Kidney doctor: Why Cutting Salt Isn't Fixing Your Swelling Transcript

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Introduction to Fluid Retention in Kidney Disease

When albumin drops, fluid leaks out of your vessels and into your tissues. That's the puffiness. That's the swelling. But here's where I started asking different questions.

Because if it were purely about kidney function, then two people at the same EGFR should have the same degree of swelling. And they don't. not even close.

So what else is going on? What the research is revealing and what I have seen play out clinically over and over is that fluid retention is a multifactorial problem.

I'm Dr. Vismair Phan, a physician on a mission to help you break free from symptom management and step into a life of striving health. Together we will uncover simple, powerful ways to prevent disease, restore energy and take control of your health naturally.

If you're ready to stop managing illness and start building vitality, you are in the right place. Your prescription for vitality starts now. Your ankles are swollen again.

Your rings feel tight. You wake up and your face looks puffy. Your shoes barely fit by afternoon. And you're carrying this heaviness in your legs that no one else can see.

But you feel it every single step. And here's the part that gets to me. By the time most people notice that swelling, their kidneys have already lost more than half of their filtering power.

half and nobody told them that it was happening so why is your body holding on to all this fluid and more importantly what if the answer isn't just take another water pill what if there's something deeper going on that nobody's investigating that's exactly what we are going to unpack today Because I have been looking at this problem differently for years now.

And what I keep finding is that fluid retention in kidney disease is almost never about one thing. It is the whole system crying out for attention. Have you ever wondered why some people with kidney disease swell up dramatically while others at the same stage barely notice anything?

Why Swelling Happens Beyond Kidney Function

Or why your dietic works for a few hours but by evening your legs are right back where they started? Maybe you have been told to just cut salt and limit fluids and you have done that faithfully and it's still not enough.

If that's you, I want you to know something. You are not doing it wrong. The approach is just incomplete. Here's what most people are never told about fluid retention.

Your kidneys do far more than make urine. They're running a constant, incredibly precise balancing act, managing sodium, potassium, fluid volume, blood pressure and hormones all at once.

When kidney function declines, that balance starts to unravel and fluid buildup is one of the most visible signs. But the mechanism behind it is more layered than it appears on the surface.

And this is where it gets interesting. There are at least three different things happening simultaneously when fluid starts accumulating. First, damaged kidneys lose the ability to excrete sodium efficiently.

And there is a rule in physiology that never breaks. Where sodium goes, water flows. So sodium builds up and

water comes right along with it. Second, the kidneys produce hormones, renin, aldosterone that regulates blood pressure and fluid balance.

When these systems become dysregulated, your body gets stuck in a mode of holding onto fluid it should be releasing. And third, and this one surprises a lot of people, many people with kidney disease are losing protein through their urine.

Those proteins, especially one called albumin, act like tiny sponges inside your blood vessels, keeping fluid where it belongs. When albumin drops, fluid leaks out of your vessels and into your tissues.

That's the puffiness. That's the swelling. But here's where I started asking different questions. Because if it were purely about kidney function, then two people at the same EGFR should have the same degree of swelling.

And they don't. Not even close. So what else is going on? What the research is revealing, and what I have seen play out clinically over and over, is that fluid retention is a multifactorial problem.

Inflammation makes blood vessels leaky. Heart function determines how efficiently fluid circulates. Your lymphatic system, this whole drainage network most people never think about, determines whether fluid gets recycled or just sits in your tissues.

Even your gut health plays a role because gut dysbiosis drives the kind of systemic inflammation that makes every one of these problems worse. When you start looking at it this way, taking a dietic and cut out your salt starts to feel like putting a bucket under a leaking roof without ever looking at why the roof is leaking.

Multiple Causes of Edema: Sodium, Hormones, and Albumin

And this reminds me of someone I worked with at our institute, a woman in her early 60s with stage 4 kidney disease and persistent swelling in her legs and ankles.

She was already doing everything right by conventional standards. She was on a diuretic, following a low sodium diet, checking in with her kidney doctor regularly, but the swelling barely budged.

