Supplementary Table S1. PRISMA 2020 checklist

Section and topic	Item	Checklist item	Location where item is reported		
TITLE					
Title	1	Identify the report as a systematic review.	2		
ABSTRACT					
Abstract	2	See the PRISMA 2020 for Abstracts checklist.	2		
INTRODUCTION					
Rationale	3	Describe the rationale for the review in the context of existing knowledge.	2		
Objectives	4	Provide an explicit statement of the objective(s) or question(s) the review addresses.	3		
METHODS					
Eligibility criteria	5	Specify the inclusion and exclusion criteria for the review and how studies were grouped for the syntheses. Specify all databases, registers, websites, organisations, reference lists and other	3		
Information sources	6	sources searched or consulted to identify studies. Specify the date when each	3		
Search strategy	source was last searched or consulted. Present the full search strategies for all databases, registers and websites		3		
Selection process	any filters and limits used. Specify the methods used to decide whether a study met the inclusion criteria of the review, including how many reviewers screened each record and each repo				
Data collection process		automation tools used in the process. Specify the methods used to collect data from reports, including how many reviewers collected data from each report, whether they worked independently, any processes for obtaining or confirming data from study investigators, and if applicable, details of automation tools used in the process.	3		
Data items	10a	List and define all outcomes for which data were sought. Specify whether all results that were compatible with each outcome domain in each study were sought (e.g. for all measures, time points, analyses), and if not, the methods used to decide which results to collect.	3		
	10b	List and define all other variables for which data were sought (e.g. participant and intervention characteristics, funding sources). Describe any assumptions made about any missing or unclear information. Specify the methods used to assess risk of bias in the included studies, including	3		
Study risk of bias assessment	11	details of the tool(s) used, how many reviewers assessed each study and whether they worked independently, and if applicable, details of automation tools used in the process.	4		
Effect measures	12	Specify for each outcome the effect measure(s) (e.g. risk ratio, mean difference) used in the synthesis or presentation of results. Describe the processes used to decide which studies were eligible for each	4		
	13a	synthesis (e.g. tabulating the study intervention characteristics and comparing			
	13b	against the planned groups for each synthesis (item #5)). Describe any methods required to prepare the data for presentation or synthesis, such as handling of missing summary statistics, or data conversions.			
	Describe any methods used to tabulate or visually display results of individual studies and syntheses.		4		
Synthesis methods	13d	Describe any methods used to synthesize results and provide a rationale for the choice(s). If meta-analysis was performed, describe the model(s), method(s) to identify the presence and extent of statistical heterogeneity, and software	4		
	13e	package(s) used. Describe any methods used to explore possible causes of heterogeneity among study results (e.g. subgroup analysis, meta-regression).	4		
	13f	Describe any sensitivity analyses conducted to assess robustness of the synthesized results.	4		

