

## **SALT POISON**

From earliest times to the present day, salt (sodium chloride) has been popularly regarded as a health giving, necessary and satisfying addition to the human diet. Some advocates of salt explain that man's affinity for this mineral is an inevitable by product of his evolutionary origins in the primordial oceans. It is a fact that the sea is our biological mother, and that every species which has evolved out of the sea has kept one important marine characteristic- an unvarying and unique percentage concentration of salt in its bodily fluids. In order to ensure the exact degree of sodium chloride concentration which is required, land animals have developed elaborate physiological systems of chemical regulation and ionic balance. These mechanisms function to maintain and recycle sodium and chloride ions in the body, since salt is no longer an accessible part of our ecological environment, as it was in the oceans. Paradoxically, sodium chloride is at the same time one of the most abundant and rarest of chemicals on the planet. There are billions of tons in the ocean (each litre of sea water contains 32-35 gm.) but for plants and animals on dry land, it is practically unobtainable in its mineral form. So, for the last millions of years, all forms of land based life on earth have had to evolve without it. This holds true for humans as well, of course; had salt been an indispensable food item, we would not be here now to discuss it.

The human being is the only land animal who has gained an unlimited access to salt in its crystalline form and who uses it regularly. It is true that many vegetarian animals, such as deer, love salt when they can get it, but they usually do not find it on their own, and they certainly don't need it. However, their blood contains the physiologically correct quantity of salt, and their health is as good as ours. Where does their salt come from? The answer is that meat and vegetables contain sufficient quantities of salt to support all animal life, including human, without the need for additional supplies. There is no denying that salt is a staple ingredient in the fluids of human life. The body contains about 200 gm. of sodium chloride in varying percentages in all the tissues and fluids of the body, including the blood, lymphatic, cerebrospinal, and intra- and extra-cellular fluids. With potassium, it is the major regulator of fluid exchanges and many important chemical reactions. From the digestive point of view, sodium chloride is a necessary component of hydrochloric acid, the powerful digestive juice secreted by the stomach. It also has an anti-toxic and antibacterial action, decreasing the effects of poisons circulating in the body and helping to eliminate them.

However, just because a little salt is such a good thing, it does not follow that more salt is even better. It is commonly believed that excessive salt intake provides a margin of safety against salt depletion, and that any extra salt can be easily eliminated in the urine, perspiration and faeces. This is not the case at all. Well functioning kidneys, working at their maximum capacity, only evacuate 5 gm. of salt a day, while the average European salt intake is 10-15 gm. per day, and in Japan it is as high as 20 gm. During evolution, when primitive man did not have access to salt in its mineral form, the kidneys were conceived by nature to conserve salt and not to eliminate it. In fact, much of the work of the kidneys is directed towards re-filtering salt from the urine back into the bloodstream for recycling. Even the hydrochloric acid is neutralized by glands in the duodenum after the food leaves the stomach, and is transformed back into sodium chloride and water. Salt deficiency thus generally results from excessive loss of salt from the body rather than inadequate intake. This is most commonly caused by a very high degree of sweating due to extreme physical exertion or very hot, tropical climates. It can also be caused by renal failure or by a sudden loss of salt-containing fluids due to vomiting or injury. However, in reasonably temperate climates, normal sedentary people lose negligible amounts of salt through these means. Besides, just because salt is being expelled from the body, this does not mean that we must necessarily try to immediately replace it, any more than we should try to replace lost alcohol or any other toxin or poison that the body is eliminating.

Because the eliminative capacity of the kidneys is generally exceeded, one may well wonder where the extra salt goes. As the percentage of sodium chloride in the blood always remains constant, the body must find other ways of re-establishing the salt/water balance. The first way is

through dilution, by increased intake of non-saline fluids. This is why we become thirsty after eating salty foods, not because of body dehydration. To dilute 4 gm. of salt, half a litre of water has to be drunk. When we drink in order to dilute salt, the extra fluid is not readily eliminated by the kidneys, and so the volume of blood increases. This raises the blood pressure and forces the kidneys to work harder to filter a larger quantity of blood. When dilution is no longer sufficient, the salt is stored. It goes into bones, tendons, ligaments and connective tissues all throughout the body, which rapidly become clogged with salt. It is also stored under the skin, and it is this subcutaneous salt which is expelled during profuse perspiration. The tissues chosen for salt storage have the ability to decompose sodium chloride, as they absorb chloride and reject sodium. Chloride accumulates in the body for years together without any apparent perturbation, up to the time that the ultimate storage limit has been reached. Then salt becomes verily a poison.

