

Does reducing salt intake benefit adults with chronic kidney disease?

Clinical Question	How effective and safe is altering dietary salt intake in adults with chronic kidney disease (CKD)?
Bottom Line	<p>This review showed a strong case for the benefits of salt restriction in people with CKD. The authors found that reducing dietary salt considerably reduced BP in people with CKD (mean systolic decrease of 6.91mmHg and mean diastolic decrease of 3.91). They also found consistent evidence that dietary salt restriction reduced proteinuria in people with earlier stage (non-dialysed, non-transplanted) CKD by 34% to 36%. If such reductions were maintained long-term, this may translate to clinically significant reductions in ESKD and cardiovascular events.</p> <p>Reduced salt intake may increase symptomatic hypotension. Data were sparse for other types of adverse events.</p>
Caveat	This review aimed to evaluate the benefits and harms of altering dietary salt intake for people with CKD. However, this review could not assess the effect of restricting salt intake on endpoints such as death, cardiovascular events or progression to ESKD in people with CKD because there were no RCTs of adequate size or duration to examine these outcomes. The outcomes measured in this review are surrogates for these endpoints.
Context	People with CKD are at increased risk of heart disease and worsening kidney function which can lead to the need for dialysis or kidney transplantation to survive. High salt intake is linked to risk factors for both heart disease and worsening kidney function, including high blood pressure, excess protein in the urine and fluid overload. Therefore, reducing salt intake may help reduce risk of heart disease and preserve kidney function.
Cochrane Systematic Review	McMahon EJ, Campbell KL, Bauer JD, Mudge DW, Kelly JT. Altered dietary salt intake for people with chronic kidney disease. Cochrane Database of Systematic Reviews 2021, Issue 6. Art. No.: CD010070. DOI: 10.1002/14651858.CD010070.pub3. This review contains 21 trials with a total of 1197 participants.

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Systematic review link:

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD010070.pub3/full>