

DASH Away Your High Blood Pressure

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Q: My doctor tells me I have borderline high blood pressure with a reading of 120/80. I don't feel bad and I thought 120/80 was normal? Should I be concerned? If I need to lower it, what steps can I take?

A: High blood pressure (HBP) or Hypertension is known as the silent killer because there aren't any symptoms, but it's not without dangerous side-effects. The average person knows far too little about its lethal effects. Compounding this silent killer is a new category of concern called "prehypertension." What was considered normal blood pressure, 120/80, now is not, according to an expert committee of the National Heart, Lung and Blood Institute (NHLBI) that issued new guidelines based on more than 30 clinical studies from the past seven years. The outcome of the research review was the realization that damage to the arteries begins at blood pressure levels as low as 120/80.

The following is a quick primer about blood pressure. A blood pressure reading has two readings: the systolic (the top) and diastolic (the bottom reading). Systolic pressure is the *pressure* that the blood exerts on the walls of your arteries when your heart contracts. The diastolic refers to the *pressure* exerted on the arteries between heart beats. *Normal blood pressure* is now considered less than 120 systolic and less than 80 diastolic. If the pressure remains elevated over the years, then the arteries never get a proper rest. Over time this elevation will "tear" up the smaller arteries and make

them thicken and more prone to atherosclerotic plaque, which is implicated in strokes, heart attacks and raises the risk of dementia.

Readings should always been done properly. Before having a reading, sit quietly for five minutes. If the reading is high, you should always have two more readings to verify the first reading.

The causes of HBP include a hereditary disposition for the problem; excess body fat; a diet high in fat, salt, and alcohol; smoking; and too little exercise.

Typically your physician would advise you to lose weight by exercising and cutting down on your fat and alcohol intake, watch your sodium intake and obviously quit smoking. But now, you may find your physician advising you to eat ***eight to ten servings*** of fruits and vegetables along with ***two to three servings of low-fat dairy products and cut your sodium to 2400 milligrams per day*** as well.

The DASH-Sodium study, dubbed as Dietary Approaches to Stop Hypertension, is the truest form of a pharmacognosy-based research study. (Remember, pharmacognosy means the study of food as medicine).

A multi-center study across the U.S. studied over 450 adults for eight weeks who had high-normal or mildly elevated blood pressure. The control group ate a diet high in total and saturated fat, low in fruits, vegetables, beans and whole grains (i.e., a typical Western diet). A second group ate a similar diet but included nine to ten servings of ***fresh*** fruits and vegetables per day. A third group ate a low-fat diet along with eight to nine servings of ***fresh*** fruits and vegetables and ***two-three servings of low-fat dairy products a day***.

Both diet groups that concentrated on *fresh* fruits and vegetables decreased their blood pressure within two weeks; however, the third group showed the best results dropping an average of 11.4 points systolic and 5.5 points diastolic. These impressive results are similar to those from treatment with anti-diuretic drugs but without the side effects.

Then a follow up study called the DASH-Sodium found that the biggest drop in blood pressure occurred in those who followed the DASH eating plan and took the least amount of sodium intake (i.e., 1500 milligrams).

Pharmacognosy at its best! For detailed information on the new Blood Pressure Criteria for Adults and the DASH-Sodium Eating Plan you can visit my web site www.healthtransformations.com and click on “Health Library” then “Dash Diet”. Submit your health-promoting questions at www.healthtransformations.com and click “Health Library” then click “Ask Diana”.