There are many factors which contribute to high blood pressure: the nature and lifestyle of the individual, high levels of stress, smoking and unhealthy eating habits. But the major factor is very simple: too much salt in the food. Studies have shown that the tendency of increasing blood pressure with increasing age does not occur in populations which do not take much salt in their daily diet, and eat a lot of vegetables rich in potassium, which naturally balances salt. For example, consumption of salt in New Guinea is less than 0.5 gm. a day, and blood pressure among 70 year olds is the same as it is for people in their 20's. On the other hand, statistics reveal a direct relationship between salt consumption and cardiovascular disease in countries where salt consumption is very high. In Korea, for example, medical conditions attributable to hypertension are widespread. Hospital wards are full of people in comatose states, paralyzed by cerebral apoplexy, and many pregnancies are complicated by eclampsia due to high blood pressure. In Japan, salt intake has also been linked to the high incidence of stomach cancer.

In modern populations, the frequency of high blood pressure increases with age. It occurs in 70% of all people over 60. Even in the population under 30, about 30% have related vascular problems. High blood pressure is not as usual in young women as it is in young men, but as age advances it becomes more frequent. The estimated additional life expectancy of a 35 year old with even slightly elevated blood pressure is the same as that of a person 20 years older with normal blood pressure; it is 24 years in both cases. In developed countries, cardiovascular impairment is responsible for almost half of the deaths, and high blood pressure is first among the factors which contribute to it. Forty years ago, when no medicine was available to relieve high blood pressure, doctors found that by reducing sodium in the diet, arterial pressure was very effectively lowered. This is still the first line of treatment in all high blood pressure therapy, and is much cheaper and less hazardous than taking drugs.

High salt consumption also acts upon the mucus membranes of the breathing tracts. Among the symptoms are: repeated sneezing, frequent colds and loss of the related senses of taste and smell. When over consumption continues for an extended period, these characteristics increase and emerge as chronic coryza, swelling of the nasal mucus membranes, catarrh of the breathing tracts, nervous coughs and exacerbation of asthma. Negative effects on the digestive system include acidity, swelling of the salivary glands, chronic irritation of the palatal mucosa and throat, and swelling of the tonsils. Abnormally high thirst provokes an excessive intake of fluids which disturbs the digestion by diluting the digestive juices. This may induce constipation or diarrhoea, and abnormal modifications of the linings of the large intestines and anus, causing piles. When the kidneys are forced to filter ten times as much salt as they are designed to, the probability of kidney impairments is bound to increase. Excessive salt can also cause sexual disturbances, such as premature ejaculation in males. In females it can be responsible for pruritis of the genitals and decreased secretion of vaginal lubrication. Doctors have also found that discontinuance of salt leads to improvement of rheumatism and arthritis, and some types of ocular diseases and migraines.

We overuse salt from childhood, and serious conditions derived from an excess of sodium may be found very early. One important source of extra sodium is dehydrated cow's milk, which contains

three times as much salt as human milk. The water in which it is dissolved is often salted as well. Commercial baby foods are also highly salted to make them palatable to mothers as well as babies. Once the insidious habit of eating salt is acquired in infancy and childhood, it is very difficult to change. Food prepared commercially, even bread, always contains too much salt. So begin to look around you, and look at your own eating habits. Are you sure you are not overusing salt when you prepare your food, and then pouring it on again at the table, only to gratify your salt habit? An excess of salt in our daily life pollutes our alimentation just as exhaust fumes, sewage and industrial wastes pollute our environment. It is said that in some monasteries, it has been possible to suppress harmful and stimulating products such as meat, fermented drinks, coffee and tea, but never has it been possible at the same time to suppress salt. The idea of reducing salt seems impossible at first. In fact, it takes only a few days before the food becomes as tasty and appetizing as before. Over-salting food is a habit, and it can definitely be broken. We can easily live with less salt, just as we can live with less sugar. The most important requirement is to have the agreement of the cook.

