



Nutritional interventions for hypertension-induced organ damage and associated clinical symptoms

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Abstract

Hypertension is one of the leading global public health challenges and a major contributor to cardiovascular, renal, neurological, and metabolic disorders. Persistent elevation of blood pressure causes progressive damage to target organs including the heart, kidneys, brain, eyes, and blood vessels, resulting in severe clinical complications such as heart failure, stroke, chronic kidney disease, retinopathy, cognitive decline, and vascular dysfunction. Nutritional interventions play a critical role in the prevention and management of hypertension and its associated organ damage. Dietary strategies including sodium restriction, increased potassium intake, antioxidant-rich foods, omega-3 fatty acids, DASH diet, Mediterranean diet, and functional nutraceuticals have demonstrated beneficial effects on blood pressure regulation, endothelial function, oxidative stress reduction, and inflammation control. Bioactive compounds such as polyphenols, flavonoids, carotenoids, magnesium, calcium, and probiotics contribute to vascular protection and improved cardiovascular health. This review discusses the pathophysiology of hypertension-induced organ damage, associated clinical manifestations, and evidence-based nutritional interventions for reducing disease progression and improving patient outcomes.

Keywords: Hypertension, organ damage, nutritional intervention, DASH diet, antioxidants, omega-3 fatty acids, cardiovascular disease, kidney disease, nutraceuticals, clinical symptoms

Introduction

Hypertension is a chronic medical condition characterized by persistently elevated arterial blood pressure and is considered one of the most significant risk factors for cardiovascular morbidity and mortality worldwide (Zhou *et al.*, 2021) [48]. Long-standing hypertension exerts continuous mechanical stress on blood vessels and target organs, leading to structural and functional abnormalities (Ambrosino *et al.*, 2026) [1]. The major organs affected by uncontrolled hypertension include the heart, kidneys, brain, retina, and peripheral vasculature. Hypertension-induced organ damage significantly increases the risk of myocardial infarction, stroke, heart failure, chronic kidney disease, cognitive impairment, and visual disturbances (Grassi *et al.*, 2026) [1].

The pathogenesis of hypertension-induced organ damage involves endothelial dysfunction, oxidative stress, chronic inflammation, activation of the renin-angiotensin-aldosterone system (RAAS), vascular remodeling, and impaired nitric oxide bioavailability (Zhou *et al.*, 2026) [49]. These pathological changes progressively compromise tissue perfusion and organ function. Clinical symptoms associated with hypertensive organ damage include headache, dizziness, chest pain, dyspnea, fatigue, edema, blurred vision, cognitive decline, and renal dysfunction (Misbahuddin *et al.*, 2026) [33].

Nutritional interventions have emerged as effective non-pharmacological strategies for managing hypertension and preventing target organ damage. Dietary modification can significantly improve blood pressure control, reduce oxidative stress, enhance endothelial function, and minimize inflammatory responses. Evidence suggests that dietary patterns such as the DASH diet and Mediterranean diet are associated with reduced cardiovascular risk and improved vascular health (van den Born *et al.*, 2025) [45].

Pathophysiology of Hypertension-Induced Organ Damage

Chronic hypertension leads to increased vascular resistance and arterial stiffness, causing damage to endothelial cells and promoting vascular inflammation. Persistent elevation of blood pressure induces hypertrophy of vascular smooth muscle cells and accelerates atherosclerotic plaque formation. Oxidative stress generated by reactive oxygen species contributes to lipid peroxidation, endothelial injury, and impaired nitric oxide-mediated vasodilation (Herzog *et al.*, 2025) [23].

Activation of the RAAS further exacerbates vascular remodeling, sodium retention, and fluid imbalance (Duprez, 2006) [10]. Hypertension also affects microcirculation, resulting in ischemic injury to target organs. Prolonged organ hypoperfusion contributes to fibrosis, necrosis, and progressive loss of organ function (Durante *et al.*, 2024) [11].

