



# 昭和大学学士会後援セミナー

日 時	2023年 6月 22日 (木) 11 : 00—12 : 00
会 場	昭和大学病院 中央棟 7F会議室
演 題	New Findings on Salt-Dependent Hypertension: Implications for Prevention and Clinical Management
演 者 名 所属・職位	Theodore W. Kurtz, MD Professor of Laboratory Medicine and Director of Clinical Chemistry University of California, San Francisco School of Medicine
概 要	High salt diets are estimated to account for 30% of cases of hypertension. Despite regulatory and educational efforts to reduce salt consumption, mean population salt intake has not decreased over the past two decades. This presentation will discuss: 1) new findings on the pathogenesis of salt-induced increases in blood pressure including in hyperaldosteronism, and 2) mechanism-based strategies for preventing salt-dependent hypertension that do not depend on reducing salt intake.
主 催	昭和大学医学部内科学講座糖尿病・代謝・内分泌内科学部門
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## New Findings on Salt-Dependent Hypertension: Implications for Prevention and Clinical Management

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In salt-sensitive people, a high salt diet increases risk for hypertension whereas in salt resistant people, a high salt diet has little or no effect on blood pressure. However, over the past two decades, educational efforts to reduce salt consumption have failed to substantially reduce mean salt intake in Japan and the USA. In addition, reducing the amount of salt added to food by industry by 20% had little or no impact on mean salt intake in England. This presentation will discuss new strategies for preventing salt-induced hypertension that do not depend on reducing mean salt intake in the population. These strategies are based on a new understanding of the mechanisms that mediate salt sensitivity and the initiation of salt-induced hypertension. The historical theory of Guyton and colleagues (“natriuretic dysfunction theory”) holds that impaired renal excretion of sodium initiates salt-induced hypertension by causing abnormal increases in cardiac output secondary to abnormal increases in salt and water retention. However, new studies have shown that salt-dependent forms of hypertension including hyperaldosteronism are usually initiated by abnormal vascular resistance responses to salt (“vasodysfunction”), not by abnormally large cardiac output responses to salt. The vasodysfunction theory for the pathogenesis of salt sensitivity and salt-induced hypertension has implications for: 1) understanding how genetic and non-genetic factors influence blood pressure responses to high salt diets, and 2) development of new methods for preventing and treating salt-dependent hypertension that do not require reducing salt intake.