[IMAGE]

Eliminating High Blood Pressure: Just Add Water

High blood pressure is the main cause of disease and death in industrialized societies. In the U.S. alone, nearly one million people die from stroke or heart failure annually, despite the fact that high blood pressure, or hypertension, is considered an easily controlled condition. Although prescription drugs have produced mixed results, good evidence suggests that lifestyle and diet alterations can effectively reduce hypertension.

The effectiveness of combating hypertension with a specialized diet was evaluated in a recent study in the *Journal of Manipulative and Physiological Therapeutics*. Researchers wanted to investigate the effects of water-only fasting on blood pressure. After initially eating only fruits and vegetables for two-to-three days, 174 hypertension patients (with a minimum blood pressure of 140/90) consumed only distilled water for 10 days. Then, for approximately one week, subjects followed a vegetarian diet during a refeeding stage, to slowly re-accustom their bodies to food again.

Nearly 90% of patients reduced their blood pressure to less than 140/90 in the three-week period, regardless of how high their blood pressure had been. On average, BP reduction was 37/13, and was greatest in more severe cases. This is “substantially in excess” of the combined effects of a vegetarian diet, alcohol and sodium restriction, and exercise. All those who began the study on hypertension medication were able to discontinue use by the end of the study.

This study supports the theory that blood pressure can be dramatically reduced through simple, short-term diet modifications, without drug use. Talk to your doctor of chiropractic to get more information on preventing hypertension through a healthy diet and exercise, and visit http://www.chiroweb.com/tyh/nutrients.html for more information on proper nutrition.

Reference:

Goldhamer A, Lisle D, Parpia B, et al. Medically supervised water-only fasting in the treatment of hypertension. *Journal of Manipulative and Physiological Therapeutics*, June 2001:24(5), pp. 335-339.