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Vitamin D and Mortality-Don't bet your life on it!

CLINICAL QUESTION

Does vitamin D supplementation reduce mortality, cardiovascular disease, or cancer in adults?

BOTTOM LINE

Vitamin D supplementation does not reduce all-cause mortality, cardiovascular events, or cancer incidence. Effects on cancer mortality are inconsistent with most systematic reviews and the largest randomized controlled trials (RCTs) showing no effect.

EVIDENCE

- 11 systematic reviews¹⁻¹¹ from the last 3 years, 12-80 RCTs, 70,278-182,804 patients. Adults (most RCTs average age >50, some "healthy" populations, some including chronic diseases), vitamin D (varying doses, example 400 international units (IU) daily to 100,000 IU monthly) compared to placebo/no treatment. Follow-up ~5 years (range 7 months-12 years).
- All-cause mortality:¹⁻⁵
 - Four systematic reviews:¹⁻⁴ no difference from placebo. One other⁵ had an Odds Ratio 0.95 (95%CI 0.93-0.99) (event rates not reported). Insufficient details provided to evaluate why results differ.
- Cardiovascular disease (RCTs included patients with/without cardiovascular disease):
 - Cardiovascular events:^{1-3,9-11} No difference.

- Cardiovascular mortality:^{3,5,9-11} No difference.
- Cancer (RCTs included patients with/without cancer):
 - Cancer Incidence:^{1,2,4,9,10} No difference.
 - Cancer mortality:^{1,4,9-11} Inconsistent results:
 - Four systematic reviews:^{1,4,9,11} No difference. One systematic review¹⁰ not including largest RCT of bolus-dosing found difference, but event rates not provided, and largest RCTs showed no effect.
 - Subgroup analysis of daily versus bolus-dosing:^{4,9,10} No difference.
- Adverse events: No difference.
- Limitations: Some systematic reviews missing meta-analyses, heterogeneous populations, different dosages (daily versus boluses; various doses).

CONTEXT

- Guideline¹² suggests supplementation in those >75 years old based on a non-statistically different sub-group analysis.²
- In the general population and in those with low vitamin D levels, vitamin D does not prevent fractures¹³ or respiratory infections.¹⁴ High-dose bolus vitamin D may increase fracture risk.¹⁵
- Other interventions may have a larger impact on cancer mortality. Exercise interventions of 2-32 weeks with observational follow-up of 1-96 months reduce cancer mortality from 22% to 14% and cancer recurrence from 14% to 7%.¹⁶

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