



VITAMIN D DEFICIENCY AND ITS RELATION WITH SOME DISEASES: A REVIEW

Ali M.A. Al-Kufaishi^{1*}, Saad Saleem Raheem², Hadeel Alaa Al-Rubaei³ and Noor J.T. Al-Musawi³

^{1*}Department of Medical Laboratory Techniques, College of Health and Medical Techniques,
Al-Furat Al-Awsat Technical University Kufa, Iraq- 31003

²Department of Community Health, College of Health and Medical Techniques,
Al-Furat Al-Awsat Technical University, Kufa, Iraq -31003

³DNA Research Center, University of Babylon, Iraq

Abstract

Vitamin D is fat soluble vitamin synthesis from isoprenoid units by condensation process in vivo when exposure to sun light (weak UV source). The main function of vitamin D is maintenance on calcium hemostasis, beside this function has important role as a protection factor from many disease such as autoimmune diseases and cancer. There are several suggestions to support the immunity such as intake vitamin D that has the ability to reduce the risk of respiratory tract infections, such as epidemiology of influenza and COVID-19. Vitamin D can reduce the risk of COVID-19 infection through the mechanisms including lowering replication of virus by induction of cathelicidins and reduced the inflammatory cytokines that produced from the lining cells of lungs which lead to pneumonia and lung fibrosis due to autoimmune diseases as well as increase the concentrations of anti-inflammatory cytokines.

Key words: Vitamin D, COVID-19, cancer, autoimmune diseases, calcium hemostasis

Introduction

Vitamin D from the fat soluble vitamins serve as prohormone because can synthesis in the body when exposure to ultraviolet light at wavelength (290-315) nm from its precursors (7-dehydrocholesterol) (Brannon *et al.*, 2008). Vitamin D useful to conserve of many of biological functions such as metabolic and reproductive process, muscular, skeletal, cutaneous, respiratory and immune systems of men and women at any age stage (Wolf *et al.*, 2007)(Inaguma *et al.*, 2008). therefore according to researchers reports the lower levels of 25-hydroxyvitamin D [25-(OH)D] associated with risk for bone fractures (Al-Aly, 2007)(Dobnig *et al.*, 2008), falls (Melamed *et al.*, 2008), cardiovascular diseases (Autier, Gandini and Mullie, 2012), colorectal cancer (Judd and Tangpricha, 2008), diabetes mellitus (Mathieu *et al.*, 2005), depression (Sloka, Grant and Newhook, 2010), cognitive decline (Mathieu *et al.*, 2004).

Vitamin D deficiency (VDD) can be determined by measuring concentration of serum 25-(OH)D. From the

***Author for correspondence** : E-mail: Kuh.ali@atu.edu.iq.

difficulties in measurement of 25-(OH)D levels is presence of multiple assays (Prince *et al.*, 2008), and lack of an international reference for measurements of vitamin D (Broe *et al.*, 2007). Recently, the Ministry of Health and Cancer Society of New Zealand (Bischoff-Ferrari *et al.*, 2009), Institute of Medicine (Osborne and Hutchinson, 2002) and American Academy of Dermatology (AAD) and AAD association (Freedman *et al.*, 2007) they are agree on the minimum concentrations of 25(OH)D at least 50 nmol/L for better healthy cases. VDD is common in regions and countries of North America, Northern Europe, Saudi Arabia, the UAE, Australia, Turkey, Iraq, and Lebanon (Freedman *et al.*, 2007).

A lot of studies have been illustrate VDD is associated with elevated levels of serum Parathyroid Hormone (PTH) due to indicative effect of secondary hyperparathyroidism (Garland *et al.*, 2006). Also, low of vitamin D levels may be related with several factors include darker skin (pigmentation) (Heaney, 2008), lower intake of vitamin D (Ebers, 2008), insufficient exposure

to sun light (Kampman, Wilsgaard and Mellgren, 2007)(Willer *et al.*, 2005), obesity (van der Mei *et al.*, 2003), Older age (Holick, 2004), and female sex (Adorini and Penna, 2008), no sport exercise (Szodoray *et al.*, 2008), and bad health status (Munger *et al.*, 2006).

Vitamin D deficiency treatment by increase intake of vitamin D rich foods and in severe deficiency give the patients oral vitamin D in several forms (tablet or gel capsule) dosage (200-500 IU), in some times can be given in combination with calcium (Kragt *et al.*, 2009)(van der Mei *et al.*, 2007). The side effect of hyper dosage of vitamin D hypercalcemia, hyperphosphatemia, suppressed parathyroid hormone levels, and hypercalciuria (Soilu-

Hänninen *et al.*, 2005)(Al-Mahdawi, Al Gawwam and Al Ethawi, 2014). The following table show some studies related with vitamin D.

