

# Vitamin D: supplement use in specific population groups overview

NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/vitamin-d-supplement-use-in-specific-population-groups>

NICE Pathway last updated: 30 August 2017

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



## 1 Vitamin D supplement use in specific population groups

No additional information

## 2 National policy and strategy

See Vitamin D: supplement use in specific population groups / National policy and strategy for preventing vitamin D deficiency

## 3 Local strategy

See Vitamin D: supplement use in specific population groups / Local strategy for preventing vitamin D deficiency

## 4 Training and professional development

Health Education England, Public Health England, clinical commissioning groups, health and wellbeing boards and local authorities should:

- Ensure health and social care practitioners receive information on the following as part of their registration and post-registration training and continuing professional development:
  - the importance of vitamin D for good health
  - sources of vitamin D in the UK (from safe sun exposure, supplements and limited dietary sources)
  - groups at risk of low vitamin D status
  - supplement recommendations for different groups (this should address any confusion about, for example, age groups or the type of supplement to recommend)
  - how to encourage people to start and continue taking supplements (see what NICE says on medicines optimisation).
- Ensure health, social care and other relevant practitioners in contact with specific population groups [See page 5] are made aware of the following:
  - local policies and procedures in relation to vitamin D
  - local sources of vitamin D supplements (including Healthy Start)
  - eligibility for Healthy Start vitamin supplements.

## 5 Monitoring and evaluation

The Department of Health, Public Health England and local authority commissioners should:

- Monitor national and local awareness of, access to, and uptake of, vitamin D supplements among specific population groups [See page 5] (including those covered by Healthy Start).
- Use a range of sources to assess local uptake, for example, orders for supplements and information collected in personal child health records, maternal antenatal notes and computerised prompts (see ensure health professionals recommend vitamin D supplements).
- Use monitoring data to improve activities related to the awareness of, access to and uptake of vitamin D supplements.

Although the entire population of the UK are at risk of having a low vitamin D status, evidence was only considered in regard to increasing the supplement use for these specific population groups:

- All pregnant and breastfeeding women, particularly teenagers and young women.
- Infants and children under 4 years (breast fed, non-breast fed and mixed fed).
- People over 65.
- People who have low or no exposure to the sun. For example, those who cover their skin for cultural reasons, who are housebound or confined indoors for long periods.
- People who have darker skin, for example, people of African, African–Caribbean and South Asian origin.

All population groups are currently advised to take a supplement that meets 100% of the reference nutrient intake for their age group.

All infants and young children aged 6 months to 3 years are advised to take a daily supplement containing vitamin D in the form of vitamin drops. But infants who are fed infant formula will not need them until they have less than 500 ml of infant formula a day, because these products are fortified with vitamin D. Breastfed infants may need drops containing vitamin D from 1 month of age if their mother has not taken vitamin D supplements throughout pregnancy. ('Vitamin D – advice for supplements for at risk groups – letter from the UK Chief Medical Officers' Department of Health).

## Glossary

### Halal

foods or non-food items such as cosmetics or pharmaceuticals permitted by and prepared according to Islamic law

### Healthy Start

a UK-wide government scheme that provides a 'nutritional safety net' for pregnant women and families on benefits and tax credits. Every 8 weeks, beneficiaries get vitamin coupons to swap for Healthy Start vitamins. The vitamin tablets for mothers contain folic acid and vitamins C and D. Healthy Start vitamin drops for children contain vitamins A, C and D

## Kosher

food (or premises where food is sold, cooked or eaten), cosmetics and pharmaceuticals that comply with Jewish law

## Low vitamin D status

(sometimes called vitamin D deficiency) is defined by the Department of Health as a plasma concentration of 25-hydroxyvitamin D (the main circulating form of the vitamin) of below 25 nmol/litre (equal to 10 ng/ml)

## Vegan

people who follow a vegan diet consume only plant products. They avoid all food, drink and non-food items, such as pharmaceuticals that contain any animal products

## Sources

[Vitamin D: supplement use in specific population groups](#) (2014 updated 2017) NICE guideline PH56

## Your responsibility

### Guidelines

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services,

and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Technology appraisals**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Medical technologies guidance, diagnostics guidance and interventional procedures guidance**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to

make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.