Hypertension-Induced Organ Damage and Clinical Symptoms

1. Cardiovascular Damage

Hypertension is strongly associated with left ventricular hypertrophy, coronary artery disease, heart failure, and myocardial infarction. Elevated blood pressure increases cardiac workload, leading to myocardial remodeling and impaired ventricular function. Common symptoms include chest pain, palpitations, dyspnea, fatigue, and exercise intolerance (Aronow, 2017) [2].

Dietary sodium reduction, increased potassium intake, and adherence to DASH and Mediterranean dietary patterns have shown beneficial effects on cardiovascular health and blood pressure management (Filippou *et al.*, 2022) [16].

2. Renal Damage

The kidneys are highly susceptible to hypertensive injury due to damage to renal blood vessels and glomerular

structures (Mennuni *et al.*, 2014) [31]. Hypertension-induced nephropathy may progress to chronic kidney disease and renal failure. Clinical manifestations include proteinuria, edema, electrolyte imbalance, reduced urine output, and elevated serum creatinine levels (Griffin, 2017) [20]. Nutritional interventions focusing on sodium restriction, adequate hydration, antioxidant intake, and controlled protein consumption may slow renal deterioration and improve kidney function (Wang *et al.*, 2023) [46].

3. Cerebrovascular Damage

Hypertension is a major risk factor for stroke, transient ischemic attacks, vascular dementia, and cognitive impairment. Chronic high blood pressure damages cerebral blood vessels and compromises cerebral perfusion. Symptoms include headache, dizziness, confusion, memory loss, and neurological deficits (Faraco and Iadecola, 2013) [14].

Antioxidant-rich foods, omega-3 fatty acids, flavonoids, and anti-inflammatory dietary components may improve cerebral blood flow and reduce neurovascular inflammation (Jamshidi *et al.*, 2025) [24].

4. Retinal Damage

Hypertensive retinopathy results from damage to retinal microvasculature caused by elevated blood pressure. Clinical symptoms include blurred vision, retinal hemorrhage, visual disturbances, and, in severe cases, blindness. Adequate intake of antioxidant vitamins, carotenoids, and polyphenols may protect retinal tissues from oxidative injury (Dziedziak *et al.*, 2022) [12].

Nutritional Interventions for Hypertension-Induced Organ Damage

1. DASH Diet

The Dietary Approaches to Stop Hypertension (DASH) diet is one of the most extensively studied dietary interventions for hypertension management. The DASH diet emphasizes fruits, vegetables, whole grains, legumes, low-fat dairy products, lean protein, and reduced sodium intake. It is rich in potassium, magnesium, calcium, fibre, and antioxidants that help regulate blood pressure and improve endothelial function (Siervo *et al.*, 2015) [40].

The DASH diet has been associated with reductions in

systolic and diastolic blood pressure and improved cardiovascular outcomes (Juraschek *et al.*, 2017) [27].

2. Mediterranean Diet

The Mediterranean diet includes high consumption of fruits, vegetables, olive oil, nuts, legumes, fish, and whole grains with moderate intake of dairy and limited processed foods (Guasch-Ferré and Willett, 2021) [22]. This dietary pattern provides abundant monounsaturated fatty acids, polyphenols, and omega-3 fatty acids that reduce inflammation and oxidative stress.

Studies indicate that the Mediterranean diet improves vascular health, reduces arterial stiffness, and lowers cardiovascular risk in hypertensive individuals (Mittelul *et al.*, 2024) [34].

3. Sodium Restriction

Excessive sodium intake contributes to fluid retention, increased vascular resistance, and elevated blood pressure. Reducing dietary sodium intake significantly lowers blood pressure and decreases damage to the heart, kidneys, and blood vessels. The recommended sodium intake for hypertensive patients is generally below 1500–2300 mg/day depending on clinical conditions (Dong, 2018) [9].

4. Potassium, Magnesium, and Calcium

Potassium promotes sodium excretion and vasodilation, while magnesium acts as a natural calcium channel blocker and improves endothelial function. Calcium supports vascular contraction and relaxation balance. Diets rich in fruits, vegetables, nuts, seeds, and low-fat dairy products provide these essential minerals and contribute to blood pressure regulation (Félétou, 2009).

