

Introducing *Wright Salt*

The international salt secret that could save your heart—and your life

By Jonathan V. Wright, M.D.

Can you imagine deaths from stroke and heart disease plummeting by 60 percent throughout an entire country? It would be a “public health” dream! And, yet, it’s absolutely for real...Just not here in these United States. At least, not yet.

So where did this remarkable decrease in deaths from heart disease and stroke occur? Botswana? Kyrgyzstan? Some other obscure “Third World” country? No. It happened in a major industrialized European country—Finland.

So why hasn’t this amazing “public health” feat been publicized? Well, if I had to guess, I’d say it’s because the amazing improvement had very little to do with any sort of patent medication. In fact, 85 to 90 percent of this dramatic reduction in deaths is due entirely to simple diet changes—reduction of saturated/unsaturated fat ratio and, according to the study on this phenomenon, a nationwide “...replacement of common salt by a novel sodium-reduced, potassium, magnesium-, and l-lysine HCl-enriched salt, both in home kitchens and in the food industry.”¹

According to this same 1996 report: “Adherence to anti-hypertensive drug therapy has been quite good. However, the drug treatment does not seem to account for more than 5-6 percent of the observed fall of blood pressure, and 10-15 percent of the decrease in deaths from strokes and ischaemic heart disease.” The report went on to note that during the same time period “...marked increases in the intake of alcohol, obesity among men, and smoking among women have been observed.”

Wow! While male obesity, female smoking, and alcohol intake all increased to a “marked” degree, the death rate from heart disease and stroke still declined by 60 percent—and only 10-15 percent of the over-all decline could be attributed in any way to patent medicines. If that situation was reversed, and patent medications were responsible for such a positive change, you can bet we’d be overrun with publicity about how they “save lives.”

So maybe the lack of attention this breakthrough received means that it was a fluke. After all, the study was published in 1996—the situation must have changed for the worse again...And that’s why we haven’t heard about it, right?

Well, I’m very happy to tell you that’s not the case! Not only has this decrease in the death rate from stroke and heart disease continued, the situation has gotten even better! According to a follow-up study published in 2006, there has been “...a 75 to 80 percent decrease in both stroke and coronary heart disease mortality in Finland.”⁴ And by 2006 there was an increase in life expectancy of both male and female Finns of six to seven years.

Benefits without borders

Of course, that's "just" Finland—and it's true that this remarkable approach hasn't been researched anywhere else. But two controlled studies, from Taiwan and Australia, have noted similar improvements.

In the Taiwanese study, the researchers examined the effects of a potassium-enriched salt on cardiovascular disease mortality and medical expenditures in elderly veterans. Five kitchens of a retirement home serving 1,981 veterans were randomized into two groups, "experimental" using potassium-enriched salt or "control" using regular (sodium-chloride) salt.

After 31 months, researchers observed a significant reduction in cardiovascular disease mortality in the "experimental" salt group. The people in the potassium-enriched salt group also spent significantly less for in-patient care for cardiovascular disease than people in the control group. The researchers concluded: "The effect was likely due to a major increase in potassium and a moderate reduction in sodium intakes."⁵

In the Australian study, researchers looked at another aspect of cardiovascular disease—hypertension—and the influence of the sodium-to-potassium ratio. They lowered and raised the volunteers' sodium intake while having them maintain a potassium-rich diet. As you might expect, they found a correlation between higher sodium intake and higher urinary sodium and correlation between lower sodium intake and lower urinary sodium. And the urinary sodium/potassium ratio also rose and fell with higher and lower sodium intake. The researchers reported that reducing sodium intake and following a potassium-rich diet significantly decreased systolic blood pressure (the "upper" number).⁶

And earlier this year, researchers from Harvard Medical School reported that urinary sodium/potassium ratios have predictive value, too. They concluded: "A higher sodium to potassium excretion ratio is associated with increased risk of subsequent cardiovascular disease."⁷ They also noted that the actual ratio of the nutrients is a stronger predictor than either one on its own.