Vitamin D Deficiency as a Risk Factor for Infected by COVID-19

The world is in the hold of the COVID-19 pandemic. There are several suggestions to support the immunity such as intake vitamin D that has the ability to reduce the risk of respiratory tract infections, such as epidemiology of influenza and COVID-19. Vitamin D can reduce the risk of COVID-19 infection through the mechanisms including lowering replication of virus by induction of

Author	Project	Year	Reference
Sarah A. Stechschulte <i>et al.</i>	Vitamin D and bone relation diseases	2009	(Stechschulte, Kirsner and Federman, 2009)
Daniel Bikle <i>etal</i>	Vitamin D metabolism and clinical significance	2008	(Bikle, Adams and Christakos, 2009)
Wolpowitz D and Gilchrest BA	Vitamin D dosage	2006	(Wolpowitz and Gilchrest, 2006)
Simonelli C <i>et al.</i>	Vitamin D and related with trauma	2005	(Simonelli <i>et al.</i> , 2005)
Rapuri PB <i>et al.</i>	The levels of Vitamin D in summer and winter	2004	(Rapuri, Gallagher and Haynatzki, 2004)
Plotnikoff GA and Quigley JM	Severe deficiency of vitamin D in the patients with muscles pain	2003	(Plotnikoff and Quigley, 2003)
Merlino LA <i>et al.</i>	Vitamin D and rheumatoid arthritis	2004	(Merlino <i>et al.</i> , 2004)
Chiu KC <i>et al.</i>	Vitamin D and insulin resistance	2004	(Chiu <i>et al.</i> , 2004)
Bulliard JL	Vitamin D and cancer	2000	(Bulliard, 2000)
Gallagher RP and Lee TK	Vitamin D and ultraviolet exposure	2006	(Gallagher and Lee, 2006)
Zittermann A <i>et al.</i>	Cardiovascular diseases and vitamin D	2005	(Zittermann, Schleithoff and Koerfer, 2005)
Langman CB and Brooks ER	Renal diseases in children and related with vitamin D	2006	(Langman and Brooks, 2006)
Linhartova K <i>et al.</i>	Parathyroid hormones and vitamin D	2008	(Linhartová <i>et al.</i> , 2008)
Watson KE <i>et al.</i>	Coronary calcification and vitamin D	1997	(Watson <i>et al.</i> , 1997)
Marks R <i>et al.</i>	Sun exposure and vitamin D	1995	(Marks <i>et al.</i> , 1995)
Thomas MK <i>et al.</i>	Medical inpatients and vitamin D deficiency	1998	(Thomas <i>et al.</i> , 1998)
Holick MF	Health complications and vitamin D deficiency	2006	(Holick, 2006)
DeLuca HF	Story of vitamin D	1988	(DeLuca, 1988)
DeLuca HF	Physiology and metabolism of vitamin D	1984	(DeLuca, 1984)
Holick <i>et al.</i>	Evaluation and treatment	2011	(Holick <i>et al.</i> , 2011)
Norman, A.W.	Vision and vitamin D	2010	(Norman and Bouillon, 2010)
Sergeev I.N.	Vitamin D and Obesity	2014	(Sergeev, 2014)
Song Q. and Sergeev, I.N.	Obesity in vitamin D and calcium deficiency	2012	(Song and Sergeev, 2012)
D. Cashman <i>et al.</i>	Vitamin D deficiency in Europe: pandemic?	2016	(Cashman <i>et al.</i> , 2016)
L. M. De Regil and <i>et al.</i>	Vitamin D supplementation for women during pregnancy	2016	(De Regil <i>et al.</i> , 2016)

Table Continued

Table Continued

M. F. Holick	The vitamin D deficiency pandemic: approaches for diagnosis, treatment and prevention	2017	(Holick, 2017)
P. Lips <i>et al.</i>	Vitamin D and type 2 diabetes	2017	(Lips <i>et al.</i> , 2017)
R. Scragg <i>et al.</i>	Effect of monthly high-dose vitamin D supplementation on cardiovascular disease in the vitamin D assessment study: a randomized clinical trial	2017	(Scragg <i>et al.</i> , 2017)
A. R. Martineau <i>et al.</i>	Vitamin D supplementation to prevent acute respiratory tract infections: systematic review and meta-analysis of individual participant data	2017	(Martineau <i>et al.</i> , 2017)
L. J. P. Staniszewski <i>et al.</i>	Assessment of Novel Vitamin D Receptor Antagonists that Mediate Suppression of Vitamin D Signaling	2018	(Staniszewski <i>et al.</i> , 2018)
E. M. Mowry <i>et al.</i>	Body mass index, but not vitamin D status, is associated with brain volume change in MS	2018	(Mowry <i>et al.</i> , 2018)
A. Gil <i>et al.</i>	Vitamin D: classic and novel actions	2018	(Gil, Plaza-Diaz and Mesa, 2018)
G. Bakris and M. Sorrentino	Vitamin D Life	2018	(Bakris and Sorrentino, 2018)
J. E. Manson <i>et al.</i>	Vitamin D supplements and prevention of cancer and cardiovascular disease	2019	(Manson <i>et al.</i> , 2019)
D. A. Jolliffe <i>et al.</i>	Adjunctive vitamin D in tuberculosis treatment: meta-analysis of individual participant data	2019	(Jolliffe <i>et al.</i> , 2019)
M. Pereira Santos <i>et al.</i>	Polymorphism in the vitamin D receptor gene is associated with maternal vitamin D concentration and neonatal outcomes: A Brazilian cohort study	2019	(Pereira Santos <i>et al.</i> , 2019)
C. F. Garland <i>et al.</i>	Sunlight, vitamin D, and mortality from breast and colorectal cancer in Italy	2019	(Garland <i>et al.</i> , 2019)
S. Bouffar	The efficacy of Vitamin D as adjunctive treatment of Chronic Obstructive Pulmonary Disease	2020	(Bouffard, 2020)
E. Wesselink <i>et al.</i>	Chemotherapy and vitamin D supplement use are determinants of serum 25-hydroxyvitamin D levels during the first six months after colorectal cancer diagnosis	2020	(Wesselink <i>et al.</i> , 2020)
P. E. Marik <i>et al.</i>	Does vitamin D status impact mortality from SARS-CoV-2 infection?	2020	(Marik, Kory and Varon, 2020)
E. Von Mutius and F. D. Martinez	Vitamin D Supplementation during Pregnancy and the Prevention of Childhood Asthma	2020	(Von Mutius and Martinez, 2020)
W. B. Grant <i>et al.</i>	Evidence that vitamin D supplementation could reduce risk of influenza and COVID-19 infections and deaths	2020	(Grant, Lahore, McDonnell, <i>et al.</i> , 2020)
M. J. Bradshaw <i>et al.</i>	Vitamin D and Multiple Sclerosis	2020	(Bradshaw, Holick and Stankiewicz, 2020)
A. Panarese and E. Shahini	Covid 19, and vitamin D	2020	(Panarese and Shahini, 2020)

