



GP Follow-Up Letter

Maternal Vitamin D Deficiency and Family Monitoring

Addressograph Label

Date / /

Dear Doctor,

Thank you for reviewing Ms/Mrs and her family.

Normal maternal vitamin D level is >50nmol/L and ideally >78nmol/L.

This **MOTHER** was:

- Unscreened and/or at risk for vitamin D deficiency:
 - Veiled.
 - Dark-skinned.
 - Previously diagnosed/treated vitamin D deficiency.
 - Limited sun exposure.
- Mildly Vitamin D deficient confirmed on blood test (25-50nmol/L)
- Moderate (12.5-25nmol/L) to severe (≤ 12.5 nmol/L) vitamin D deficient confirmed on maternal blood test.

We would recommend screening those mothers at risk for vitamin D deficiency and supplementing Vitamin D deplete mothers to correct deficiency.

We provide suggested management for **INFANTS** below:

The recommended daily intake of vitamin D for infants is ≥ 400 IU daily.

Breast milk contains 250-400 IU vitamin D/L.

Most formulas contain ≥ 400 IU/L of vitamin D.

Formula fed infants of mildly deficient or 'at risk' mothers:

- No treatment generally required as most formulas contain sufficient vitamin D to accommodate RDI.

Breastfed infants of mildly deficient (maternal vitamin D 25-50nmol/L) or 'at risk' mothers:

- Consider daily Vitamin D supplementation of infant with Cholecalciferol 500 IU (0.1 mL of a 5000 unit/mL solution) until commencement of solids.
- Suggest monitoring infant for appropriate developmental progress, with particular focus on signs of infantile rickets (timing of onset from 6-18 months).
- Suggest active supplementation of maternal Vitamin D deficiency.

Infants of mothers with moderate to severely deficient mothers (maternal vitamin D <25nmol/L):

- Commence/continue Vitamin D supplementation of the infant with Cholecalciferol 1000 IU (0.2 mL of a 5000 unit/mL solution) for at least 3 months after discharge.
- Monitor progress clinically thereafter, with low threshold for biochemical screening if any suggestion of rickets or delayed acquisition of milestones.

In families at risk or in whom vitamin D deficiency is confirmed in the mother, consider monitoring /investigation of other members and Vitamin D supplementation, especially in young children. KEMH guidelines are available on the internet.

Thank you for your ongoing care of this family.

Regards,

Signature Designation.....

Print Name.....

Staff of the Neonatal Directorate, KEMH