

# Vitamin D deficit in children in northern Spain



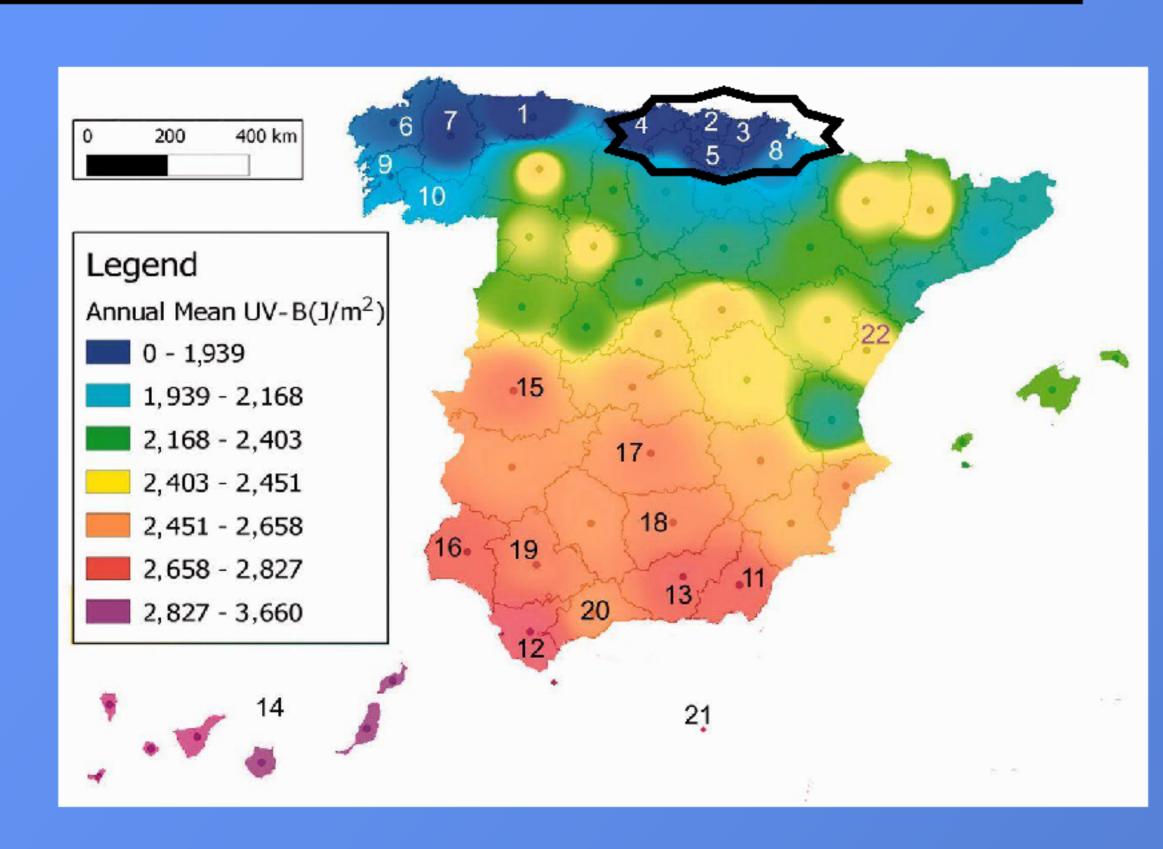
I. Díez López\*, A. Sarasua Miranda\*, I. Lorente Blázquez\*, \*Sección Endocrinología Infantil, Servicio de Pediatría: H.U.A

