According to a new study published in *Pediatrics* titled “Sodium intake and blood pressure among U.S. children and adolescents,” higher sodium intake is associated with higher blood pressure among youth. **But the impact of higher sodium intake—and corresponding risk for high blood pressure—is even greater among young people who are overweight or obese.** CDC estimates that more than one-third of U.S. children and adolescents are overweight or obese.

High blood pressure, also known as hypertension, is a leading risk factor for heart disease, stroke, and other cardiovascular diseases. High blood pressure in childhood often leads to high blood pressure in adulthood—and is associated with early development of cardiovascular disease and risk for premature death. In this study, for the first time, researchers conducted a large-scale examination of the joint effect of weight status and sodium intake on the risk for high blood pressure among more than 6,000 children and adolescents aged 8–18 years.

**Daily sodium intake much higher than recommended levels**

On average, study participants consumed about 3,400 mg of sodium every day, nearly the same average consumption as adults.

- Boys consumed more sodium and calories than girls.
- Non-Hispanic whites consumed more sodium and calories than non-Hispanic blacks, Mexican Americans, and others.

### Opportunities for Action

**Reduce sodium consumption among children and adolescents.**

- The *2010 Dietary Guidelines for Americans* recommend that Americans aged 2 years and older reduce sodium intake to less than 2,300 mg/day. African Americans and youth with high blood pressure, diabetes, or chronic kidney disease should reduce sodium to 1,500 mg/day.
- More than 75% of the sodium we eat comes from processed and restaurant foods.
- Small changes can make a big difference. Tips for reducing sodium include
  - Reading labels while shopping to find the lowest sodium options of your favorite foods.
  - Providing your children with a diet rich in fruits and vegetables and low in processed and packaged foods.
  - Working with your children’s schools and extracurricular activities to improve the nutritional quality of meals and snacks.

**Have your child screened annually for high blood pressure, starting at age 3.**

- High blood pressure in children and adolescents often remains undiagnosed, in part because it requires an examination using an age-appropriate blood pressure cuff size and a comparison of results against standards for your child’s gender, age, and height.

**If your child has prehypertension or hypertension, work with your health care team to manage your child’s condition.**

- High blood pressure often can be managed through healthy lifestyle changes, such as regular exercise and a heart-healthy, lower sodium diet.

*Recommended by the American Academy of Pediatrics and the National High Blood Pressure Education Program Working Group.*