Special Issue

State-of-the-Art Hypertension and Biomedicine in the USA

Message from the Guest Editors

The long-term regulation of blood pressure rests on renal and non-renal mechanisms. The gastrointestinal tract has to be integrated in the overall regulation of sodium balance and blood pressure because it is the first organ exposed to ingested sodium. The gut microbiota can regulate about 10% of the host's transcriptome, especially those genes related to immunity, cell proliferation, and metabolism. Hypertension develops with chronically increased sodium intake when sodium that accumulates in the body can no longer be sequestered (e.g., skin), extracellular fluid volume is expanded, and compensatory neural, hormonal, and pressure-natriuresis mechanisms fail. However, sodium is not the only mineral that can affect blood pressure. Moreover, sodium can affect overall health independent of blood pressure regulation. Thus, it is important to test the effect of minerals on blood pressure regulation-related and unrelated mechanisms, such as studying renal tubule cells shed in the urine. The changing environment has to be put into consideration into all the above mechanisms in the pathogenesis of hypertension.

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