cathelicidins and reduced the inflammatory cytokines that produced from the lining cells of lungs which lead to pneumonia and lung fibrosis due to autoimmune diseases as well as increase the concentrations of anti-inflammatory cytokines. From the evidence on the protective effect of vitamin D against COVID-19 is increase the number of patients that infected in the winter due to a decrease in the concentration of this vitamin to its lower levels and as well as the deficiency of vitamin D with older age and who have acute respiratory distress syndrome or chronic diseases. So, to minimize the risk of completions or infections, recommended for a people to intake 10,000 IU of vitamin D for a few weeks followed by 5000 IU to quickly elevated vitamin D level and reach to 40-60 ng/ml (100-150 nmol/l) (Grant, Lahore, McDonnell, *et al.*, 2020).

Vitamin D Deficiency Correlation with Multiple Disorders

Vitamin D has several benefits for organism, therefore it is deficiency related with various osteoporosis due to calcium imbalance, as well as in cancer, ischemic heart diseases, diabetes, autoimmune and infectious diseases. Also increase skeletal disorders, such as elevated levels to incidence of malignancies, colon cancer, prostate and breast gland cancer (Peterlik and Cross, 2005).

The following we will discuss the eight disorders in more details as related with VVD.

Heart Disease

Monitoring levels of vitamin D in the people suspected to incidence of heart diseases is important due to correlation between them as increase risk factors such as (hypertension and diabetes) because vitamin D is related with electrolytes levels, so the patients with hemodialysis is more probability to become heart failure (Al-Kufaishi, 2015).

Evidence suggests so higher plasma concentrations on 25-hydroxy vitamin D may also minimize the gamble of hypertension (Gröber *et al.*, 2013). Some meta analyses have recommended a gore pressure lowering effect concerning diet D supplementation, whilst other meta-analyses, into 2015, should no longer confirm these findings then confirmed no impact on vitamin D supplementation on blood pressure (Judd and Tangpricha, 2009). Further, in a recent randomized controlled trial of 200 hypertensive patients, no giant impact concerning vitamin D supplementation of 24 h gore stress could keep performed (Drechsler *et al.*, 2010).

In addition vitamin D have suppression effect to the gene that unregulated in myocardial hypertrophy (Beveridge *et al.*, 2015). Also , regulate1, 25-dihydroxy

vitamin D might have been demonstrated to push antihypertrophic. Impacts around cardiomyocytes Furthermore decreased the outflow of a few genes. Which are unregulated Previously, myocardial hypertrophy (Al-Dujaili, Munir and Iniesta, 2016). Concealment. Of the cardiovascular Renin-Angiotensin framework (RAS) also of natriuretic peptides might incompletely intervene these antihypertrophic impacts for vitamin D. Separated starting with this; vitamin D exerts Different impacts on the development Also. Separation for cardiomyocytes. Person valuable enter component of. Vitamin D may be will restrain unreasonable burgeoning from claiming cardiomyocytes (Chen *et al.*, 2011). Pilz *et al.* Elucidated if insufflate vitamin D status is connected with heart disappointment Furthermore sudden demise cardiovascular passing.

Real finding of the contemplate might have been that low levels for 25-hydroxy vitamin D Also 1,25-dihydroxy vitamin D were connected with predominant. Myocardial dysfunction because of heart failure (Chen *et al.*, 2011).

Those low pervasiveness from claiming patients with extreme vitamin D insufficiency Also. Those generally short medicine period show up with be those limits. For this consider as writers were unabated will avoid noteworthy impacts about (Al-Kufaishi, 2016). Vitamin D clinched alongside populaces with low vitamin D levels and for longer. Medicine or diverse doses about vitamin D. It is be noted that the point when supplementing vitamin D, it as a rule takes about 3 months will achieve a enduring state to circle 25-hydroxy vitamin D concentrations; Be that as. In this study medicine time might have been moderately short, which expands those. Segregation racial inclination for effects (Pilz *et al.*, 2015).

Pilz *et al.* performed in turn ponder for those point will gatherings give. A review of the pathophysiological instruments and the. Epidemiological information concerning vitamin D lack What's more myocardial. Sicknesses (Pilz *et al.*, 2010). A few body of evidence reports highlight pediatric cardiomyopathies, which are connected with vitamin D lack or rickets (Elidrissy, Munawarah and Alharbi, 2013)(Elidrissy, Munawarah and Alharbi, 2013). All the more. Importantly, kids with vitamin D insufficiency connected heart disappointment. Indicated By and large An huge clinical change after vitamin D Also calcium supplementation (Fanari *et al.*, 2015). A post mortem examination of a. Child, who kicked the bucket because of vitamin D insufficiency connected cardiomyopathy. Indicated an expansive pericardial radiation Furthermore an developed heart for An widened. Furthermore concentric hypertrophic left ventricle. There might have been An gentle build. For interstitial stringy

tissue, especially in the subendocardial districts. And the cardiomyocytes were dainty and lengthened clinched alongside keeping with widened cardiomyopathy (Kienreich *et al.*, 2013).

