

DASH diet may lower risk of recurrent kidney stones

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to 0.32; P = 0.08) in association with an increase in magnesium and citrate excretion and urine pH.

"We conclude that the DASH diet could represent a novel strategy worthy of study in the prevention of high urinary <u>calcium oxalate</u> supersaturation, in addition to the conventional low-oxalate diet," the authors write.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—The Dietary Approaches to Stop Hypertension (DASH) diet might be an effective alternative to the low-oxalate diet for reducing risk of kidney stone recurrence, according to research published in the March issue of the *American Journal of Kidney Diseases*.

Nazanin Noori, M.D., Ph.D., of the Shahid Beheshti University of Medical Sciences in Tehran, Iran, and colleagues randomly assigned recurrent <u>kidney</u> <u>stone</u> formers to follow the DASH diet (29 participants) or a low-oxalate diet (28 participants). At eight weeks, the researchers assessed changes in urinary calcium oxalate supersaturation and 24-hour urinary composition.

Among the 41 participants who completed the trial (DASH group, 21; low-oxalate group, 20), the researchers observed a trend for increase in urinary oxalate excretion for the DASH group versus the low-oxalate group (point estimate of difference, 9.0 mg/d; 95 percent confidence interval [CI], ?1.1 to 19.1 mg/d; P = 0.08). However, in the DASH group, compared with the low-oxalate group, a trend for calcium oxalate supersaturation to decrease was observed (point estimate of difference, ?1.24; 95 percent CI, ?2.80



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