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Low prevalence of vitamin D deficiency in Irish preschoolers despite northerly latitude and high prevalence of inadequate intakes

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While reports of inadequate vitamin D intakes among young children are widespread⁽¹⁻³⁾, data on the prevalence of vitamin D inadequacy and deficiency are inconsistent. To date, there are few data on vitamin D status in young Irish children. We aimed to quantify vitamin D intake and serum 25-hydroxyvitamin D [25(OH)D] concentrations in children aged 2 years living in Ireland (51°N).

Serum 25(OH)D₃, 25(OH)D₂ and 3-epi-25(OH)D₃ were analysed using UPLC-MS/MS in 742 children participating in the Cork BASELINE Birth Cohort Study. Non-consecutive, two-day weighed food diaries were collected in 468 children and 295 children had both a food diary and their 25(OH)D concentrations measured.

Mean (SD) total 25(OH)D concentrations were 63-4 (20-4) nmol/L [54-6 (20-0) in winter and 71-2 (17-5) nmol/L in summer]. During winter (Nov-Apr), 45.1 % were < 50 nmol/L, which decreased to 10.4 % in summer. The prevalence of vitamin D deficiency (< 30 nmol/L) was 4.6 % (8.6 % in winter, 1.0 % in summer). The C-3 epimer was present in all samples. The majority (98.9 %) of mothers were Caucasian and almost all (96.7 %) mothers reported applying sunscreen to their child's skin when they go out during the summer. With a mean daily vitamin D intake (MDI) of 3.5 µg/d, 96 % had intakes below the Estimated Average Requirement [EAR] of $10 \mu g/d^{(4)}$, 78 % were < 5 $\mu g/d$ and 13 % were < 1 $\mu g/d$. Children who did not use a supplement or consume a vitamin D-fortified food had an MDI of $1.2 \,\mu$ g/d. The highest intakes were among consumers of vitamin D-fortified formula ($7.2 \,\mu$ g/d) and users of vitamin D-containing supplements (8-1 µg/d). While 94 % of children sampled during winter had intakes below the EAR, the corresponding prevalence < 40 nmol/L was 24 %, which is the threshold on which the EAR is based⁽⁴⁾.

In conclusion, we show a low prevalence of vitamin D deficiency among Irish 2-year olds despite a high prevalence of inadequate vitamin D intakes, a high latitude and self-reported adherence to sun-safe recommendations. The current EAR may be too high for young children. Nevertheless, almost half of children had a 25(OH)D concentration < 50 nmol/L during winter, indicating the need for strategies to improve vitamin D intakes in this age-group.

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