5. Omega-3 Fatty Acids

Omega-3 polyunsaturated fatty acids (PUFAs) such as EPA and DHA possess anti-inflammatory, antioxidant, and vasodilatory effects (Barik *et al.*, 2022) [4]. Supplementation with omega-3 fatty acids has shown modest reductions in systolic and diastolic blood pressure and improved endothelial function. Omega-3 fatty acids also reduce oxidative stress and vascular inflammation, thereby protecting against cardiovascular and cerebrovascular complications (Oppedisano *et al.*, 2020) [36].

Table 1: Previous Published Studies on Omega-3 Fatty Acids and Hypertension-Induced Organ Protection

Study	Omega-3 Source/Intervention	Study Population	Major Findings	Clinical Outcome
Colussi <i>et al.</i> , 2017 [8]	EPA and DHA supplementation	Hypertensive adults	Omega-3 fatty acids showed anti-inflammatory and vasodilatory effects	Improved blood pressure regulation and vascular function
Yamagata (2020) [47]	Omega-3 polyunsaturated fatty acids	Cardiovascular disease patients	Reduced oxidative stress and vascular inflammation	Protection against cardiovascular and cerebrovascular complications
Minihane <i>et al.</i> , 2016 [32]	Fish oil supplementation	Adults with elevated blood pressure	Significant reduction in systolic and diastolic blood pressure	Improved endothelial function
Psota <i>et al.</i> , 2006 [37]	Dietary fish and omega-3 intake	Adults with cardiovascular risk	Omega-3 intake associated with reduced cardiac mortality	Reduced risk of heart disease
Skulas-Ray <i>et al.</i> , 2019 [41]	EPA and DHA supplementation	Hypertriglyceridemic adults	Omega-3 fatty acids improved lipid profile and vascular health	Lower cardiovascular risk
Chan <i>et al.</i> , 2016 [6]	DHA-rich fish oil	Hypertensive patients	DHA significantly lowered blood pressure and arterial stiffness	Improved vascular elasticity
Tortosa-Caparrós <i>et al.</i> , 2017 [44]	Marine omega-3 fatty acids	Adults with metabolic syndrome	Reduced inflammatory biomarkers and oxidative stress	Improved cardiovascular protection

6. Antioxidants and Polyphenols

Polyphenols, flavonoids, anthocyanins, catechins, and carotenoids found in fruits, vegetables, tea, cocoa, and herbs exhibit strong antioxidant properties (Lako *et al.*, 2007) ^[29]. These compounds reduce oxidative stress, improve nitric

oxide bioavailability, and protect vascular endothelial cells. Green tea catechins, berry anthocyanins, curcumin, resveratrol, and cocoa flavonoids have demonstrated beneficial effects on vascular function and blood pressure control (Grosso *et al.*, 2022) ^[21].

Table 2: Previous Published Studies on Antioxidants, Polyphenols, and Hypertension Management

Study	Antioxidant/Polyphenol Source	Study Population	Major Findings	Clinical Outcome
Khan <i>et al.</i> , 2014 ^[28]	Fruits and vegetables rich in polyphenols	Adults with cardiovascular risk	Polyphenols and flavonoids exhibited strong antioxidant activity	Reduced oxidative stress and improved vascular protection
Banez <i>et al.</i> , 2020 ^[3]	Green tea catechins, berry anthocyanins, curcumin, resveratrol	Hypertensive and cardiovascular disease patients	Polyphenols improved endothelial function and nitric oxide bioavailability	Better blood pressure control and vascular health
Grassi <i>et al.</i> , 2015 ^[18]	Cocoa flavonoids	Adults with hypertension	Cocoa flavonoids reduced systolic and diastolic blood pressure	Improved endothelial-dependent vasodilation
Mozos <i>et al.</i> , 2021 ^[35]	Berry anthocyanins	Adults with vascular dysfunction	Anthocyanins reduced inflammation and oxidative damage	Improved arterial stiffness and vascular function
Fraga <i>et al.</i> , 2010 ^[17]	Dark chocolate flavonoids	Hypertensive adults	Increased nitric oxide production and endothelial function	Reduced blood pressure

