressure is associated with fewer depressive symptoms, greater well-being and lower emotion-related brain activity. Systolic blood pressure refers to the pressure during the heartbeat, when the heart muscle contracts and pumps blood into the vessels. For a blood pressure of 120 to 80 mmHg, the first value (120) indicates the systolic blood pressure, the second value (80) the diastolic blood pressure, i.e. the pressure on the vessels when the heart muscle relaxes. On the other hand, the presence of a high blood pressure (hypertension) diagnosis was associated with more depressive symptoms and lower well-being. The researchers also found that the threat of high blood pressure is linked to poorer mental health, even years before hypertension is diagnosed.

Taken together, these findings – which at first appear to be contradictory – provide important clues about how psychological factors can complicate the treatment of hypertension. "In the clinic, we observe that those affected often feel tired and fatigued and then do not take their medication for the higher blood pressure because this additionally affects their mood,"

explains Arno Villringer, who heads the Department of Neurology at the Max Planck Institute and is the study's last author. "On the other hand, we suspect that in people who feel good mentally with temporarily higher blood pressure, reinforcement learning ultimately contributes to the development of permanent high blood pressure. This is because the pain threshold also increases with higher blood pressure. This applies not only to physical pain, but also to social pain or greater stress. So, they endure the pain or stress and then ten years later are diagnosed with hypertension.

The researchers believe these findings lay the groundwork for new thinking about the link between mental health and the causes of hypertension. For the widespread diseases of depression and hypertension, such a change in perspective could enable new approaches to therapy and prevention that focus on the interaction of mental and physical health.

Source: [Associations between mental health and blood pressure | The National Tribune](#)

Latest QHA News:

Position Available Now:

If you would you like to work (approximately 1 or 2 days a week) in a very rewarding job then please consider this: The QHA needs you to continue to produce QHA's bi-monthly newsletter – including Salt Skip News; (There's loads of articles published monthly both in Australia and overseas, and as well, you can draw on your advocacy and hypertension skills to really make "a difference"); maintain QHA's website and social media; (dead easy to do), The job includes all of the formalities that go with the role (all the while under the guise of the very supportive QHA Committee). Interested in helping the lives of patients who suffer from hypertension and other associated diseases?

Why leave such a fabulous opportunity you ask? 'Cause I have moved a very long way away, have new life challenges to address *and It's time to think of my own future needs! Plus, I am not getting any younger!*

If it sounds like you could help the QHA achieve its mission and purpose, please contact Fran on 0417766949 and we can work together on making this opportunity happen.

#Hypertension = the silent killer

Have You Been Caught Out Napping?

Do you have a risk of nightly variation in sleep apnoea?

Poorly managed sleep apnoea can lead to uncontrolled blood pressure – a little known underlying risk for millions of people’s cardiovascular health, a new study in a [Nature Journal](#) reveals.

Most at risk are those with wide-ranging variability in their night-to-night Obstructive Sleep Apnoea (OSA) severity which can be overlooked or misdiagnosed during standard clinical testing, the Flinders University-led research warns.

“Regardless of their overall OSA average severity, people with increased night-to-night variability in the amount of sleep apnoea are at a 50% to 70% increased likelihood of having uncontrolled hypertension and variable blood pressure – a confirmed risk factor for cardiovascular events, all-cause mortality, vascular organ damage, atrial fibrillation and dementia,” says Dr [Bastien Lechat](#), lead author in the new article in the international journal, *Nature Digital Medicine*.

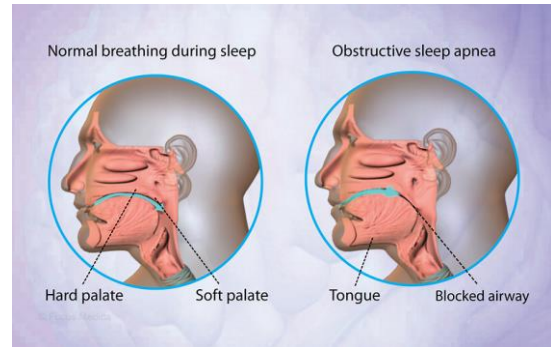
“High variability in OSA severity is an independent clinical predictor of uncontrolled hypertension and has significant implications for identifying patients most at risk of cardiovascular harm.”

