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Maternal Serum 25-hydroxycholecalciferol Levels in the Third Trimester of Pregnancy

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I have read with great interest Dr. Pehlivan (1) et al.'s paper entitled "Maternal serum vitamin D levels in the third trimester of pregnancy", since we did similar studies in 1981 as cited by the authors (2). Low 25hydroxycholecalciferol [25 (OH) CC] levels were found in 20% of the mothers who delivered in winter months but not in summer month deliveries in our study. The authors stated that 79.5% of the mothers had severe 25 (OH) CC deficiency and cited other studies from İstanbul and Ankara with low 25 (OH) CC levels in 66.6% of women of reproductive age and 85% of mothers who delivered in October and November. These findings indicated that low 25 (OH) CC levels in women are not related only to Kocaeli but to the whole of Turkey, most likely. This is very alarming since low 25 (OH) CC in women is increasing since our study if it was not a low estimation of the situation by us. On the other hand, we have to determine our standard 25 (OH) CC levels. These documentations may indicate that studies in our universities are theoretical and not related to the solution of our medical problems, since the deficiency is increased among pregnant women.

Actually the purpose of publications should be to reform medical thoughts and practice through new information. This is especially required in developing countries such as Turkey.

Since 75.6% of the women in the authors' study received antenatal medical care, I would like to learn

References

- Pehlivan I, Hatun Ş, Aydoğan M, Babaoğlu K, Türker G, Gökalp AS. Maternal serum vitamin D levels in the third trimester of pregnancy. Turk J Med Sci, 32: 237-241, 2002.
- Hasanoğlu A, Özalp I, Özsoylu Ş. Anne ve kord kanında serum 25hidroksikolekalsiferol değerleri. Çocuk Sağlığı ve Hastalıkları Dergisi, 24: 207-212, 1981 (in Turkish).
- Simonet WS, Lacey DL, Dunstan CR, et al: Osteoprotegerin a novel secreted protein involved in the regulation of bone density. Cell 89: 309-319, 1997.
- Boyden LM, Mao J, Belsky J., et al. High bone density due to mutation in LDL-receptor related protein 5. N Engl J Med 346: 1513-1521, 2002.
- Şaylı U. LRP-5 geninin kemik oluşumu ile görme üzerine etkisi (abstract). Yeni Tıp Dergisi, 19; 236, 2002 (in Turkish).
- Prie' D, Huart V, Bakouh N., et al. Nephrolithiasis and osteoporosis associated with hypophosphatemia caused by mutations in the type 2a sodium-phosphate cotransporter. New Engl J Med 347: 983-991, 2002.
- Özsoylu Ş. How long has cholecalciferol been called vitamin D. J Pediatr Gast. Nutr 7; 303, 1988 (letter).

whether 25 (OH) CC levels were found higher in this group than in the group that received no care?

The authors also stated that "No difference was detected between 25 hydroxy D3 levels and daily exposure to sunlight (p > 0.05)". If this is correct, how could the dressing effect be considered?

Was it somehow less reflected statistically because there were only 4 women in group $I? \end{tabular}$

On this occasion, I would like to mention that in addition to cholecalciferol and parathyroid hormone, low density lipoprotein receptor related protein 5 (LRP 5) and osteoprotegerin should also be taken into consideration for bone mineralization (3-6).

Lastly 1 would repeat my question "How long has cholecalciferol been called vitamin D?", since it is not a vitamin (7).

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