Watch Low-Sodium Products in Vulnerable Groups
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July 20, 2011 (Lancaster, United Kingdom) — British doctors are warning that patients with compromised renal function or those who are taking particular drugs and are at risk of hyperkalemia could unknowingly be consuming too much potassium if they are using products marketed as low sodium [1].

In a letter to the British Medical Journal, Dr Alexandra Dent (Royal Lancaster Infirmary, Lancaster, UK) and colleagues report on the case of a man in his 80s, who had chronic kidney disease and hypertension, and was hospitalized for poor glycemic control. On admission, the man had a normal potassium level of 5.1 mmol/L; he was taking lisinopril but no other drugs that would affect renal function. During his stay, his potassium increased to 6.9 mmol/L; lisinopril was stopped but his potassium concentration remained high and did not respond to standard medical treatment.

Hospital staff realized he was adding add three to four sachets of a low-sodium product, Solo, to his meals. After withdrawing the product, the patient's serum potassium fell back to 5.3 mmol/L.

"There have been quite a few case reports published regarding the use of commercially available low-sodium salt, but when I have discussed the matter among my fellow junior colleagues I have found that they haven't really been aware of the high potassium concentration in the low-sodium salt and that certain vulnerable groups of patients could develop hyperkalemia subsequently if they take these substitutes," Dent told heartwire.

Dent said that after the case, the low-sodium salt products were removed from use in her hospital.

"Although Solo can reduce BP, it is a potential risk factor for developing hyperkalemia in vulnerable patients, including those taking aldosterone antagonists, potassium-sparing diuretics, and angiotensin II antagonists, in addition to those at risk of hyporeninemic hypoaldosteronism," she and her colleagues warn. "Clinicians need to be aware of this risk when advising patients with low salt diets."

The authors report no conflict of interest.

References


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