

Experts query latest advice on vitamin D supplementation

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SPECIALISTS have queried the clinical utility of guidelines on vitamin D supplementation, suggesting aspects of a recent Australasian position paper are “misleading” and it is out of step with other expert opinion.

In a letter to the *MJA*, New Zealand endocrinologists said advice from the guidelines group, endorsed by peak professional bodies, applied such a broad definition of people at high risk that it “probably includes most adults”.

One of the letter authors, Associate Professor Andrew Grey from the University of Auckland, said only a minority of the population, including the frail and elderly in nursing homes and those sunlight-deprived for cultural reasons, were at risk.

He said the risk cut-off was about 20nmol/L, with people below that being at risk of osteomalacia.

“In my view we need to move away from testing vitamin D



in healthy people and prescribing it to people outside of those at-risk groups until we have evidence that we are doing people any good,” he told *MO*.

“It’s a sad reflection on our profession that we are too quick to embrace evidence from studies which aren’t able to provide a causal link between the intervention [and] the health outcome.”

The position statement endorsed by the Australian and New Zealand Bone and Mineral Society, Endocrine Society of

Australia and Osteoporosis Australia published in the *MJA* this year, suggested at-risk individuals also included fair-skinned people who avoid the sun, people with a disability and indoor workers.

The guidelines said there was good evidence supplements reduced fractures and falls in older men and women.

“This statement is misleading,” the letter writers said, citing a meta-analysis showing no effect on falls in men.

However, guidelines leader

Professor Caryl Nowson, chair of nutrition and ageing at Deakin University, said most relevant level I evidence indicated vitamin D plus calcium reduced falls and fractures although there were “inconsistencies in the literature”, which the group had acknowledged.

“We did not propose vitamin D supplementation for the general population but for the clearly defined high-risk groups,” she said.

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