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*I forge ahead, nor can the opposing rush,
That sways all else, my onward progress check,
But bears me on against a whirling world.*

--Ovid, *Metamorphoses*. Bk. ii, 1.72

Helen Keller vs. The Brave New World: An Essay on Salt

Each person is unique and therefore different from every other person. Some differences are generally thought to be advantageous while others are disadvantageous. Helen Keller's inability to see or hear constituted differences that we might class as handicaps. But we are all "handicapped" in greater or lesser ways. Therefore our attitude toward the handicapped ultimately reflects our attitude toward ourselves. There are two basic approaches:

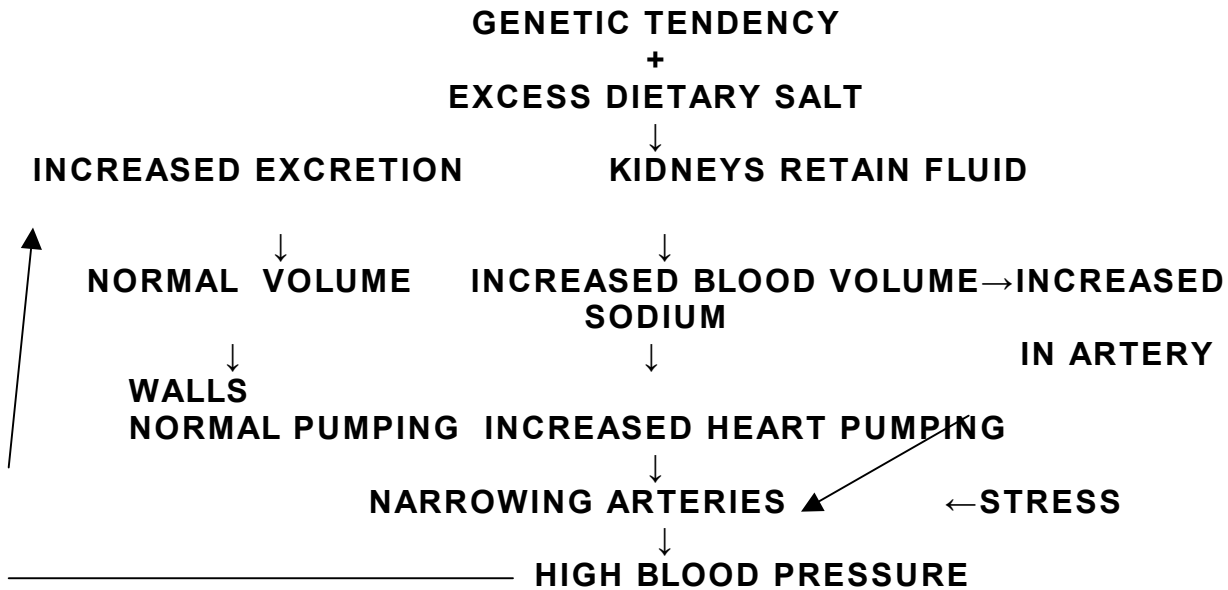
- **CARETAKER.** At first blush this approach seems very humanitarian. It focuses on the **needs** of the handicapped. And it requires allocating the resources of the majority to accommodate and make special provision for these minority needs. When conducted on a societal basis the result must be Aldous Huxley's *Brave New World*, where everyone is warehoused and cared for. Life is robbed of meaning and us handicapped are enslaved.
- **CREATIVE.** This inspirational approach focuses on the potential **contribution** of the handicapped to society. It encourages each individual to assume responsibility for their own adaptation and points up their possibilities rather than difficulties. Many severely handicapped persons such as Helen Keller have made significant contributions to society and thereby found rich lives full of meaning. Paradoxically, this apparently cold-hearted approach results in the most good for both the individual and society.

A Common Handicap

Above the drinking fountain someone had neatly lettered "OLD FACEFULL." An apt reference to the uncontrolled geyser erupting in the face of any passerby who trustingly leaned over expecting smoothly delivered refreshment. Pressure is a necessity for delivering a liquid, but uncontrolled pressure is a hazard. This is certainly true for that most vital of all liquids: blood. High blood pressure can be a major factor in heart attacks, strokes and other life-threatening developments. Old Facefull can probably be fixed with a simple adjustment, but high blood pressure is not so simple.

It may begin by the kidneys failing to excrete sufficient salt and water. The resulting increase in the volume of blood initially prompts the heart to pump more of it. This

causes the pressure to rise and more blood flows through the tissues. Since the tissues don't need more blood they slow up the flow by tightening the arteries.



Narrowing the arteries would increase the pressure further except that the heart tends to back off to its normal output as resistance from the arteries increases. The net effect is a continuing high blood pressure. This is an accurate simplification of a serious malady that afflicts about 20% of the world's population.

But what about salt?

Salt and sodium play major roles at several points in the blood pressure control scheme. As early as 1904 it was suggested that eating salt caused high blood pressure. Some facts to review:

- Daily salt consumption for most individuals is 10 – 12 grams:
 - 3 grams occurring naturally in food
 - 4-6 grams added during commercial processing
 - 3 grams added in cooking or at the table
- The minimum amount required for good health is about half a gram
- Normal people can eat much more than 10 – 12 grams with no effect on their blood pressure.
- People with high blood pressure tend to eat a lot of salt.
- People with high blood pressure can reduce it by drastically cutting their salt intake to about the minimum (half a gram). If they eat more salt their blood pressure will go back up.
- Patients rarely follow their doctor's instructions to reduce their salt intake drastically (1 gram or less).
- Potassium helps to keep the blood pressure down.
- A one-to-one mixture of potassium chloride and sodium chloride (salt) tastes about the same as straight salt.
- Fat people, blacks and people with high blood pressure tend to like the taste of salty foods.
- Fat people and blacks tend to have high blood pressure.
- When fat people lose weight their blood pressure goes down.

What to do?

Three possibilities present themselves:

1. Control the sodium content of the food supply or at least of selected foods.
2. Provide information on sodium content of foods for those concerned.
3. Do nothing.

The creative (and humanitarian) approach is to allow the exigencies of the marketplace to dictate on a case-by-case basis the option of choice. A healthy market will do more good for everyone's blood pressure than any amount of caretaker meddling.