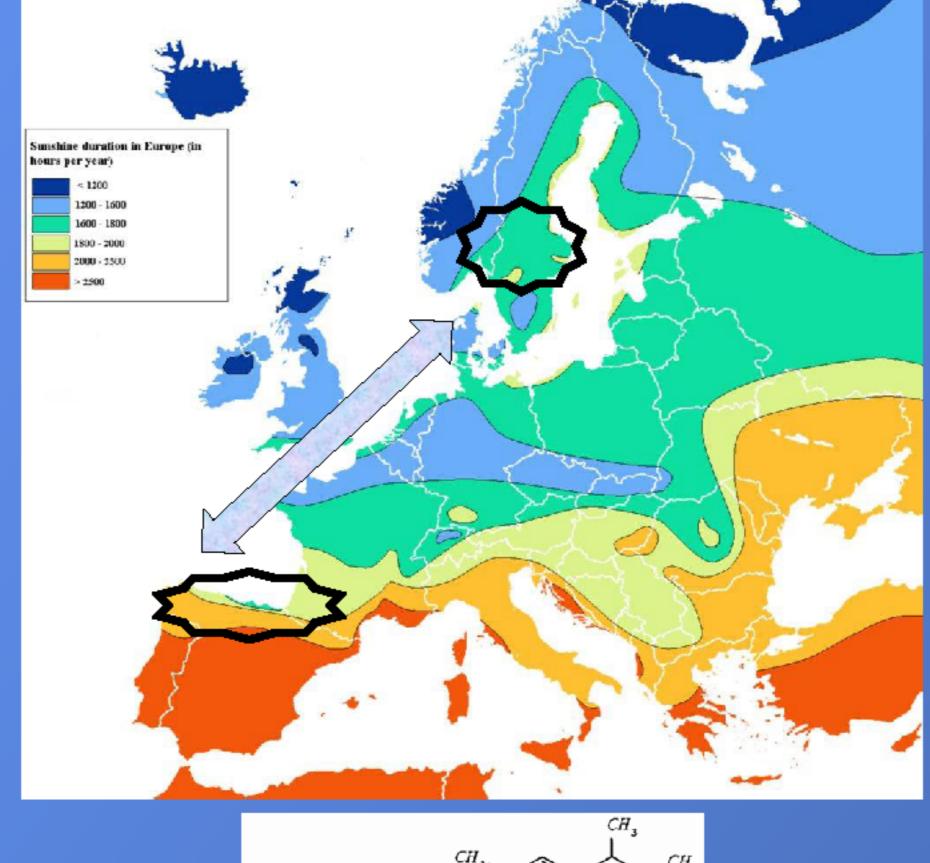
#### **INTRODUCTION:**

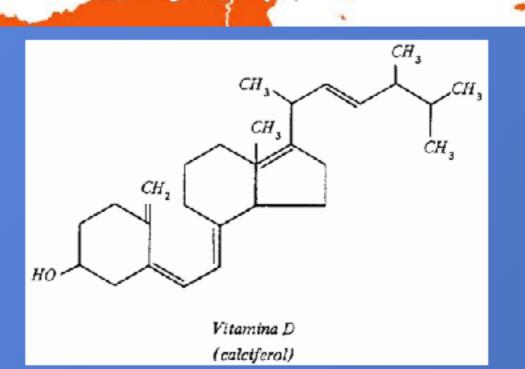
The interest on vitamin D has increased due to the high incidence of vitamin D deficiency and rickets in developed countries. The prevalence of Vitamin D in some countries is described up to 80%, especially at high latitudes (above 37) and some ethnias.

### **OBJECTIVE:**

To study the prevalence of VITD deficit in our population (Location: 42° 51 'north latitude 2° 41' west longitude) and check the differences between the different ethnias.









#### MATERIAL & METHODS:

Cross-sectional observational study.

Inclusion: Historical patients from Pediatric Endocrinology Unit.

Definition of insufficience of Vitamin D:

25-OH-vitamin D <30ng/ml.

Reference Endocrine Society 2011 Control performed within their own routine monitoring base.Study test (X2) and ANOVA,

with a confidence interval of 95%. SPSS 19.0

## **RESULTS:**

**152** cases initially selected (72 / 1523-47%).

Average age 9.24aDS3.27 [1-15].

Pubertal (92/152) 60%.