OSA is a common clinical sleep disorder characterised by repetitive upper airway collapse during sleep and is estimated to affect approximately one billion people globally.

The Flinders Health and Medical Research Institute (FHMRI) Sleep Health research is one of the first large-scale extended studies of OSA severity, made possible by using a novel under-mattress sleep sensor technology that allows for multi-night, in-home, non-invasive monitoring of sleep data from 12,287 adults over approximately 180 nights with about 30 repeat blood pressure tests.

The sensor technology measured both OSA severity and night-to-night variation in OSA severity, leading researchers to make comparisons with current single night sleep assessments and possible misdirected management and care. “These findings reinforce recent evidence indicating there is considerable night-to-night variation in OSA severity for many people, which raises concerns clinically regarding OSA severity

many people, which raises concerns clinically regarding OSA misdiagnosis, said senior Flinders University sleep researcher and FHMRI Sleep Health director, [Professor Danny Eckert](#).



“The study suggests that high night-to-night variability in OSA severity may also be an important contributor to cardiovascular disease – one of the world’s leading causes of death. There is also considerable potential to incorporate new simplified monitoring approaches to aid current single-night diagnostics, which are both labour intensive and costly” added Professor Eckert.

Source: [High night-to-night variability in sleep apnoea severity is associated with uncontrolled hypertension \(2023\)](#).

What’s In Your Shopping Trolley?

Very little when you live in a small town with only an IGA to shop and no products that are low sodium or better!

On the rare occasions I have been to “the big smoke” I have stocked up on grocery items and finding ‘my regulars’ weren’t available had to make do with other grocery lines. Things I have bought include:

Uncle Toby’s Oats (it’s a Winter thing)



See if you can find the “War Years” version!

Philadelphia Lactose Free Cream Cheese



Moorish in salads or on Sun Rice “Thin” rice cakes with sliced tomato.

No 241

June 2023

Salt Skip News

Published in the public interest on the web at www.salt-matters.org

The **business address** of the Salt Skip Program is Queensland Hypertension Association Inc.
PO Box 193, Holland Park, QLD 4121, E:info@hypertensionqueensland.com.au
www.hypertensionqueensland.com.au

Use the **editorial address** when writing about the newsletter—see the panel on page 4.

Muscle Cramps Need Water Not Salt!

Some people believe that salt needs be replaced during hot weather or strenuous exercise to avoid muscle cramps. This is not correct.

What you need to replace is water.

The human body can happily survive on just one gram of salt a day, as hormones keep a check on sodium levels and make adjustments for hot weather. A genuine sodium shortage brought on by hot weather or exercise is extremely rare, even among hard-working athletes.



The muscle cramps that sometimes follow a bout of sweating are due to dehydration, not lack of salt. To prevent cramps, [drink plenty of water on hot days and before, during and after exercise.](#) This will also help to even out the water–sodium ratio in the body. **Source:** [Salt - Better Health Channel](#)

Skip The Salt

Select foods *with less hidden salt*

While reducing the salt you add at the table and when cooking or preparing meals, you should also focus on selecting foods that contain less 'hidden' salt because this accounts for around 75% of all salt in most people's diet.

**Hidden Salt /
Sodium in most
people's diets =
75%**

When shopping:

- Look for products labelled 'salt reduced' or 'no added salt' (for example: on canned vegetables).
- Check the food label on the back of a product for the amount of sodium per 100g. To choose a 'low salt' product, pick one with less than 120mg of sodium per 100g.



- Choose reduced salt bread and breakfast cereals – bread is a major source of sodium in the diet.

Select Foods with Less Hidden Salt ~ *Cont.*

- Buy fresh vegetables or select lower sodium canned varieties.
- Choose unprocessed fresh wholefoods, like fruits and vegetables.
- Reduce packaged and processed snack purchases.