When we did a comprehensive assessment, and I mean detailed, looking at her whole system, we found severe inflammation, low albumin from a combination of kidney protein loss and poor gut absorption, significant lymphatic congestion, and mildly compromised heart function that was contributing to the backup.

None of these things had been investigated before. because the focus had been entirely on the kidneys. We built a personalized system for her addressing every one of those layers and within about three months, the swelling had improved dramatically.

Her kidney function actually ticked up slightly too, which was unexpected. Now every person responds differently. And what worked for her may not be the exact right approach for someone else.

But her case showed me something I keep coming back to. When you expand the lens, you find solutions you'd never see through the narrow view. So let's get practical.

Because I don't want you to just understand this, I want you to walk away with things you can actually do. Let's start with sodium. Because this is the foundation, but not for the reason you think.

You've heard, cut your salt. And yes, most people with kidney disease should aim for under 2000mg of sodium per day. But here's the number that shocks people.

75% of the sodium in the average American diet doesn't come from the salt shaker. It comes from processed foods, restaurant meals, packaged snacks, bread, condiments, canned foods.

Even some medications contain sodium. So putting down the salt shaker while it matters barely scratches the surface. The real shift happens when you move towards whole, unprocessed foods, fresh vegetables, fruits, whole grains, legumes, lean proteins, prepared at home.

That's where you take back control. Read labels. Anything over 200mg of sodium per serving needs a second look. Now here's something that trips up people.

What about potassium? In a healthy body, potassium helps balance sodium's effects. But in kidney disease, the kidneys can't always excrete potassium efficiently, so it can build up to dangerous levels.

A Clinical Case Showing a Whole-System Approach

Some people need to restrict it. Others can actually benefit from a potassium-rich food. This is exactly why personalisation matters so much. What your body needs depends on your labs, your stage of disease, your individual root causes.

There's no one size fits all here. And fluid intake, this one is counter-intuitive. You'd think drinking less would reduce swelling, right? But restricting fluids too aggressively can concentrate your blood, strain your remaining kidney function, and paradoxically trigger your body to hold onto even more sodium and water.

The general principle is to match your fluid intake to your output plus about 500ml for what you lose through breathing and skin. But some people with early kidney disease don't need any fluid restriction, while those with advanced disease may need careful limits.

This has to be individualized. Here's a practical tool that costs nothing and takes 30 seconds. Weigh yourself every morning at the same time after using the bathroom, wearing similar clothing.

Write it down. A sudden gain of two to three pounds in a single day or five pounds in a week almost always means fluid retention. And that's your signal to reach out to your doctor.

This gives you real-time data about what's happening inside your body before it becomes a crisis. Now stay with me, because this is where the pieces start coming together in a way most people never hear about.

Your lymphatic system. Think of it as your body's drainage network. plays a huge role in fluid balance that gets almost zero attention in conventional kidney care.

When your lymphatic system is sluggish, fluid pools in your tissues even if your kidneys are doing a reasonable job. And one of the simplest, most effective ways to get lymphatic fluid moving is gentle movement.

Practical Steps: Sodium, Potassium, Fluids, and Daily Weighing

Not intense exercise. In advanced kidney disease, overexertion can actually backfire. I'm talking about walking 15 to 20 minutes few times a day, gentle stretching, ankle pumps, simple yoga movements and elevation.

This is more powerful than most people realize. When you elevate your legs above heart level for 20 to 30 minutes several times a day, you are using gravity to pull fluid out of your lower extremities and back into circulation where your kidneys can actually process it.

Some people find sleeping with their legs slightly elevated on pillows help too. Though you want to make sure this doesn't interfere with breathing if you have any heart or lung concerns.

Compression stockings properly fitted graduated compression can prevent fluid from pooling throughout the day. But these need to be appropriate for your specific situation, especially if you have any vascular issues.

I want to address something I get asked about constantly. Herbal diuretics and kidney cleanse teas. And I'll be

direct, this is where I get cautious. Just because something is natural, doesn't mean it's safe for compromised kidneys.

Many herbs marketed as kidney cleansers can actually be harmful or interact with medications in dangerous ways. That said, certain foods have mild gentle diuretic properties without stressing the kidneys.