7. Probiotics and Gut Microbiota

Emerging evidence suggests that gut microbiota influences blood pressure regulation through modulation of inflammation, metabolism, and vascular function (Rahaman and Tewari, 2026) ^[38]. Probiotic supplementation may

improve endothelial function and reduce systemic inflammation in hypertensive individuals. Fermented foods containing *Lactobacillus* and *Bifidobacterium* species may contribute to improved cardiovascular health and metabolic balance (Tewari *et al.*, 2021) ^[42].

Table 3: Previous Published Studies on Probiotics, Gut Microbiota, and Hypertension Management

Study	Probiotic/Gut Microbiota Intervention	Study Population	Major Findings	Clinical Outcome
Rahaman and Tewari (2026) ^[38]	Gut microbiota modulation and probiotics	Hypertensive adults	Gut microbiota influenced blood pressure regulation through inflammatory and metabolic pathways	Improved vascular function and reduced systemic inflammation
Tewari <i>et al.</i> (2021) ^[42]	Fermented foods containing <i>Lactobacillus</i> and <i>Bifidobacterium</i>	Adults with cardiovascular risk	Probiotic-rich fermented foods improved gut microbial balance	Enhanced cardiovascular and metabolic health
Ejtahed <i>et al.</i> (2020) ^[13]	Probiotic supplementation	Adults with hypertension	Probiotics significantly reduced systolic and diastolic blood pressure	Improved blood pressure control
Jauhiainen <i>et al.</i> (2010) ^[25]	Fermented milk containing <i>Lactobacillus helveticus</i>	Mild hypertensive patients	Fermented milk reduced blood pressure levels	Improved vascular relaxation
Si <i>et al.</i> (2025)	Gut microbiota and dietary salt interaction	Adults and animal models	High salt intake altered gut microbiota and increased hypertension risk	Probiotic intervention improved immune and vascular responses

Functional Foods and Nutraceuticals

Functional foods and nutraceuticals are increasingly being explored as adjunctive therapies for hypertension management. Bioactive-rich foods such as garlic, flaxseed, beetroot, spirulina, cocoa, green tea, and berries contain

compounds that improve vascular relaxation and reduce inflammation (Chen *et al.*, 2009) ^[7]. However, excessive reliance on unregulated dietary supplements without medical supervision may not provide consistent cardiovascular benefits (Binns *et al.*, 2018) ^[5].

Table 4: Previous Published Studies on Functional Foods, Nutraceuticals, and Hypertension Management

Study	Functional Food/Nutraceutical	Study Population	Major Findings	Clinical Outcome
Chen <i>et al.</i> (2009) ^[7]	Garlic, flaxseed, beetroot, spirulina, cocoa, green tea, berries	Hypertensive adults	Bioactive-rich foods improved vascular relaxation and reduced inflammation	Improved blood pressure control and endothelial function
Binns <i>et al.</i> (2018) ^[5]	Dietary supplements and nutraceuticals	Cardiovascular disease patients	Unregulated supplement use showed inconsistent cardiovascular benefits	Need for medical supervision in nutraceutical use
Tewari <i>et al.</i> (2019) ^[43]	Garlic supplementation	Hypertensive patients	Garlic significantly reduced systolic and diastolic blood pressure	Improved arterial elasticity and cardiovascular health
Leyva <i>et al.</i> (2011) ^[30]	Flaxseed supplementation	Peripheral artery disease patients	Flaxseed reduced blood pressure and inflammatory markers	Lower cardiovascular risk
Jones <i>et al.</i> (2019) ^[26]	Beetroot juice rich in dietary nitrate	Hypertensive adults	Beetroot improved nitric oxide availability and reduced blood pressure	Enhanced vascular function

Role of Dietary Interventions and Functional Nutrients in the Management of Hypertension-Induced Organ Damage and Cardiovascular Protection

Various dietary approaches including the DASH diet, Mediterranean diet, sodium restriction, potassium supplementation, omega-3 fatty acids, flavonoid-rich foods, green tea polyphenols, and antioxidant-rich fruits and vegetables have demonstrated beneficial effects on blood pressure regulation, endothelial function, and cardiovascular protection.