Zittermann *et al.* Discovered fundamentally diminished 25-hydroxy vitamin. D What's more 1,25-dihydroxy vitamin D levels over 54 heart disappointment patients. At compared with 34 age, sex, What's more BMI-matched controls (Ajabshir, Asif and Nayer, 2014).

For An investigation Around 102 African Americans, vitamin D insufficiency might have been. Watched On 84-96% of heart disappointment patients, while main one-third. Of the sound controls were vitamin D insufficient (Teotia and Teotia, 2008). Two All the more. Investigations "around African Americans Additionally indicated a secondary predominance of. Vitamin D lack done patients for heart disappointment. Interestingly, not. The sum heart disappointment patients for vitamin D lack show elevations in. PTH levels, Be that the individuals with optional hyperparathyroidism need more. Extreme types of heart disappointment (Mitri and Pittas, 2014).

In the national wellbeing Furthermore sustenance examination study. (NHANES), An population-based ponder in the us including 8351. Persons, 25-hydroxy vitamin D levels were fundamentally decreased Previously,. Patients with self-reported heart disappointment with those most noteworthy predominance for. Vitamin D insufficiency clinched alongside patients enduring from both, coronary heart. Illness What's more heart disappointment. In this study, low 25-hydroxy vitamin D. Levels were connected with more extreme congestive heart disappointment Furthermore. For impeded exercise ability. Clinched alongside An companion of over 3,000 patients. Alluded for coronary angiography, 25-hydroxy vitamin D and additionally. 1,25-hydroxy vitamin D were conversely associated for cleared out ventricular. Brokenness (Martineau and Jolliffe, 2014).

Outcomes starting with An investigation "around 150 patients with congestive heart. Disappointment What's more 150 age, sex, Furthermore race-matched controls indicated that lifestyle. Components connected with low 25-hydroxy vitamin D levels On prior. Life (childhood, adolescence, Furthermore adulthood) including home. To substantial towns, low physical activity, and low recurrence about summer camp. Occasions were essentially additional basic clinched alongside heart disappointment patients over. Previously, controls (Goldsmith, 2015).

A prospective ponder to which 3299 patients alluded to coronary. Angiography discovered that low 25-hydroxy

vitamin D and also.

Cardiovascular danger figures connected with an expanded hazard from claiming demise. Because of heart disappointment What's more for sudden demise cardiovascular passing (Goldsmith, 2015) (Tordoff, 2001). Furthermore,. Low 1,25-dihydroxy vitamin D concentrations were associated with increased mortality in 510 patients from a specialized heart center and were an independent predictor of death and the need for cardiac transplantation in 383 end-stage congestive heart failure patients (Mithal *et al.*, 2014).

Bone Defect

Vitamin D play important role in bone maintenance, because its prevent several chronic diseases as ostateomalacia and rickets beyond osteoporosis (Sunyecz, 2008). Although calcium level within normal value, but calcium hemostasis disturbed due to VVD (McKay *et al.*, 2009) (Pilz *et al.*, 2013). A low level of vitamin D associated with osteoporosis is unclear (Pilz *et al.*, 2013). One from the responsible mechanism to investigate osteoporosis is regulatory effect of vitamin D to parathyroid hormone, which responsible about calcium hemostasis (Adams and Hewison, 2012).

Vitamin D and Cancer

In 2009 the National Cancer Institute represented vitamin D reduced the possibility to cancer incident such as prostate, breast, and other malignancy (Donaldson, 2004). This effect occur by inhibiting cell proliferation by vitamin D receptor (VDR) (Sun, 2010). Also, through inhibiting gene that responsible about cancer by polymorphism process (Dusso, 2011).

Immunological Role of Vitamin D

Vitamin D act as potent modulator for immunological cell as macrophage, B-cells, and T-cells (Hyppönen *et al.*, 2000). Therefore the low levels of vitamin D lead to impairment for macrophage activation, and function to prevent infectious diseases (Zerwekh, 2008).

VVD increase the risk for autoimmune diseases as rheumatoid arthritis, SLE, multiple sclerosis and type I diabetes (Bacon *et al.*, 2010).

Conclusion

In brief, vitamin D has multifunctional inside human body. Therefore must be monitoring his levels by biochemical tests. The lower levels of vitamin D association with several diseases such as cardiac, autoimmune and bone diseases. The oral administration of vitamin D capsule 400 IU per day to protect people from risk infected by COVID-19. Whereas the numerous

experiments for a clinical trial reported a vitamin D supplementation could reduce the risk of influenza.

