STUDY THE PRESCRIPTION OF VITAMIN D AND THE ASSOCIATION WITH SARS-COV2 INFECTION AND SEVERITY

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Background
Observational studies have described an association between low serum level of 25-hydroxyvitamin D and higher risk of SARS-CoV2 infection and mortality.

Objectives
To analyze the associations between cholecalciferol or calcifediol supplementation, serum 25-hydroxyvitamin D levels and COVID-19 outcomes in a large population.

Material and methods

<table>
<thead>
<tr>
<th>Variables</th>
<th>Age</th>
<th>Charlson Comorbidity Index</th>
<th>Vitamin D prescription</th>
<th>Specific COVID treatments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td></td>
<td>Days of hospitalization</td>
<td>Clinical evolution</td>
<td>Analytical parameter</td>
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<td>Adverse reaction</td>
</tr>
</tbody>
</table>

Single-center retrospective study: December 2020 - March 2021

322 vitamin D prescription 320 covid-19 Median age: 66 years Men 55.4%

Results
On bivariate analysis, the factors associated with mortality in these patients, we found that the analytical request for serum vitamin D concentration was less frequent, while vitamin D levels below 10 nmol/ml were found in 59.4% of patient’s vs 40.6%

Conclusions and relevance
Vitamin D utilization was very heterogeneous. There were no consensus criteria for its use. Regarding the relationship with mortality, a more detailed analysis is needed to avoid bias.