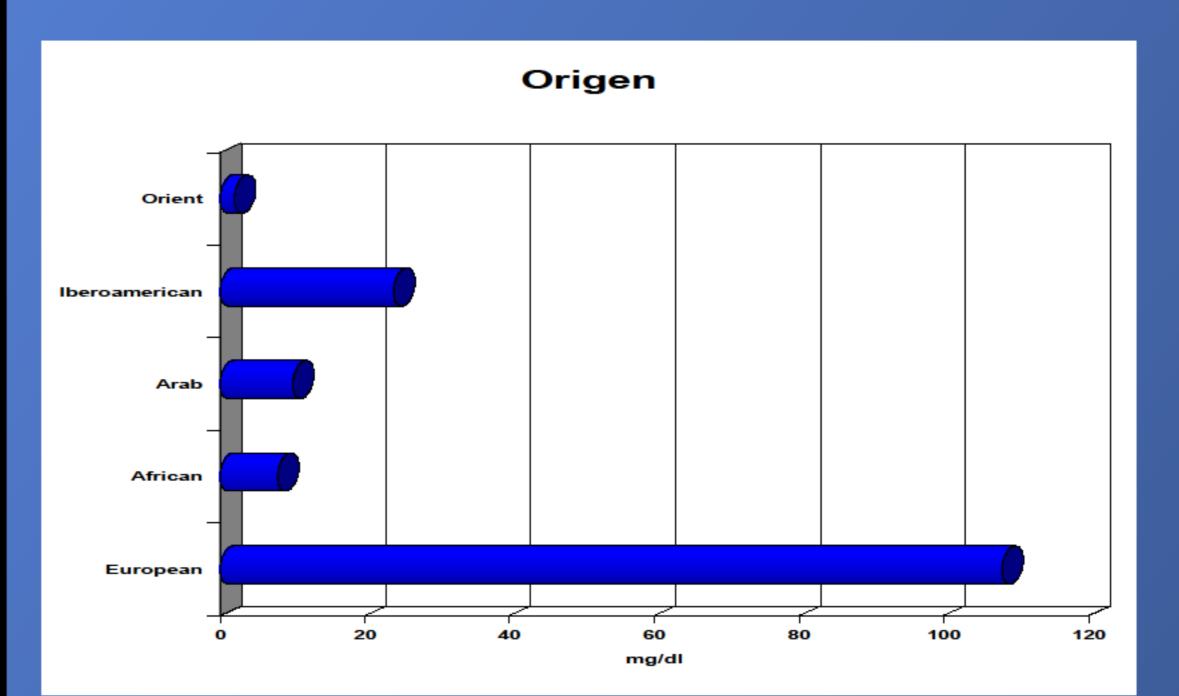
Pathology (DM 36/152, 34/152 size/ thyroiditis 15/152, forward / precocious puberty 23/152, 41/152 overweight, other 2/152).

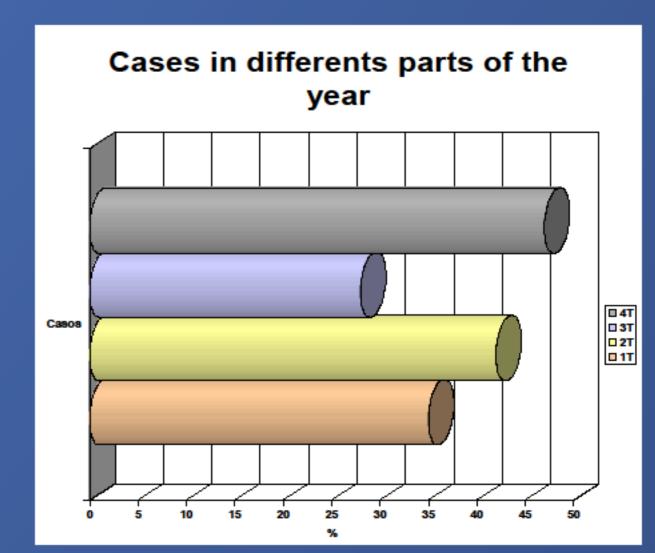
Ethnia (Caucasian 108/152, black 8/152, maghreb 10/152, latina oriental 2/152 24/152). 35/42/28/47 quarterly distribution.