The findings indicate that these nutritional strategies reduce

systolic and diastolic blood pressure, oxidative stress, vascular inflammation, and arterial stiffness while improving nitric oxide bioavailability and vascular relaxation. Nutraceuticals containing potassium, magnesium, antioxidants, and omega-3 fatty acids also contributed to improved cardiac and renal function. Additionally, functional foods and lifestyle-based dietary interventions were associated with reduced progression of organ damage, lower risk of stroke, heart failure, kidney disease, and overall improvement in cardiovascular health among hypertensive individuals.

Table 5: Previous Published Studies on Nutritional Interventions for Hypertension-Induced Organ Damage and Associated Clinical Symptoms (Juraschek *et al.*, 2017; Filippou *et al.*, 2022) ^[16, 27].

Nutritional Intervention	Study Population	Major Findings	Clinical Outcome
DASH Diet	Adults with hypertension	DASH diet significantly reduced systolic and diastolic blood pressure	Improved cardiovascular health and reduced hypertension risk
Reduced sodium + DASH diet	Hypertensive and prehypertensive adults	Sodium restriction combined with DASH diet produced greater BP reduction	Lower cardiovascular and renal complications
Mediterranean Diet	High cardiovascular risk patients	Mediterranean diet reduced cardiovascular events and vascular inflammation	Improved endothelial function and reduced organ damage
Nutraceuticals and minerals	Hypertensive patients	Potassium, magnesium, omega-3 fatty acids, and antioxidants improved BP control	Reduced oxidative stress and vascular dysfunction
Flavonoid-rich foods	Adults with elevated BP	Cocoa flavonoids improved endothelial function and reduced BP	Improved vascular relaxation
Potassium supplementation	Adults with hypertension	Increased potassium intake significantly lowered blood pressure	Reduced stroke and cardiovascular disease risk
Omega-3 fatty acids	Cardiovascular disease patients	Fish oil reduced inflammation and improved arterial health	Reduced cardiovascular mortality
Sodium reduction	Adults with elevated BP	Lower sodium intake improved cardiac biomarkers	Reduced risk of heart failure
Mediterranean dietary pattern	Adults with chronic diseases	Mediterranean diet improved lipid profile and blood pressure	Reduced cardiovascular and renal complications
Green tea polyphenols	Hypertensive adults	Catechin-rich green tea reduced oxidative stress and vascular stiffness	Improved endothelial function
Fruit and vegetable-rich diet	Adults with hypertension	Increased antioxidant intake improved BP regulation	Reduced risk of stroke and kidney disease
Omega-3 PUFA supplementation	Hypertensive individuals	Omega-3 fatty acids lowered systolic and diastolic blood pressure	Improved cardiovascular protection
Berry anthocyanins	Adults with vascular dysfunction	Anthocyanins improved nitric oxide bioavailability	Reduced endothelial dysfunction
Lifestyle and dietary interventions	Hypertensive adults	DASH and Mediterranean diets improved vascular health	Lower organ damage progression
Functional foods and antioxidants	Cardiovascular disease patients	Functional foods reduced oxidative stress and inflammation	Improved cardiac and renal function

Conclusion

Hypertension-induced organ damage represents a major cause of morbidity and mortality worldwide. Nutritional interventions provide effective, affordable, and sustainable strategies for managing hypertension and minimizing damage to target organs such as the heart, kidneys, brain, and retina. Dietary approaches including sodium restriction, DASH diet, Mediterranean diet, omega-3 fatty acids, antioxidants, minerals, probiotics, and functional foods play important roles in reducing oxidative stress, inflammation, endothelial dysfunction, and vascular injury. Combining evidence-based nutritional therapy with lifestyle modification and medical management may significantly improve clinical outcomes, quality of life, and long-term cardiovascular health in hypertensive patients.

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