

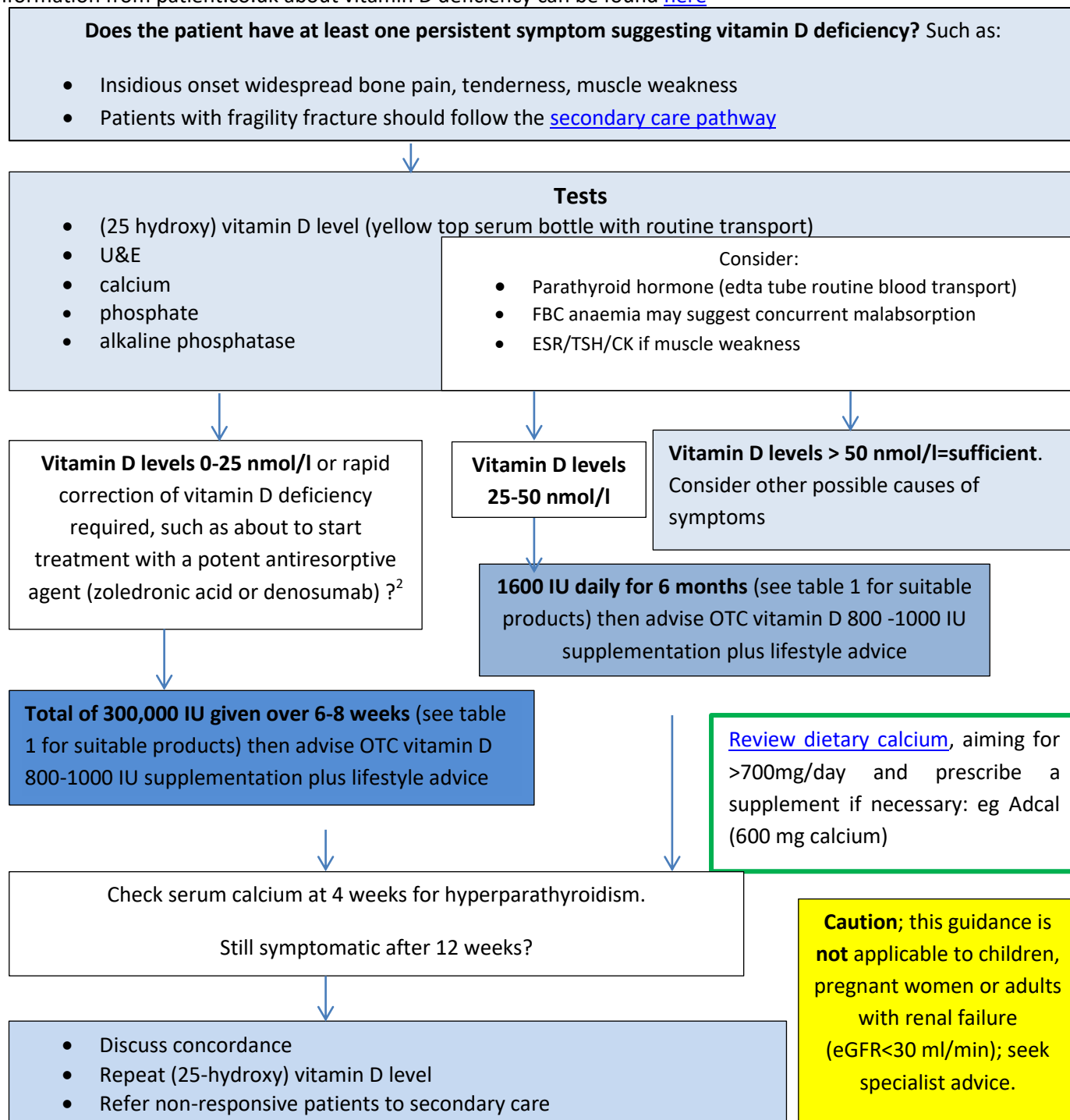
Pathway for Treating Vitamin D Deficiency in Adults

Vitamin D levels should only be checked when patients have one clinical feature of vitamin D deficiency.

Routine testing for at risk groups¹ should NOT be undertaken.

The number of vitamin D tests performed has doubled over 2 years. This document aims to clarify the testing and treatment of vitamin D in primary care and is based on the National Osteoporosis Society vitamin D guidance².

Information from patient.co.uk about vitamin D deficiency can be found [here](#)



Authors Hannah Copus (CCG pharmacist) Kassim Javaid (Metabolic /Rheumatology Consultant)

Approved by APCO July 2015 Version 2.4

Update Alison Jones (CCG pharmacist), Update approved by APCO September 2016 Version 2.5

Update (minor- inclusion of alternative suitable product) approved by APCO Jan 2021. Version 2.6.

Are low vitamin D levels a consequence or cause of ill health?

Recently many other health problems –including cardiovascular disease, type 2 diabetes, several cancers, and autoimmune conditions have been associated with vitamin D insufficiency. However new evidence suggests that low vitamin D levels are more likely to be a consequence than a cause of ill health^{3&4}. Further studies are needed to clarify this issue.