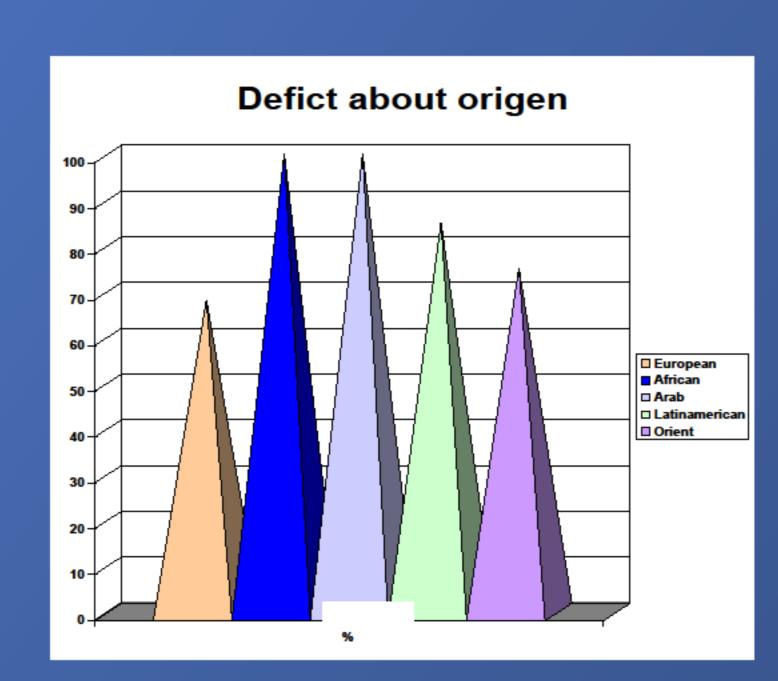
No differences between sex, pubertal status and pathology.

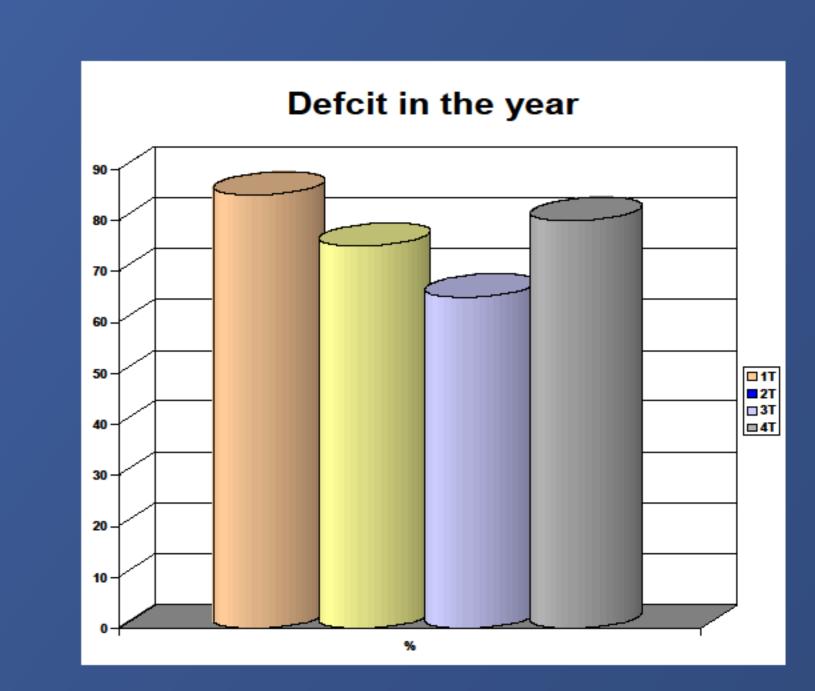
78% have 25OHD insufficiency (average 21 ngr / ml DS [12-29].

Significant differences between ethnic groups (p:0.001). Caucasian children 68% (73/108) have 25OHD deficit (average 24 ngr / ml DS [18-29], compared with 95% of foreign children (42/45, average of 12 ngr / ml DS [2-25) 1 case of hypocalcemic tetany.







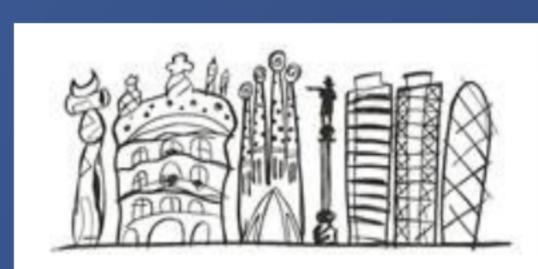


#### **CONCLUSIONS:**

The prevalence of VitD deficit in children of our country is high.

The outdoor activity and the different ethnia/race could be responsible for the differences found.

Due to the high prevalence of Vitamine D defficiency in our country we could propose prophylaxis with VITD for pediatric population during school term.



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