References

- Adams, J. S. and M. Hewison (2012). Extrarenal expression of the 25-hydroxyvitamin D-1-hydroxylase. *Archives of Biochemistry and Biophysics*. Elsevier, **523(1)**, 95–102.
- Adorini, L. and G. Penna (2008). Control of autoimmune diseases by the vitamin D endocrine system. *Nature clinical practice Rheumatology*. Nature Publishing Group, **4(8)**, 404–412.
- Ajabshir, S., A. Asif and A. Nayer (2014). The effects of vitamin D on the renin-angiotensin system. *Journal of Nephropathology*. Society of Diabetic Nephropathy, **3(2)**, 41.
- Al-Aly, Z. (2007). Vitamin D as a novel nontraditional risk factor for mortality in hemodialysis patients: the need for randomized trials. *Kidney international*. Elsevier, **72(8)**, 909–911.
- Al-Dujaili, E.A.S., N. Munir and R.R. Iniesta (2016). Effect of vitamin D supplementation on cardiovascular disease risk factors and exercise performance in healthy participants: a randomized placebo-controlled preliminary study. *Therapeutic advances in endocrinology and metabolism*. SAGE Publications Sage UK: London, England, **7(4)**: 153–165.
- Al-Kufaishi, A. M. A. (2015). The effect of garlic vinegar on the blood of patients with high blood viscosity and biochemical variables through oxidation-antioxidant system. Ali MA Al-Kufaishi Al-Forat Al-Awsat University College of Health and Medical techniques. *International Journal of Scientific & Engineering Research*, **7(6)**: 2005–2020.
- Al-Kufaishi, A.M.A. (2016). The hypoglycemic effect of oleanolic acid which extracted from Alhagi Roots in diabetic rabbits by improve antioxidant defenses. *Der. Pharma Chemica*, **8(4)**: 113–117.
- Al-Mahdawi, A.M., G. Al Gawwam and R. A. Al Ethawi (2014). Association of vitamin D Metabolite levels with relapse rate and disability in multiple sclerosis. *Iraqi Academic Scientific Journal*. The Iraqi Borad for Medical Specialization, **13(3)**: 298–305.
- Autier, P., S. Gandini and P. Mullie (2012). A systematic review: influence of vitamin D supplementation on serum 25-hydroxyvitamin D concentration. *The Journal of Clinical Endocrinology & Metabolism*. Oxford University Press, **97(8)**: 2606–2613.
- Bacon, C. J. *et al.* (2010). Effects of 25-hydroxyvitamin D level and its change on parathyroid hormone in premenopausal Chinese women. *Osteoporosis international*. Springer, **21(11)**: 1935–1941.
- Bakris, G. and M. Sorrentino (2018). Vitamin D Life. *N. Engl. J. Med.*, **378**: 497–499.
- Beveridge, L.A. *et al.* (2015). Effect of vitamin D supplementation on blood pressure: a systematic review and meta-analysis incorporating individual patient data. *J. AMA internal medicine*. American Medical Association, **175(5)**: 745–754.
- Bikle, D., J. Adams and S. Christakos (2009). Vitamin D: production, metabolism, mechanism of action, and clinical requirements. *Primer on the metabolic bone diseases and disorders of mineral metabolism*. American Society for Bone and Mineral Research Washington DC, 141–149.
- Bischoff-Ferrari, H.A. *et al.* (2009). Fall prevention with supplemental and active forms of vitamin D: a meta-analysis of randomised controlled trials. *Bmj. British Medical Journal Publishing Group*, **339**: 3692.
- Bouffard, S. (2020). The efficacy of Vitamin D as adjunctive treatment of Chronic Obstructive Pulmonary Disease'. *Journal of Clinical Pharmacy and Therapeutics*, **45**: 1–10.
- Bradshaw, M.J., M.F. Holick and J.M. Stankiewicz (2020). Vitamin D and Multiple Sclerosis in *Clinical Neuroimmunology*. Springer, 197–212.
- Brannon, P.M. *et al.* (2008). Overview of the conference “Vitamin D and Health in the 21st Century: an Update. *The American journal of clinical nutrition*. Oxford University Press, **88(2)**: 483S–490S.
- Broe, K.E. *et al.* (2007). A higher dose of vitamin D reduces the risk of falls in nursing home residents: a randomized, multiple dose study. *Journal of the American Geriatrics Society*. Wiley Online Library, **55(2)**: 234–239.
- Bulliard, J. (2000). Site specific risk of cutaneous malignant melanoma and pattern of sun exposure in New Zealand. *International Journal of Cancer*. Wiley Online Library, **85(5)**: 627–632.
- Cashman, K.D. *et al.* (2016). Vitamin D deficiency in Europe: pandemic?. *The American journal of clinical nutrition*. Oxford University Press, **103(4)**: 1033–1044.
- Chen, S. *et al.* (2011). Cardiomyocyte-specific deletion of the vitamin D receptor gene results in cardiac hypertrophy. *Circulation*. Am Heart Assoc, **124(17)**: 1838–1847.
- Chiu, K. C. *et al.* (2004). Hypovitaminosis D is associated with insulin resistance and cell dysfunction. *The American journal of clinical nutrition*. Oxford University Press, **79(5)**: 820–825.
- De Regil, L. M. *et al.* (2016). Vitamin D supplementation for women during pregnancy. *Cochrane Database of Systematic Reviews*. John Wiley & Sons, Ltd, (1).
- DeLuca, H. F. (1984). The metabolism, physiology, and function of vitamin D in *Vitamin D*. Springer, 1–68.
- DeLuca, H.F. (1988). The vitamin D story: a collaborative effort of basic science and clinical medicine. *The FASEB Journal*, **2(3)**: 224–236.
- Dobnig, H. *et al.* (2008). Independent association of low serum 25-hydroxyvitamin D and 1, 25-dihydroxyvitamin D levels with all-cause and cardiovascular mortality. *Archives of internal medicine*. American Medical Association,