In 1930, in his book 'A Guide to Health', Mahatma Gandhi wrote, 'Vegetarian food contains in itself enough salt, so it is unnecessary to add any other quantity. Nature has foreseen the necessary quantity of salt to keep in good health.' Gandhi states also that persons who do not add salt to their food have purer and healthier blood, which makes them more resistant to infection and disease. 'I have never been able to find any objection to stopping the use of salt, just the opposite,' says Gandhi. But he never managed to convince his wife, who used to love salt very much. 'I am convinced', he says, 'that had she been able to give up salt, she could have been cured of her sickness and would still be alive.'

- Fuente: [www.yogamag.net/archives/1981/haug81/salt.shtml](http://www.yogamag.net/archives/1981/haug81/salt.shtml)

The need of salt (concentrated sodium chloride) in human health and nutrition is another of the great myths of modern times. Salt is a deadly poison, a terrible abusive irritant to human tissue. This can be confirmed by anyone by sniffing salt water and experiencing the terrible burning sensation as the delicate sinus membranes are irritated, by putting salt water into the eyes and experiencing the burning sensation while observing the rush of blood to the eyes to protect their delicate membranes (bloodshot), by putting salt on an open wound and experiencing the terrible burning sensation as the tissue is irritated and destroyed, or by drinking a concentrated salt solution and experiencing vomiting as the body acts to repel this foreign and toxic substance.

Salt is not synthesized or processed in any way in the body and serves no useful purpose. It enters as sodium chloride, it is stored as sodium chloride, it is excreted as sodium chloride. It leaves a trail of destruction from the time it enters until the time it can be excreted. When excessive salt (that which the body cannot immediately excrete) is deposited everywhere in the fluid medium of the billions of living body cells causing extreme irritation, injury and death to the cells, the cells send forth a desperate SOS signal and the person gets thirsty and drinks a lot of water. This water is carried by the blood and deposited in the tissue fluids to dilute the devastating effects. This results in excessive body fluids, edema.

The body takes every opportunity to excrete this salt—constantly through the urine, at even limited or almost no exertion by profuse sweating, through crying (tears), etc. The salt deposits throughout the body cause cells to contract and discharge their life fluids and other vital elements resulting in hardened tissues, shriveled blood corpuscles, hardened arteries, arthritis, ulcers, blindness and distorted vision, hyper-aesthesia of the nerves, high blood pressure, tumors, cancer, psoriasis, neuritis, heart defects, extreme edema and innumerable other degenerative conditions too numerous to list. In one experiment one of the authors ate typical restaurant salads (with the usual amount of salt in the dressings) for one meal and supplemented the salad meal with a few “no salt added” crackers (containing only whole wheat flour and salt in the baking of the crackers themselves) with commercial old fashioned peanut butter which contained only ground

peanuts and salt. The next day his one-meal for the day consisted of his usual fresh vegetable salad without any dressing or seasoning supplemented by a bowl of commercial soup containing the usual amount of salt plus some of the same kind of crackers and peanut butter eaten the previous day.

The author's thirst became very pronounced during both days and he drank a considerable quantity of distilled water (his only drink). The results of only this relatively small amount of consumed salt were astounding. The body retained a great deal of liquid to dilute the harmful irritation of the salt and resulted in the gain of eight pounds in body weight in only 2 days. In addition the absorption of so much water to counteract the salt damage resulted in a much less than usual amount of liquid in the feces leading to a drying-out or compacting effect as the first signs of constipation—a condition the author never experienced during eight years of a salt-free diet. In addition to the above effects, signs of indigestion and 'heart burn' occurred after each meal as digestion was impaired, and, since all body cells were affected by the salt, a feeling of dullness and loss of energy resulted—conditions which never occurred during many years of salt-free dieting. Other noticeable effects were the puffing and bloating of the face and around the eyes. The two-day (only two meals) experiment was so extreme in its negative effects that the author ended it and resumed his regular no-salt diet. It required approximately two days for his body to eliminate the accumulated salt and water and return to its normal weight and health. Salt is a true anti-biotic (against all life, a killer). It was formerly used as an embalming agent. It is used today as preservative killing the bacteria (life) to prevent the natural decomposition of dead organisms.