But there are a few elements that the Finnish studies included that these studies left out. And you can't talk about the dramatic decrease in cardiovascular and stroke deaths without looking at ALL the potential factors involved.

The other elements you need for ultimate heart health

In the Finnish research, the special salt they investigated was used nationwide—even by the local McDonald's! And this particular sodium-reduced salt had been enriched not only with potassium, but also with magnesium and L-lysine-hydrochloride.

By now, even conventional medicine agrees that magnesium is a principal mineral—if not the No. 1 mineral—for preventing cardiovascular diseases. According to a recent review, "magnesium plays a role in a number of chronic, disease-related conditions."

This article reviewed the current pertinent literature on magnesium and concluded that it plays a major role in regulating blood pressure. The authors also noted that “increased magnesium intake may improve serum lipid profiles. Dietary magnesium is also recommended to aid in the prevention of stroke.”⁸

And what about the L-lysine in that “novel salt” used in Finland? Some of you may recall that (along with vitamin C and proline) L-lysine was (and is) part of Linus Pauling’s treatment for prevention and even reversal of cardiovascular disease. Unfortunately, even though there’s plenty of anecdotal evidence of its effectiveness, there are no rigorously controlled trials of Pauling’s cardiovascular therapy. But the good news is, L-lysine is an essential amino acid and is harmless except in enormous amounts.

Patents, profits, and “public health”

It’s sad but true that here in these United States, public health “authorities” are much more focused on vaccinations and other “public health” measures that “just so happen” to coincide with the interests of patent medicine companies. So it’s no wonder they haven’t paid the slightest attention to the fact that there’s an entirely natural (i.e. unpatentable) way to decrease the number of cardiovascular disease-related deaths here in this country by as much as 65 percent.

For the record—using 2005 American Heart Association statistics—589,266 total deaths from coronary heart disease and stroke reduced by 65 percent leaves 383,023 that would still be alive today if we were using this entirely natural approach. But our health “authorities” haven’t saved those lives because there’s no money to be made there.

But since we’re each responsible for our own health, and you’re a Nutrition & Healing reader, chances are good that you’ve already done some of the things credited by the Finnish researchers with this remarkable result. You’ve likely cut back on saturated fats, or—even better—switched as much of your animal protein as possible to “free-range, grass fed” sources and “wild” fish. You’re probably also using fish oil every day, which, as you know, not only helps reduce cardiovascular risk but also has many other health benefits. And you may also already be taking supplements containing magnesium and potassium.

Now there’s another tool to consider.

Switch the salt in your shaker

After waiting 13 years since for someone to market an American version of the “novel, sodium-reduced, potassium-, magnesium-, and l-lysine-enriched salt” used nationwide in Finland, I’ve finally gotten together with Ayush Botanicals of Mercer Island, Washington, to introduce a very similar version. Holly and I are using it as our only salt at home already.

It’s called “WrightSalt.” To be honest, I’m not thrilled with that name, but the attorneys said it couldn’t be called “Heart Health Salt,” “Anti-Hypertension Salt,” “Reduce Stroke Salt,” “Longevity Salt,” “Fewer Cardiovascular Deaths Salt,” or anything else that would indicate what it actually helped accomplish in Finland. Even though all of those names are accurate, they

would be “making a claim.” And, as you know, telling the truth on the labels of natural health products is “illegal” in these United States—despite the “freedom of speech” “guaranteed” by the 1st Amendment to the Constitution.

But I digress.

“WrightSalt” is available through the Tahoma Clinic Dispensary, Ayush Herbs (1-800-925-1371), and hopefully soon through your own natural food store or compounding pharmacy. And, to repeat, I am associated with this product—and am proud to introduce another harmless (except in enormous quantities) natural product that has the ability to make a very significant difference to your health, your family’s health, and the health of entire population of these United States.

Especially one that tastes good with whatever you’re eating, too! JVW