			Continued				
			Location				
Section and topic	Item	Checklist item					
B It's . It's .		Possible and without and the second of this advantage of the second of t	is reported				
Reporting bias assessment 1		Describe any methods used to assess risk of bias due to missing results in a					
		synthesis (arising from reporting biases). Describe any methods used to assess certainty (or confidence) in the body of					
Certainty assessment 15		evidence for an outcome.	4				
RESULTS							
		Describe the results of the search and selection process, from the number of					
	16a	records identified in the search to the number of studies included in the review,	5				
Study selection		ideally using a flow diagram.					
	16b	Cite studies that might appear to meet the inclusion criteria, but which were					
		excluded, and explain why they were excluded.					
Study characteristics	17	Cite each included study and present its characteristics.	7–8				
Risk of bias in studies	of bias in studies 18 Present assessments of risk of bias for each included study.		5				
Results of individual		For all outcomes, present, for each study: (a) summary statistics for each group					
studies	19	(where appropriate) and (b) an effect estimate and its precision (e.g.					
		confidence/credible interval), ideally using structured tables or plots.					
	20a	For each synthesis, briefly summarise the characteristics and risk of bias among					
		contributing studies. Present results of all statistical syntheses conducted. If meta-analysis was done,					
	20b	present for each the summary estimate and its precision (e.g. confidence/credible	0				
Results of syntheses		interval) and measures of statistical heterogeneity. If comparing groups, describe	9				
Results of syntheses		the direction of the effect.					
	20c 20d	Present results of all investigations of possible causes of heterogeneity among	9				
		study results. Present results of all sensitivity analyses conducted to assess the robustness of the					
		synthesized results.	11				
	21	Present assessments of risk of bias due to missing results (arising from reporting	12				
Reporting biases		biases) for each synthesis assessed.					
Certainty of evidence	22	Present assessments of certainty (or confidence) in the body of evidence for each	11				
,		outcome assessed.					
DISCUSSION							
	23a	Provide a general interpretation of the results in the context of other evidence.	12				
	23b	Discuss any limitations of the evidence included in the review.	13				
Discussion	23c	Discuss any limitations of the review processes used.	13				
	23d	Discuss implications of the results for practice, policy, and future research.	13				
OTHER INCORNATION	230	Discuss implications of the results for practice, policy, and ratare research.	15				
OTHER INFORMATION							
	24a	Provide registration information for the review, including register name and					
		registration number, or state that the review was not registered. Indicate where the review protocol can be accessed, or state that a protocol was					
Registration and protocol	24b	not prepared.					
	24c	Describe and explain any amendments to information provided at registration or in					
	210	the protocol.					
Support	25	Describe sources of financial or non-financial support for the review, and the role					
Compating interests	3.0	of the funders or sponsors in the review.					
Competing interests	26	Declare any competing interests of review authors. Report which of the following are publicly available and where they can be found:					
Availability of data, code	27	template data collection forms; data extracted from included studies; data used for					
and other materials		all analyses; analytic code; any other materials used in the review.					

Note. From: Page MJ, McKenzie JE, Bossuyt PM, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 2021;372:n71. doi: 10.1136/bmj.n71.For more information, visit: http://www.prisma-statement.org/

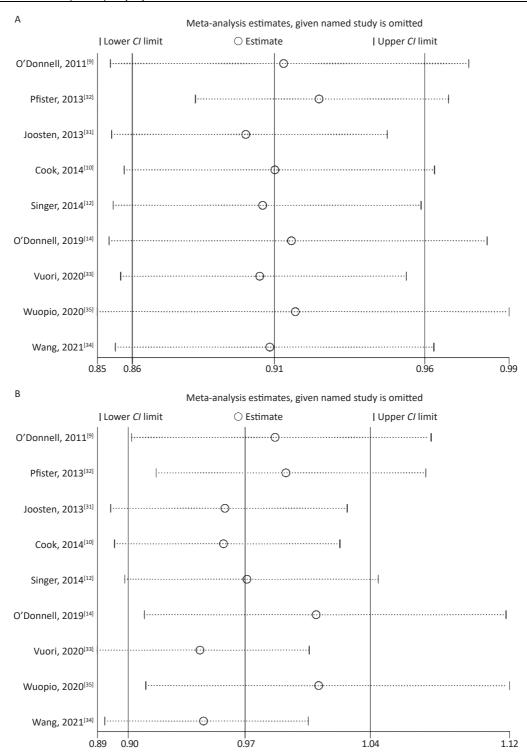
Supplementary Table S2. Data extracted from original studies

