EFFECT OF VITAMIN D SUPPLEMENTATION ON VITAMIN D, ITS METABOLITES AND VITAMIN D BINDING PROTEIN IN INFLAMMATORY BOWEL DISEASE: DOES INFLAMMATION MATTER?

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UEG Week Copenhagen 2023 | Poster

IBD

October 15, 2023

In a retrospective study of 197 IBD patients, vitamin D supplementation increased 25OHD and its metabolites but did not affect VDBP or 1,25OH2D levels, while VDBP correlated positively with hsCRP regardless of supplementation status.

KEY POINTS

- Vitamin D supplementation with 20,000 IU cholecalciferol at varying frequencies significantly increased serum 25OHD, 24,25OH2D, free 25OHD, and bioavailable 25OHD in IBD patients.
- Vitamin D supplementation did not affect levels of VDBP or 1,25OH2D.
- VDBP showed a significant moderate positive correlation with hsCRP in both supplemented ($r=0.481$, $p<0.001$) and non-supplemented groups ($r=0.421$, $p<0.001$).
- Free 25OHD and bioavailable 25OHD showed significant moderate negative correlations with hsCRP in both supplemented and non-supplemented groups.
- The authors suggest that VDBP may have potential as a biomarker for inflammatory processes in IBD, as the significant increase in VDBP with inflammation was uninfluenced by vitamin D supplementation.

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