

하루 소금 권장량 높여야 한다 ?

김도훈

고려대학교 안산병원 가정의학과

논문

Am J Hypertens. 2014 Sep;27(9):1129-37.

Title: Compared With Usual Sodium Intake, Low- and Excessive-Sodium Diets Are Associated With Increased Mortality:A Meta-Analysis

Background: The effect of sodium intake on population health remains controversial. The objective was to investigate the incidence of all-cause mortality (ACM) and cardiovascular disease events (CVDEs) in populations exposed to dietary intakes of low sodium (<115 mmol), usual sodium (low usual sodium: 115-.165 mmol; high usual sodium: 166-.215 mmol), and high sodium (>215 mmol).

Methods: The relationship between individual measures of dietary sodium intake vs. outcome in cohort studies and randomized controlled trials (RCTs) measured as hazard ratios (HRs) were integrated in meta-analyses.

Results: No RCTs in healthy population samples were identified. Data from 23 cohort studies and 2 follow-up studies of RCTs (n = 274,683) showed that the risks of ACM and CVDEs were decreased in usual sodium vs. low sodium intake (ACM: HR = 0.91, 95% confidence interval (CI) = 0.82-.0.99; CVDEs: HR = 0.90, 95% CI = 0.82-.0.99) and increased in high sodium vs. usual sodium intake (ACM: HR = 1.16, 95% CI = 1.03-.1.30; CVDEs: HR = 1.12, 95% CI = 1.02-.1.24). In population representative samples adjusted for multiple confounders, the HR for ACM was consistently decreased in usual sodium vs. low sodium intake (HR = 0.86; 95% CI = 0.81-.0.92), but not increased in high sodium vs. usual sodium intake (HR = 1.04; 95% CI = 0.91-.1.18). Within the usual sodium intake range, the number of events was stable (high usual sodium vs. low usual sodium: HR = 0.98; 95% CI = 0.92-.1.03).

Conclusions: Both low sodium intakes and high sodium intakes are associated with increased mortality, consistent with a U-shaped association between sodium intake and health outcomes.