Avoid High-Salt, Processed Foods

Be mindful that - 75% of the salt in our diet comes from processed foods. You can't see the added salt in these foods, which means often you are unaware of the amount of salt you are having. Many food companies are working to try and reduce the sodium content of processed foods.

High-salt foods that should be eaten very sparingly (or best not at all) include:

- most 'fast' foods (such as pizza, hamburgers, chips);



- most snack foods (such as potato chips, corn chips);
- processed meats (such as sausages, salami, hot dogs and luncheon meats);
- dehydrated or packet foods (such as instant pasta, noodles or soups);
- pre-packaged sauces and condiments (such as pickles, chutneys, soy sauce and tomato-based paste and sauces).

Source: <https://www.betterhealth.vic.gov.au>

**Salt With That?
No Thanks!**

Fun Facts About Salt

Salt is a wonder mineral, truly. It does it all. Want to whiten your whites or ward off the devil? All you need is salt - and all these fun facts about salt.

- Salt could be the energy of the future? Especially in the places where salt and fresh water mingle, it could possibly become a massive source of renewable power.
- Salt can be called halite, also known as table salt or rock salt by us civilians. If you were a scientist, you'd call it sodium chloride.
- There are 14,000 uses for the mineral we know and love (to hate) called salt. Yes, 14,000. *Isn't one of the best salt fun facts?*
- Some people would call salt the 5th element, saying that it's as essential as earth, air, fire, and water.
- Cubes of salt then form salt crystals, just like we see in nature.
- Salt is hygroscopic, meaning that it attracts moisture and water.
- When salt is mixed with water, it breaks into its positive and negative ions.
- Salt is an absolutely amazing preservative. In days past, pioneer settlements were located near salt reserves, to help settlement pioneers preserve their food.
- Salt is naturally recyclable, we may, possibly. never run out.
- The salt on your eggs or the Winter ground (grind) *could be* millions of years old.
- Salt is mixed into the ocean water and covers the earth.
- Seawater is about 3.5% salt. There is about a ¼ pound of salt per gallon of seawater and 50 quadrillion tons of salt in all the earth's oceans. (That's 113gms per litre of seawater *or too many litres to calculate!*)
- How do we harvest sea salt? *With the right location and a great deal of patience.*
- Salt can be collected right from the surface of salt flats.
- Great Inagua Island is the most southern island in the Bahamas and is one of the best sources of salt in the world.
- If you don't want grass to grow between your garden-bed rocks or bricks, sprinkle salt in the cracks.

Fun Facts About Salt ~ *Cont.*

- Jesus said: “*You* are the salt of the earth”.
- If you rub salt on your pancake griddle, your pancakes won't stick.
- Salt from the ocean comes from openings in the sea floor and runoff from the land.
- If all the salt from the oceans was spread over the surface of the land on earth, it would possibly have over 500 feet (152+ metres) of a thick layer of salt on it.
- The salt we eat is less than 15% of salt produced worldwide.
- Why do we eat salt at all when it can change our tastebuds within 2 weeks and induce cravings for salt?
- We use a lot of salt to keep ice off the roads, in fact, 17% of all the salt we use is to keep roads ice-free.
- Salt is the only family of rocks eaten by humans.
- All our bodily fluids are salty because water and salt are attracted to each other.
- Too much salt in your body and your blood attracts more water than it's meant to. *Causing problems!*
- Typically, a person consumes over 3,300 milligrams of salt a day (in America).
- Salt mined from underground is called solution mining.
- Hollywood needs salt to safeguard rolls of film.
- To make ants go away (disappear) sprinkle some salt in your pantry. **Source:** [Emily Rooke](#)

How Much Sodium Do Aussie's Need Daily?

The recommended amount of sodium for Australian adults is 2,000 milligrams per day — which is equivalent to about 5 grams of salt or 1 teaspoon. Try to limit your daily salt intake to this recommended amount.

However, a target of 460 to 920mg per day (equivalent to 1.15 to 2.3g of salt per day) is the daily average intake that may help the Australian adult population prevent chronic disease — such as high blood pressure. It also aligns with World Health Organisation recommendations.

It's also OK to consume *less* than this.