Cramps initially experienced as salt is removed from the diet or rapidly excreted from the body are nothing more than "withdrawal symptoms.". A healthy person on a salt-free diet will experience these same cramps if he eats salt. Salt eating is an addiction begun prenatally and shortly after birth as the parents force salt into the baby to the extreme repulsion and disgust of the child. After a few weeks of forced eating the baby's body becomes so weakened that it forms a craving and addiction. This continues throughout its life. In order to fully understand the disaster of salt eating, let's briefly follow the path of salt from the time it enters the mouth until it is excreted from the body. Remember, salt has nothing to do with the sodium needs or excesses of the body. Salt is sodium chloride first, last and always from the time it enters the body until the time it is discharged. If it were broken down into its primary constituents, sodium and chlorine, as it passed through the body the tragedy would be complete since both inorganic sodium and inorganic chlorine are highly destructive to life and would immediately render a human lifeless. As the salt enters the mouth in food or drink (or as a deadly salt 'pill') the cells of the lips and lining of the mouth (including gums and tongue) are severely irritated, with many killed and the rest seriously weakened. In a healthy body the first line of defense will be instantly activated with a severe and intolerable stinging and burning sensation as the tissue cells are destroyed and the irritation and distress is imposed upon nerve cells. The natural response to such sensation is to spit out the substance responsible for it so that the destruction will not proceed any further. A weak, unhealthy, salt-addicted and taste-perverted body is so depraved and depressed in its defensive capabilities that it not only tolerates but also demands more of the destructive addictive substance.

The cells of the mucous membrane of the throat, esophagus and stomach are the next to suffer the tragedy of death and destruction. As the irritant moves into the stomach the body's second line of defense goes into action. A healthy body will instantly signal a sensation of nausea and trigger violent contractions of the stomach to cause vomiting and prompt elimination of the salt. A weak unhealthy body will tolerate the irritation and permit it to continue its journey of destruction as some of it is absorbed (assimilated) into the mucous membrane tissue and thence into the bloodstream, and the rest is emptied into the duodenum. Upon reaching the duodenum, cellular distress is once again repeated. Since the trap door from the stomach has closed the only way for prompt discharge of the salt poison is through the intestines and bowels. A normal healthy body will respond with violent contractions of the intestinal muscles which produce a profuse flow of fluid from the mucous membranes to dilute the salt irritation and a rapid propulsion of the salt solution, and everything (all other ingested substances) suspended in it or ahead of it, through the

intestines for a violent watery discharge from the anus (diarrhea). A weak unhealthy body will of course fail to actively respond to the salt, and the salt solution and imperfectly digested foods will be absorbed (assimilated) through the intestinal walls and thence into the bloodstream.

At this point the healthy body has rid itself of the salt irritant by spitting it out, vomiting it up and/or excreting it in the form of diarrhea. The weak unhealthy body, on the other hand, has dully accepted the poison and passed it through the stomach and intestinal lining, destroying and injuring millions of cells as it goes. All digestive tract tissue cells have suffered as have all involved blood and lymph capillary cells. The blood carries the salt all over the body creating havoc with every cell. The kidneys which normally filter out small amounts of salt which accidentally accompany digested food into the blood are not equipped to handle large amounts since its own cells are destroyed and injured by the irritant. The liver, which filters and chemically detoxifies many poisons and toxins tries but is helpless to do anything with the very stable and strong sodium chloride molecules and suffers severe damage as the salt passes through it. The heart suffers. The brain suffers. All body cells suffer.

Once the salt is trapped in the body's circulating fluids the body response is one of extreme thirst as the cell population screams and cries for relief from the destructive foreign irritant. Most of the fluids consumed by the person are quickly assimilated and dilute and expand the volume of blood plasma, resulting in higher blood pressure and pulse rate. This in turn forces more fluid into tissue spaces to dilute salt concentrations in an effort to relieve cell distress. The fluid accumulates and remains as edema. The trail of distress, destruction and tragedy is total, having adversely affected every cell in the body. All surviving bodily defense mechanisms are activated to eliminate the salt through tears, sweat, urine, and mucus (excreted in the digestive and respiratory tracts). More consumed salt intensifies the progressive destruction and deterioration of cells and leads to functional and structural failures through the body.

- Fuente: [www.rawfoodexplained.com/condiments/salt.html](http://www.rawfoodexplained.com/condiments/salt.html)