Celery, cucumber, watermelon, parsley in moderate amounts. These work by supporting the body's own fluid balance rather than forcing fluid out. Dandelion leaf tea is another option some people explore but it's high in potassium so you absolutely must check with your doctor first.

And this brings up something I feel strongly about. With kidney disease, the quality of any supplement you take matters enormously. Many supplements contain unnecessary fillers, heavy metals or ingredients that can actively harm your kidneys.

We only recommend pharmaceutical grade supplements that has been third party tested for the purity. One worth mentioning specifically is omega-3 fatty acids.

Multiple studies show omega-3s help reduce inflammation, support heart health, and may even slow kidney disease progression. They don't directly drain fluid, but by addressing the inflammatory component that makes blood vessels leaky and triggers sodium retention, they can be part of a comprehensive approach.

Quality and dosing are critical here.

Lymphatic Support, Movement, and Elevation

This isn't a more is better situation and that brings us to the deeper root causes. If low albumin is contributing to your leg swelling, we need to ask why it's low.

Is your kidney losing too much protein in the urine? That's one pathway. But are you also not absorbing protein well because of your gut issues? Are you restricting protein too aggressively based on outdated dietary advice?

The relationship between protein intake and kidney disease has evolved significantly. Research now shows that the type and quality of protein matters more than the blanket quantity.

Plant-based proteins tend to be less stressful on the kidneys while still providing what your body needs. A functional approach looks at your individual protein requirements based on muscle mass, Activity level, inflammatory status and kidney function, not a one-size-fits-all restriction.

Inflammation itself is a root cause that deserves its own investigation. Chronic inflammation makes blood vessels permeable and that triggers hormonal cascades that retain sodium and water and directly damages kidney tissue over time.

anti-inflammatory, nutrition, colorful vegetables and fruits, avoiding processed foods and refined sugars, incorporating turmeric and ginger, identifying personal food sensitivities.

This isn't a nice to have. For many people, it's a missing piece that explains why conventional management alone isn't working. The gut-kidney connection plays into this too.

An imbalanced gut microbiome contributes to systemic inflammation and produces uremic toxins that further burdens the kidneys.

Supplements, Protein, Inflammation, and Gut Health

Supporting gut health through diverse plant foods and, when appropriate, targeted probiotics can indirectly improve fluid balance by calming the inflammatory cascade that drives it.

and something that might surprise you, stress and sleep. Chronic stress floods your body with cortisol and other hormones that directly affect sodium retention and blood pressure.

Poor sleep disrupts the regulatory systems that control fluid balance. So when I suggest deep breathing, meditation, Gentle yoga or simply spending time in nature, and not just offering feel-good advice, these practices have measurable physiological effects on the very systems that determines whether your body holds fluid or releases it.

Now I need to be clear about something important. If you are experiencing severe or sudden swelling, shortness of breath, chest pain or significant changes in urination, these are not wait and see situations.

Fluid in the lungs is a medical emergency. Natural and supportive approaches work best when kidney disease is caught early or is in stable earlier stages.

They work alongside your medical care, not in place of it. Here's what I keep coming back to. Fluid retention in kidney disease is not one problem with one solution.

It's a complex signal from a whole system that needs attention. Your kidneys, yes, but also your inflammation, your gut, your heart, your lymphatic system, your hormones, your stress response.

When you address the whole picture, you often see improvements that surprise everyone, including the doctors. So here's what you can start doing right now.

Track your daily weight and symptoms. That data is invaluable. Take an honest look at your sodium intake, especially from packaged and processed foods.

incorporate gentle movement and leg elevation into your daily routine. And most importantly, find a physician who is willing to look at your whole system, not just your creatinine number.

Stress, Sleep, Warning Signs, and Next Steps

If you're dealing with kidney concerns and want a personalized approach that investigates your unique root causes, which could be inflammation, gut health, hormone imbalance, all of it, we offer consultations at the Kidney Institute.

Visit our website to learn more because your body is trying to tell you something and it deserves more than one-dimensional answers. Also, please consider leaving a review.

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See you next time.