- 168(12):** 1340–1349.
- Donaldson, M.S. (2004). Nutrition and cancer: a review of the evidence for an anti-cancer diet. *Nutrition journal*. Springer, **3(1)**: 19.
- Drechsler, C. *et al.* (2010). Vitamin D deficiency is associated with sudden cardiac death, combined cardiovascular events, and mortality in haemodialysis patients. *European heart journal*. Oxford University Press, **31(18)**: 2253–2261.
- Dusso, A.S. (2011). Kidney disease and vitamin D levels: 25-hydroxyvitamin D, 1, 25-dihydroxyvitamin D, and VDR activation. *Kidney international supplements*. Elsevier, **1(4)**: 136–141.
- Ebers, G.C. (2008). Environmental factors and multiple sclerosis. *The Lancet Neurology*. Elsevier, **7(3)**: 268–277.
- Elidrissy, A.T.H., M. Munawarah and K.M. Alharbi (2013). Hypocalcemic rachitic cardiomyopathy in infants. *Journal of the Saudi Heart Association*. Elsevier, **25(1)**: 25–33.
- Fanari, Z. *et al.* (2015). Vitamin D deficiency plays an important role in cardiac disease and affects patient outcome: Still a myth or a fact that needs exploration? *Journal of the Saudi Heart Association*. Elsevier, **27(4)**, 264–271.
- Freedman, D.M. *et al.* (2007). Prospective study of serum vitamin D and cancer mortality in the United States. *Journal of the National Cancer Institute*. Oxford University Press, **99(21)**, 1594–1602.
- Gallagher, R.P. and T.K. Lee (2006). Adverse effects of ultraviolet radiation: a brief review. *Progress in biophysics and molecular biology*. Elsevier, *92(1)*, pp. 119–131.
- Garland, C.F. *et al.* (2006). The role of vitamin D in cancer prevention', *American journal of public health*. American Public Health Association, **96(2)**, 252–261.
- Garland, C. F. *et al.* (2019). Sunlight, vitamin D, and mortality from breast and colorectal cancer in Italy, in *Biologic Effects of Light: Proceedings of the Symposium, Atlanta, Georgia, USA, October 13–15, 1991*. Walter de Gruyter GmbH & Co KG, 39.
- Gil, A., J. Plaza-Diaz and M. D. Mesa (2018). Vitamin D: classic and novel actions. *Annals of Nutrition and Metabolism*. Karger Publishers, **72(2)**, 87–95.
- Goldsmith, J.R. (2015). Vitamin D as an immunomodulator: risks with deficiencies and benefits of supplementation, in *Healthcare*. Multidisciplinary Digital Publishing Institute, 219–232.
- Grant, W.B., H. Lahore, and S.L. McDonnell (2020). Evidence that vitamin D supplementation could reduce risk of influenza and COVID-19 infections and deaths. *Nutrients*. Multidisciplinary Digital Publishing Institute, **12(4)**, 988.
- Grant, W. B., H. Lahore and S. L. McDonnell (2020). Evidence that Vitamin D Supplementation Could Reduce Risk of Influenza and COVID-19 Infections and Deaths. *Nutrients*, **12(1)**, 1–19.
- Gröber, U. *et al.* (2013). Vitamin D: update 2013: from rickets prophylaxis to general preventive healthcare. *Dermatoendocrinology*. Taylor & Francis, **5(3)**, pp. 331–347.
- Heaney, R.P. (2008). Vitamin D and calcium interactions: functional outcomes. *The American journal of clinical nutrition*. Oxford University Press, **88(2)**, 541S–544S.
- Holick, M.F. (2004). Sunlight and vitamin D for bone health and prevention of autoimmune diseases, cancers, and cardiovascular disease. *The American journal of clinical nutrition*. Narnia, **80(6)**, 1678S–1688S.
- Holick, M.F. (2006). High prevalence of vitamin D inadequacy and implications for health, in *Mayo Clinic Proceedings*. Elsevier, 353–373.
- Holick, M.F. *et al.* (2011). Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. *The Journal of Clinical Endocrinology & Metabolism*. Oxford University Press, **96(7)**, 1911–1930.
- Holick, M.F. (2017). The vitamin D deficiency pandemic: approaches for diagnosis, treatment and prevention. *Reviews in Endocrine and Metabolic Disorders*. Springer, **18(2)**, 153–165.
- Hypönen, E. *et al.* (2000). Obesity, increased linear growth, and risk of type 1 diabetes in children. *Diabetes care*. Am Diabetes Assoc, **23(12)**, 1755–1760.
- Inaguma, D. *et al.* (2008). Relationship between serum 1, 25-dihydroxyvitamin D and mortality in patients with pre-dialysis chronic kidney disease. *Clinical and experimental nephrology*. Springer, **12(2)**, 126–131.
- Jolliffe, D.A. *et al.* (2019). Adjunctive vitamin D in tuberculosis treatment: meta-analysis of individual participant data. *European Respiratory Journal*. Eur Respiratory Soc, **53(3)**, 1802003.
- Judd, S.E. and V. Tangpricha (2009). Vitamin D deficiency and risk for cardiovascular disease. *The American journal of the medical sciences*. Elsevier, **338(1)**, 40–44.
- Judd, S. and V. Tangpricha (2008). Vitamin D deficiency and risk for cardiovascular disease. *Circulation*. NIH Public Access, **117(4)**, 503.
- Kampman, M.T., T. Wilsgaard and S.I. Mellgren (2007). Outdoor activities and diet in childhood and adolescence relate to MS risk above the Arctic Circle. *Journal of neurology*. Springer, **254(4)**, 471–477.
- Kienreich, K. *et al.* (2013). Vitamin D, arterial hypertension & cerebrovascular disease. *The Indian journal of medical research*. Wolters Kluwer—Medknow Publications, **137(4)**, 669.
- Kragt, J.J. *et al.* (2009). Higher levels of 25-hydroxyvitamin D are associated with a lower incidence of multiple sclerosis only in women. *Multiple Sclerosis Journal*. SAGE Publications Sage UK: London, England, **15(1)**, 9–15.
- Langman, C.B. and E.R. Brooks (2006). Renal osteodystrophy in children: a systemic disease associated with cardiovascular manifestations. *Growth hormone & IGF research*. Elsevier, **16**, 79–83.
- Linhartová, K. *et al.* (2008). Parathyroid hormone and vitamin

