Better public awareness, physician training, and clear labelling on salt crucial to preventing hypertension, survey finds

Even among individuals with normal blood pressure, reducing daily salt intake remains one of the most effective ways to prevent hypertension, but this message is not being consistently communicated due to gaps in awareness among both the public and physicians, a recent survey has found

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The survey stress that bridging these knowledge gaps among physicians could have far-reaching benefits strengthening early prevention efforts and contributing to national strategies aimed at reducing the burden of hypertension |Image used for representational purpose only | Photo Credit: Detry26

A multi-city workshop on salt and health conducted by Chennai-based NGO Sapiens Health Foundation, in collaboration with global health organisation Resolve to Save Lives, has revealed notable gaps in physicians' understanding of key aspects of salt consumption. The workshops, held in Chennai, Mumbai, Delhi, and Vijayawada, brought together 480 physicians. A pre-workshop assessment showed that while overall awareness was fairly good, critical knowledge gaps persist, and these gaps could influence patient counselling and public health outcomes.

Rajan Ravichandran, nephrologist and founder-chairman of the Sapiens Health Foundation, said it is important to first distinguish between salt and sodium, terms that are often used interchangeably but are not the same.

Salt (sodium chloride) is a crystalline compound made up of roughly 40% sodium and 60% chloride, and serves as the primary source of sodium in the diet. Sodium, a mineral essential for nerve and muscle function, can, in excess, contribute to elevated blood pressure. Notably, most dietary sodium comes from packaged and processed foods rather than salt added at the table. One teaspoon of salt contains approximately 2,300 mg of sodium.

He emphasised that preventive messaging must extend beyond high-risk individuals to the general population. "Even those with normal blood pressure should consciously reduce salt intake as a long-term preventive measure," he said.

Awareness is crucial

While 80% of participating physicians reported awareness of World Health Organization recommendations on salt intake, only 68% correctly identified the guideline of 5 grams per day. This gap, Dr. Ravichandran noted, points to a superficial familiarity rather than precise understanding.

"Knowing that guidelines exist is not the same as applying them correctly in clinical practice," he said. Such discrepancies can dilute the clarity of advice given to patients, particularly in preventive care settings.

The assessment also found that only 48% of physicians correctly understood sodium-to-salt conversion, a foundational concept necessary for interpreting nutrition labels and guiding dietary choices.

Salt and misconceptions

Another concern is the limited awareness of hidden sodium in processed foods. While three-fourths of participants correctly identified home-cooked food as a major source of salt intake in India, many were unaware of sodium present in preservatives and additives such as glutamates and sulphites.

Dr. Ravichandran pointed out that this directly affects patient counselling. “If physicians are not fully aware of hidden sources, patients may continue consuming high levels of salt unknowingly,” he said. He also pointed out common misconceptions such as replacing regular salt with options such as Himalayan or rock salt assuming they are healthier, whereas these are simply alternative forms of salt with comparable sodium content.

The findings also revealed lack of understanding around children’s salt requirements. While about half of the physicians knew the recommended intake, 12% believed that children require more salt than adults.

Training and prevention strategies

The study underscores the need to strengthen medical education and public health strategies. While 83% of physicians were aware of the benefits of low-sodium salt and 63% recognised 24-hour urinary sodium as the gold standard for assessing intake, only half were aware of the importance of maintaining adequate potassium balance.

Dr. Ravichandran also stressed the importance of integrating such topics more robustly into medical curricula and continuing education programmes. “Physician training must evolve alongside emerging evidence, particularly in areas like nutrition that are central to preventive health,” he said.

The findings have also prompted discussions on broader policy measures, including improved food labelling to make sodium content more transparent. Future workshops, he said, will focus specifically on interpreting food labels and understanding hidden salt. The results are being prepared for publication in a public health journal.

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