Suitable Products for Treating Low levels of Vitamin D

In addition to the licensed lower dose (800IU) vitamin D products, there are now a number of licensed high dose vitamin D products available and this list is likely to increase further over the next year. See Prescribing Points for updates. If prescribing high dose vitamin D is appropriate then use a licensed and cost effective product.

Table 1: Examples of suitable products for treating low levels of vitamin D

Product	Strength IU	Cost	12 week treatment regime (300,000 IU over 6-8 weeks) for vitamin D level 0-25 nmol/l	6 month treatment regime (1600 IU daily for 6 months) for vitamin D level 26-50 nmol/l	Comments
Plenachol Capsules	40,000	10 caps £15.00	1 capsule weekly for 7 weeks Cost = £10.50	N/A	Do not put on repeat Add stop date to prescription
Strivit D3 capsules (1 st line choice)	20,000	20 caps for £13.15	2 capsules weekly for 7 weeks cost = £9.21	N/A	
Plenachol Capsules	20,000	10 caps £9.00	2 capsules weekly for 7 weeks cost = £12.60	N/A	
Aviticol	20,000	30 caps £29	2 caps weekly for 7 weeks cost =£13.53	N/A	
*Fultium D3 capsules	20,000	15 caps £17.04	2 capsules weekly for 7 weeks cost £15.90	N/A	
Invita D3 oral solution 1 ml ampoule	25,000	3x1ml ampoule £4.45	2 ampoules weekly for 7 weeks cost = £20.77	N/A	
Strivit D3 capsules (1 st line choice)	3200	30 caps £9.32	1 capsule daily for 12 weeks cost £26.10	N/A	
*Fultium D3 capsules	3200	30 caps £13.32	1 capsule daily for 12 weeks cost £37.30	N/A	
Strivit D3 capsules (1 st line choice)	800	30 caps £2.50	4 capsules daily for 12 weeks cost £28.00	2 capsules daily for 6 months cost £30.00	
*Fultium D3 capsules	800	30 caps £3.60	4 capsules daily for 12 weeks cost £40.32	2 capsules daily for 6 months cost £43.20	
Fultium D3 drops	3 drops contain 200IU.	25ml= £10.70 1 ml = 41 drops	60 drops (4000iu) daily for 11 weeks. Cost £48.23	24 drops (1600iu) daily for 6 months £45	
Desunin tablets	800	30 tabs £3.60	4 tablets daily for 12 weeks cost £40.32	2 tablets daily for 6 months cost £43.20	

Authors Hannah Copus (CCG pharmacist) Kassim Javaid (Metabolic /Rheumatology Consultant)

Approved by APCO July 2015 Version 2.4

Update Alison Jones (CCG pharmacist), Update approved by APCO September 2016 Version 2.5

Update (minor- inclusion of alternative suitable product) approved by APCO Jan 2021. Version 2.6.

Plenachol, Strivit D3, Fultium D3, Invita D3 and Aviticol are halal. Desunin is not halal.

*Fultium D3 is now manufactured with maize oil and not arachis oil (peanut oil). However as the product has a shelf-life of several years, it is prudent to issue advice to do a visual check of the pack prior to dispensing, in case of peanut allergy.

Low dose vitamin D maintenance therapy

Patients can purchase low dose vitamin D3 maintenance therapy (800iu or 1000iu) from pharmacies and health food stores. The brand will depend on what is available in individual stores.

Other Indications for Vitamin D

Condition	Evidence	Prescribing advice
Cystic Fibrosis	Cystic Fibrosis	On advice of cystic fibrosis specialist
Muscular Dystrophy	No robust evidence	Do not prescribe pending specialist application to APCO
Multiple Sclerosis-	No robust evidence	Do not prescribe pending specialist application to APCO
Osteoporosis	http://www.nice.org.uk/Guidance/TA161 http://www.nice.org.uk/Guidance/TA160	All patients receiving bisphosphonates should be calcium and vitamin D replete. Calceos and Adcal D3 contain 400 IU vitamin D/~600 mg calcium.

Other patients initiated in secondary care should receive continued vitamin D supplies from the specialist (as per APCO Sept 2011).

In line with [NICE PH guidance \(Nov 2014\)](#), patients who are at very high risk of vitamin D deficiency should either access vitamin D via Healthy Start vouchers if they are eligible or purchase supplementation which is readily available through pharmacies or health food stores at very low cost.

References

- 1) <https://www.gov.uk/government/publications/vitamin-d-advice-on-supplements-for-at-risk-groups>
- 2) <http://www.nos.org.uk/document.doc?id=1352>
- 3) [Philippe Autier Mathieu Boniol, Cecile Pizot, Patrick Mullie. Lancet Diabetes & Endocrinology Vitamin D status and ill health: a systemic review. Vol2 Issue 1 January 2014 page 76-89](#)
- 4) <http://www.nps.org.au/publications/health-professional/health-news-evidence/2014/vitamin-d-cause-effect>

Authors Hannah Copus (CCG pharmacist) Kassim Javaid (Metabolic /Rheumatology Consultant)

Approved by APCO July 2015 Version 2.4

Update Alison Jones (CCG pharmacist), Update approved by APCO September 2016 Version 2.5

Update (minor- inclusion of alternative suitable product) approved by APCO Jan 2021. Version 2.6.