- D levels are independently associated with calcific aortic stenosis. *Circulation Journal*. The Japanese Circulation Society, **72(2)**, 245–250.
- Lips, P. *et al.* (2017). Vitamin D and type 2 diabetes. *The Journal of steroid biochemistry and molecular biology*. Elsevier, **173**, 280–285.
- Manson, J.E. *et al.* (2019). Vitamin D supplements and prevention of cancer and cardiovascular disease. *New England Journal of Medicine*. *Mass Medical Soc*, **380(1)**, 33–44.
- Marik, P.E., P. Kory and J. Varon (2020). Does vitamin D status impact mortality from SARS-CoV-2 infection? *Medicine in Drug Discovery*. Elsevier.
- Marks, R. *et al.* (1995). The effect of regular sunscreen use on vitamin D levels in an Australian population: results of a randomized controlled trial. *Archives of dermatology*. American Medical Association, **131(4)**, 415–421.
- Martineau, A. and D. Jolliffe (2014). Vitamin D and Human Health: from the Gamete to the Grave: Report on a meeting held at Queen Mary University of London, 23rd–25th April 2014². Multidisciplinary Digital Publishing Institute.
- Martineau, A.R. *et al.* (2017). Vitamin D supplementation to prevent acute respiratory tract infections: systematic review and meta-analysis of individual participant data, *bmj*. British Medical Journal Publishing Group, **356**, i6583.
- Mathieu, C. *et al.* (2004). Vitamin D and 1, 25-dihydroxyvitamin D3 as modulators in the immune system. *The Journal of steroid biochemistry and molecular biology*. Elsevier, **89**, 449–452.
- Mathieu, C. *et al.* (2005). Vitamin D and diabetes. *Diabetologia*. Springer, **48(7)**, 1247–1257.
- McKay, J.D. *et al.* (2009). Vitamin D receptor polymorphisms and breast cancer risk: results from the National Cancer Institute Breast and Prostate Cancer Cohort Consortium. *Cancer Epidemiology and Prevention Biomarkers*. AACR, **18(1)**, 297–305.
- van der Mei, I.A. F. *et al.* (2003). Past exposure to sun, skin phenotype, and risk of multiple sclerosis: case-control study, *Bmj*. British Medical Journal Publishing Group, **327(7410)**, 316.
- van der Mei, I.A.F. *et al.* (2007). Vitamin D levels in people with multiple sclerosis and community controls in Tasmania, Australia. *Journal of neurology*. Springer, **254(5)**, 581.
- Melamed, M.L. *et al.* (2008). 25-hydroxyvitamin D levels and the risk of mortality in the general population. *Archives of internal medicine*. American Medical Association, **168(15)**, 1629–1637.
- Merlino, L.A. *et al.* (2004). Vitamin D intake is inversely associated with rheumatoid arthritis: results from the Iowa Women's Health Study. *Arthritis & Rheumatism: Official Journal of the American College of Rheumatology*. Wiley Online Library, **50(1)**, pp. 72–77.
- Mithal, A. *et al.* (2014). The Asia-pacific regional audit-epidemiology, costs, and burden of osteoporosis in India 2013: a report of international osteoporosis foundation. *Indian journal of endocrinology and metabolism*. Wolters Kluwer—Medknow Publications, **18(4)**, 449.
- Mitri, J. and A.G. Pittas (2014). Vitamin D and diabetes. *Endocrinology and Metabolism Clinics*. Elsevier, **43(1)**, 205–232.
- Mowry, E. M. *et al.* (2018). Body mass index, but not vitamin D status, is associated with brain volume change in MS. *Neurology*. AAN Enterprises, **91(24)**, e2256–e2264.
- Munger, K.L. *et al.* (2006). Serum 25-hydroxyvitamin D levels and risk of multiple sclerosis. *Jama*. American Medical Association, **296(23)**, 2832–2838.
- Von Mutius, E. and F.D. Martinez (2020). Vitamin D Supplementation during Pregnancy and the Prevention of Childhood Asthma. *Mass Medical Soc*.
- Norman, A.W. and R. Bouillon (2010). Vitamin D nutritional policy needs a vision for the future. *Experimental Biology and Medicine*. SAGE Publications Sage UK: London, England, **235(9)**, 1034–1045.
- Osborne, J.E. and P.E. Hutchinson (2002). Vitamin D and systemic cancer: is this relevant to malignant melanoma? *British Journal of Dermatology*. Wiley Online Library, **147(2)**, 197–213.
- Panarese, A. and E. Shahini (2020). Covid 19, and vitamin D², *Alimentary Pharmacology & Therapeutics*. Wiley Online Library.
- Pereira Santos, M. *et al.* (2019). Polymorphism in the vitamin D receptor gene is associated with maternal vitamin D concentration and neonatal outcomes: A Brazilian cohort study. *American Journal of Human Biology*. Wiley Online Library, **31(4)**, e23250.
- Peterlik, M. and H.S. Cross (2005). Vitamin D and calcium deficits predispose for multiple chronic diseases. *European journal of clinical investigation*. Wiley Online Library, **35(5)**, 290–304.
- Pilz, S. *et al.* (2010). Vitamin D deficiency and myocardial diseases. *Molecular nutrition & food research*. Wiley Online Library, **54(8)**, 1103–1113.
- Pilz, S. *et al.* (2013). Vitamin D and cancer mortality: systematic review of prospective epidemiological studies. *Anti-Cancer Agents in Medicinal Chemistry (Formerly Current Medicinal Chemistry-Anti-Cancer Agents)*. Bentham Science Publishers, **13(1)**, 107–117.
- Pilz, S. *et al.* (2015). Effects of vitamin D on blood pressure and cardiovascular risk factors: a randomized controlled trial. *Hypertension*. Am Heart Assoc, **65(6)**, pp. 1195–1201.
- Plotnikoff, G. A. and J. M. Quigley (2003) 'Prevalence of severe hypovitaminosis D in patients with persistent, nonspecific musculoskeletal pain', in *Mayo clinic proceedings*. Elsevier, pp. 1463–1470.
- Prince, R. L. *et al.* (2008) 'Effects of ergocalciferol added to calcium on the risk of falls in elderly high-risk women',

