Module 1 Lesson 3

Transcript

Hey friends, I hope everyone out there is doing amazing, and eager to do some number crunching today. You already know the electrolytes, sodium, and potassium from any exercise research you may have done. I get it, that sodium and potassium recommendations may not be as sexy as talking about metabolism or hormonal influences on cognition, but it's super important that you're on top of your game when it comes to these recommendations. Not because all of your clients will be running marathons anytime soon, but because you're sure to see some clients who need some guidance preventing or managing heart disease. So today, we're going to talk about sodium and potassium dietary recommendations, and how you can help clients choose the best foods to support their hearts. So let's get started. I wanted to talk about sodium and potassium intake recommendation changes for people with and without heart disease, because we have been changing and adjusting the recommendations over the past few decades as we learn more and more about balancing electrolytes and cardio care.

You got to love the changing world of nutrition. Less than a few years ago, we used to tell people to limit sodium to 3,500 milligrams a day. And now we're finding that that number is really too high for most Americans. For most people, and even kids 14 years and older, the recommendation is to limit sodium to less than 2,300 milligrams per day. For those with existing blood pressure or health concerns, the recommendation may be even lower depending on prescription drugs and a whole host of other medical considerations. The 2015 to 2020 dietary guidelines for Americans recommend that Americans chow down on less than 2,300 milligrams of sodium per day as part of a healthy eating pattern. Unfortunately, the majority of adults eat more sodium than they should, an average of more than 3,400 milligrams each day. If you work with clients, I'm sure you are not surprised to hear that. The American Heart Association also recommends no more than 2,300 milligrams a day, and that number is moving toward an ideal limit of no more than 1,500 milligrams per day for most adults.

You may already know that pretty much everything, a stock of celery even, has sodium, which is a mineral. Yes, sodium is the main component in salt, but it's also found naturally in our foods. It's nearly impossible to be sodium deficient in the US. This is a good time to point out that even though we hear so much about reducing sodium intake, and that's going to be the recommendation for most people and most people you come across, we do still need some sodium in our diets. It's not all bad. The issue isn't that sodium is inherently bad for us, it's just that we're eating way too much of it. I'm going to talk about processed foods and other salt laden foods in a

second, but table salt, sometimes called sodium chloride, is approximately 40% sodium. If you know how much sodium is in salt, you can take measures to control your intake. So a quarter teaspoon of salt equals approximately 575 milligrams of sodium.

A half a teaspoon of salt equals about 1,150 milligrams of sodium. Three quarters of a teaspoon of salt equals around 1,725 milligrams of sodium. And a teaspoon of salt equals 2,300 milligrams of sodium. That big 2,300 number. Besides salt, here are some of the most high sodium foods. Processed foods like deli meats, canned foods, breads, cereals, and just about anything with a shelf life, because sodium is often used as a preservative. There are some natural foods that are innately higher in sodium including cheese, seafood, olives, and some legumes. Then, there are some non-food things that can interact with your sodium levels also, including over the counter drugs, prescription drugs, and even some other things you might not consider. I'm thinking things like alcohol, amphetamines, antidepressants, atypical antipsychotics, caffeine, oral contraceptives, NSAIDs, recreational drugs, which you shouldn't be doing anyway, systemic corticosteroids, and some prescription medications.

Okay, so this next list you don't have to memorize by any means, but I did want to include the sodium related terms you may find on food packages so you're familiar, of course. Sodium free means less than 5 milligrams of sodium per serving, and contains no sodium chloride. Very low sodium means 35 milligrams or less per serving. Low sodium means 140 milligrams or less per serving. Reduced or less sodium is at least 25% less sodium per serving than the usual sodium level for that item. Light for sodium related products means if the food is low calorie and low fat and sodium is reduced by at least 50% per serving. Light in sodium means sodium is reduced by at least 50% per serving. Because this module is all about the heart, I would be completely remiss if I didn't mention that not only are we getting too much sodium, but we're also not getting enough potassium in this country, which is contributing greatly to our cardiac conditions.

You've probably noticed that the new nutrition facts panel in the US now include how much potassium is in the food product. This used to be voluntary, and making this mandatory highlights how most people's diets are lacking in this mineral. Potassium rich diets help control blood pressure, and people who eat potassium rich foods have been shown to have a lower risk of stroke. We find potassium in both plants and animal foods, and in beverages. The most common places you're going to find potassium are fruits and vegetables, of course have potassium, especially potatoes, avocados, spinach, beets, bananas, apricots, and melons. We find potassium in soy beans and legumes, meats, poultry, fish, milk, yogurt, and nuts. They also contain potassium. And you find a good amount of potassium in whole wheat flour and brown rice, even coffee, tea, other nonalcoholic beverages, and potatoes are the top sources of potassium in the diets of US adults.

Not necessarily because these are the best sources, but because this is what we're eating the most of. I mean, hello french fries. It is estimated that the body absorbs about 85% to 90% of dietary potassium, but potassium chloride found in salt substitutes and some dietary supplements is not as well absorbed. So this is kind of complicated, because many blood pressure medications, especially diuretics, can affect your potassium level. But while some diuretics tend to lower potassium levels, others have the opposite effect. Actually, a lot of medications mess with your potassium regulation. Keeping your blood potassium level in the correct range is important, because this mineral also plays a key role in the function of nerves and muscles, including your heart muscle. As a health professional, you can help your clients keep both sodium and potassium levels in a healthy range. In general, recommending whole, fresh, fewer processed and commercial foods, likely what you're already doing, is going to help limit sodium and increase potassium in someone's diet.

Even though most of us don't prescribe or work directly with medications, this lesson also highlights why it's so important to ask clients about what medications they're taking, and to work in conjunction with their medical providers, as many medications can affect the way the body utilizes different nutrients. For example, how diuretics can lower potassium levels in the body. Okay, let's recap what we just went over. Sodium and potassium are two of the most important minerals that can affect heart health and found in a lot of our favorite foods that we recommend all the time. Most people in the US are eating way too much sodium, and not enough potassium. Recommending fresh whole foods like fruits, veggies, beans and legumes, and making sure clients steer clear of packaged, processed foods with loads of additives is one of the best ways to support clients' heart health. I will see you in the next lesson.