	Categories of urinary		Transformed effect				
Author, Year	sodium excretion (g/d)	Original effect size	size	Covariates/Factors adjusted in multivariate model			
O'Donnell,	< 2	1.21 (1.03-1.43)	Reference	age, sex, race/ethnicity, prior stroke or MI, creatinine,			
2011 ^[9]	2–2.99	1.16 (1.04–1.28)	0.96 (0.80, 1.15)	body mass index (BMI, calculated as weight in kilograms			
	3–3.99	1.06 (0.98-1.14)	0.88 (0.74, 1.04)	divided by height in meters squared), hypertension,			
	4–5.99	Reference	0.83 (0.70, 0.97)	diabetes mellitus, atrial fibrillation, smoking, low-density			
	6–6.99	1.09 (0.99–1.20)	0.90 (0.75, 1.08)	lipoprotein (LDL), high-density lipoprotein (HDL),			
	7–8	1.15 (1.00–1.32)	0.95 (0.77, 1.17)	treatment allocation and treatment with statins,			
	>8	1.49 (1.28–1.75)	1.23 (0.99, 1.53)	β-blockers, diuretics, calcium antagonist, and antithrombotic therapy, fruit and vegetable consumption, level of exercise, urinary sodium and potassium excretion, baseline blood pressure, and change in systolic blood pressure from baseline to last follow-up.			
Pfister,	< 2.921	1.30 (1.08–1.55)	Reference	age, sex, BMI, known diabetes, cholesterol level, social			
2013 ^[32]	2.944-3.404	Reference	0.77 (0.64, 0.92)	class, educational level, smoking, physical activity, alcohol			
	3.427-3.841	1.03 (0.85-1.24)	0.79 (0.66, 0.95)	consumption, and blood pressure			
	3.864-4.37	0.99 (0.82–1.19)	0.76 (0.64, 0.91)	' ' '			
	> 4.393	1.22 (1.02–1.46)	0.94 (0.79. 1.11)				
Joosten,	< 2.438	Reference	-	age, sex, body mass index, smoking status, alcohol intake,			
2013 ^[31]	2.438-3.151	0.99 (0.76, 1.29)		parental history of coronary heart disease, type 2 diabetes			
	3.151-3.933	1.09 (0.83, 1.44)		mellitus, total to high-density lipoprotein cholesterol			
	> 3.933	1.19 (0.88, 1.62)		ratio, and urinary potassium, magnesium, and creatinine			
Cook, 2014 ^[10]	< 2.3	0.68 (0.34, 1.37)	Reference	excretion clinic, age, sex, race/ethnicity, other treatment			
COOK, 2014	2.3-3.6	0.75 (0.50, 1.11)	1.10 (0.54, 2.24)	assignments, education, baseline weight, alcohol use,			
	3.6-4.8	Reference	1.47 (0.73, 2.95)	smoking, exercise, potassium excretion, family history of			
	> 4.8	1.05 (0.68, 1.62)	1.54 (0.75, 3.20)	cardiovascular disease, changes in weight, smoking, and			
	7 4.0	1.03 (0.00, 1.02)	1.54 (0.75, 5.20)	exercise during the trial periods			
Singer,	1.265	Reference	-	age, sex, race, BMI, SBP, eGFR, urine potassium,			
2014 ^[12]	2.346	0.96 (0.68, 1.36)		hematocrit, plasma renin activity, HxDM, Hx smoking,			
	3.289	1.06 (0.75, 1.49)		history of baseline left ventricular hypertrophy			
"	5.083	1.00 (0.71, 1.41)	- 6				
O'Donnell,	< 3	1.17 (1.06, 1.29)	Reference	age, sex, education, current and former alcohol intake,			
2019 ^[14]	3-3.99	1.06 (0.98, 1.15)	0.91 (0.82, 1.00)	diabetes mellitus, BMI, physical activity, history of			
	4-4.99 5-5.99	Reference	0.85 (0.77, 0.94)	cardiovascular events, use of cardiovascular drugs, history of tuberculosis, cancer, HIV, and current and former			
	6-6.99	1.07 (0.99, 1.16) 1.05 (0.96, 1.15)	0.91 (0.83, 1.01) 0.90 (0.80, 1.00)	smoking, low density lipoprotein (LDL) cholesterol: high			
	> 7	1.24 (1.13, 1.36)	1.06 (0.95, 1.18)	density lipoprotein (HDL) cholesterol ratio			
Vuori, 2020 ^[33]	< 2.921	0.70 (0.51, 0.95)	Reference	age, survey year, sex, serum total cholesterol,			
1 401., 2020	2.921-3.933	0.70 (0.53, 0.93)	1.11 (0.71, 1.40)	prevalent DM and BMI			
	3.933-5.152	0.73 (0.57, 0.94)	1.04 (0.76, 1.43)	·			
	> 5.152	Reference	1.43 (1.05, 1.95)				
Wuopio, 2020	2.8	1.20 (1.08–1.32)	Reference	age, ethnicity, hypertension, smoking, BMI, type 2			
Men ^[35]	3.78	1.08 (0.98–1.20)	0.90 (0.82, 0.99)	diabetes, alcohol abuse, total cholesterol, eGFR			
	4.4	Reference	0.83 (0.75, 0.92)				
	5.05	1.09 (0.98–1.21)	0.91 (0.82, 1.00)				
Wuopio, 2020	6.26 2.4	1.15 (1.03–1.27) 1.05 (0.92–1.19)	0.96 (0.87, 1.06) Reference				
Women ^[35]	3.2	0.93 (0.81–1.07)	0.89 (0.77, 1.01)				
	3.8	Reference	0.95 (0.84, 1.08)				
	4.3	1.03 (0.90–1.18)	0.98 (0.86, 1.12)				
	5.4	1.02 (0.89–1.16)	0.97 (0.86, 1.10)				
Wang, 2021 ^[34]	< 2	Reference	-	age, sex, lifestyle factors (including BMI, smoking, current			
	2-2.9	1.03 (0.73, 1.47)		alcohol drinking, marital status, regular exercise habits,			
	2.9-4.2	0.92 (0.64, 1.32)		education level, occupation and baseline hypertension),			
	> 4.2	1.43 (1.02, 1.99)		diabetes status, LDL-cholesterol, eGFR			