- Archives of internal medicine*. American Medical Association, **168(1)**, 103–108.
- Rapuri, P.B., J.C. Gallagher and G. Haynatzki (2004). Effect of vitamins D 2 and D 3 supplement use on serum 25OHD concentration in elderly women in summer and winter. *Calcified Tissue International*. Springer, **74(2)**, 150–156.
- Scragg, R. *et al.* (2017). Effect of monthly high-dose vitamin D supplementation on cardiovascular disease in the vitamin D assessment study: a randomized clinical trial. *JAMA cardiology*. American Medical Association, **2(6)**, 608–616.
- Sergeev, I.N. (2014). Vitamin D-mediated apoptosis in cancer and obesity. *Hormone molecular biology and clinical investigation*. De Gruyter, **20(2)**, 43–49.
- Simonelli, C. *et al.* (2005). Prevalence of vitamin D inadequacy in a minimal trauma fracture population. *Current medical research and opinion*. Taylor & Francis, **21(7)**, 1069–1074.
- Sloka, S., M. Grant and L.A. Newhook (2010). The geospatial relation between UV solar radiation and type 1 diabetes in Newfoundland. *Acta diabetologica*. Springer, **47(1)**, 73–78.
- Soilu-Hänninen, M. *et al.* (2005). 25-Hydroxyvitamin D levels in serum at the onset of multiple sclerosis. *Multiple Sclerosis Journal*. Sage Publications Sage CA: Thousand Oaks, CA, **11(3)**, 266–271.
- Song, Q. and I.N. Sergeev (2012). Calcium and vitamin D in obesity. *Nutrition research reviews*. Cambridge University Press, **25(1)**, 130–141.
- Staniszewski, L.J.P. *et al.* (2018). Assessment of Novel Vitamin D Receptor Antagonists that Mediate Suppression of Vitamin D Signaling. *The FASEB Journal*. The Federation of American Societies for Experimental Biology, 32(1_supplement), lb98-lb98.
- Stechschulze, S.A., R.S. Kirsner and D.G. Federman (2009). Vitamin D: bone and beyond, rationale and recommendations for supplementation. *The American journal of medicine*. Elsevier, **122(9)**, 793–802.
- Sun, J. (2010). Vitamin D and mucosal immune function. *Current opinion in gastroenterology*. NIH Public Access, **26(6)**, 591.
- Sunycz, J.A. (2008). The use of calcium and vitamin D in the management of osteoporosis. *Therapeutics and clinical risk management*. Dove Press, **4(4)**, 827.
- Szodoray, P. *et al.* (2008). The complex role of vitamin D in autoimmune diseases. *Scandinavian journal of immunology*. Wiley Online Library, **68(3)**, 261–269.
- Teotia, S.P.S. and M. Teotia (2008). Nutritional bone disease in Indian population. *Indian Journal of Medical Research*, **127(3)**.
- Thomas, M.K. *et al.* (1998). Hypovitaminosis D in medical inpatients. *New England Journal of Medicine*. Mass Medical Soc, **338(12)**, 777–783.
- Tordoff, M.G. (2001). Calcium: taste, intake, and appetite. *Physiological Reviews*. American Physiological Society Bethesda, MD, **81(4)**, 1567–1597.
- Watson, K.E. *et al.* (1997). Active serum vitamin D levels are inversely correlated with coronary calcification. *Circulation*. Am Heart Assoc, **96(6)**, 1755–1760.
- Wesselink, E. *et al.* (2020). Chemotherapy and vitamin D supplement use are determinants of serum 25-hydroxyvitamin D levels during the first six months after colorectal cancer diagnosis. *The Journal of Steroid Biochemistry and Molecular Biology*. Elsevier, p. 105577.
- Willer, C.J. *et al.* (2005). Timing of birth and risk of multiple sclerosis: population based study. *Bmj*. British Medical Journal Publishing Group, **330(7483)**, 120.
- Wolf, M. *et al.* (2007). Vitamin D levels and early mortality among incident hemodialysis patients. *Kidney international*. Elsevier, **72(8)**, 1004–1013.
- Wolpowitz, D. and B.A. Gilchrist (2006). The vitamin D questions: how much do you need and how should you get it? *Journal of the American Academy of Dermatology*. Elsevier, **54(2)**, 301–317.
- Zerwekh, J.E. (2008). Blood biomarkers of vitamin D status. *The American journal of clinical nutrition*. Oxford University Press, **87(4)**, 1087S–1091S.
- Zittermann, A., S.S. Schleithoff and R. Koerfer (2005). Putting cardiovascular disease and vitamin D insufficiency into perspective. *British journal of nutrition*. Cambridge University Press, **94(4)**, 483–492.