Got a lifestyle tip or recipe to share? Please send it to The Editor @ Malcolm.Riley@csiro.au

~ Quick Quotations ~

‘We should be able to find the bigger part of ourselves’
~ **Rosie Batty**

‘The reason woman are always reluctant to reveal their age is because other people label them as ‘past it’ – we are vital, active, sexual beings, living life to the full’
~ **Ita Buttrose**

‘I have a conviction that it's only when you are put at full stretch that you can realise your full potential’
~ **Edward “Weary” Dunlop**

‘I always get upset when I do this because it means someone has to die so that someone else can live...’
~ **Victor Chang**

‘The sun and the moon love me because the sun follows me where ever I go and the moon jumps when I jump’
~ **Natasha Ryan (4)**

‘If we can only live once, let it be a daring adventure’
~ **Julian Assange**

‘To sail around the world at 16 is remarkable. It's inspirational for the country and, in a sense, represents the spirit of Australia’
~ **John Bertrand**

‘We save paradise by an intense education program where you get people that you can trust to talk sanely about the environment and hope that the message will get through’
~ **Arthur Boyd**

Skip The Salt!

SALT SKIP NEWS

No 241
June 2023

Salt Skip Program
editorial address:
Malcolm Riley
47 Coburg Rd, Alberton
SA 5014

Email:
Malcolm.Riley@csiro.au

Salt Skip News is
distributed with The BP
Monitor (QHA Newsletter)

The BP Monitor and Salt Skip News is published every 2 months, from February to December (6 issues a year). It is distributed by email and post to QHA Members, Salt Skippers, health professionals and colleagues.

Salt Skip News is printed by [Snap Printing, Felix Street, Brisbane.](#)



print design websites

Carrot & Zucchini Fritters With Poached Eggs



SSN published a recipe for fritters in January, but this recipe is just divine (and filling)! Serves 4 (Makes 12 fritters).

Ingredients:

3 medium-sized carrots and 170gm of zucchini, grated;
½ cup gluten-free flour (or chick-pea flour);
1 tsp ground cumin;
1 tsp. ground coriander;
½ cup coriander leaves, roughly chopped;
½ cup spring onion tops, roughly chopped;
1 egg, whisked;
Pepper, to taste;
2 tbsp garlic-infused olive oil (now available in a can to spray on!)
4 eggs, poached.

Method:

1. Place the grated carrot and zucchini in a sieve. Using a paper towel, press gently in the sieve to draw out the excess moisture for a crispier fritter.
2. In a large bowl, combine the carrot, zucchini, gluten-free flour, spices, coriander, spring onion tops, whisked egg and season with the pepper. Mix well until combined.
3. Heat 1 tbsp of garlic-infused oil in a large frying pan over medium heat. Scoop ½ cup measurements of the mixture into the pan and fry for approximately 3 minutes on each side. This will need to be done in batches.
4. Once the fritters are cooked, place on a plate lined with paper towel to absorb excess oil.
5. To serve, place three fritters on a plate, atop each with a poached egg and serve. Source: [Carrot & Zucchini Fritters W/- Poached Eggs](#)

At Salt Skip News, we are always interested to hear from readers. Please send us your Salt Skip news, tips and salt-free or low sodium recipes... please email to Malcolm.Riley@csiro.au

BP Monitor with Salt Skip News is published every 2 months, from February to December (6 issues a year). This newsletter is not a substitute for health and medical advice. Readers should always seek the advice of a qualified health professional regarding their health or a medical condition.

Salt Skip Editorial Committee: Prof Michael Stowasser (QHA President and Director, Hypertension Unit, University of Queensland, Frazer Institute, Princess Alexandra Hospital, Brisbane), RN Cynthia Kogovsek (Hypertension Nurse, Hypertension Unit, Greenslopes Private Hospital, Brisbane), Genevieve James-Martin, Gemma Williams (Dietitians, CSIRO Health and Biosecurity, Adelaide) and Fran Williams, (QHA Committee Member, Central Tablelands). Text drafted (edited where other authors are named) by Dr Malcolm Riley, Nutrition Epidemiologist, CSIRO. Printed by Snap Printing, Felix Street, Brisbane.