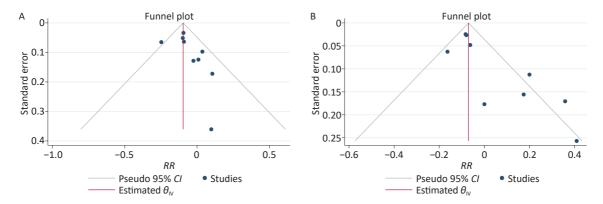
Note. These original studies did not provide categories of urinary sodium excretion, but provided the mean/median of each category.

Supplementary Table S3. The scores of included studies for Newcastle-Ottawa Quality Assessment Scale (NOS)

	Selection					Outcome			
Study ^R	Representativeness of the exposed cohort	Selection of the non exposed cohort	Ascertainment of exposure	that outcome of interest was not	conorts on the	Assessment	_	follow up	Quality Score
1		*	*	*	**	*		*	7
2		*	*	*	**	*	*	*	8
3		*	*	*	**	*	*	*	8
4		*	*	*	**	*	*	*	8
5		*	*		**	*	*	*	7
6		*	*		**	*	*	*	7
7	*	*	*	*	*	*	*	*	8
8	*	*	*	*	**	*	*	*	9
9	*	*	*	*	**	*	*	*	9



Supplementary Figure S1. Plot for sensitivity analysis in the nine studies.



Supplementary Figure S2. (A) Funnel plots for publication bias in the low-level groups. (B) Funnel plots for publication bias in the high-level groups.

Supplementary Materials

Search strategy in PubMed

((("urinary sodium"[Title/Abstract]) OR ("sodium in urine"[Title/Abstract]) OR ("sodium excretion" [Title/Abstract]) OR ("urinary potassium"[Title/Abstract]) OR ("potassium in urine"[Title/Abstract]) OR ("potassium excretion"[Title/Abstract]) OR ("sodium intake"[Title/Abstract]) OR ("potassium intake"[Title/Abstract]) OR ("coronary heart disease"[Title/Abstract]) OR ("coronary heart disease"[Title/Abstract]) OR ("myocardial infarction"[Title/Abstract]) OR ("stroke"[Title/Abstract]) OR ("heart attack"[Title/Abstract]) OR ("heart failure"[Title/Abstract]) OR ("coronary artery disease"[Title/Abstract]) OR ("hypertension"[Title/Abstract]) OR ("high blood pressure"[Title/Abstract])) AND (("meta"[Title/Abstract])) OR ("systematic review"[Title/Abstract]))