Table 1. Risk factors for hypovitaminosis D in patients	s undergoing HSCT (%)
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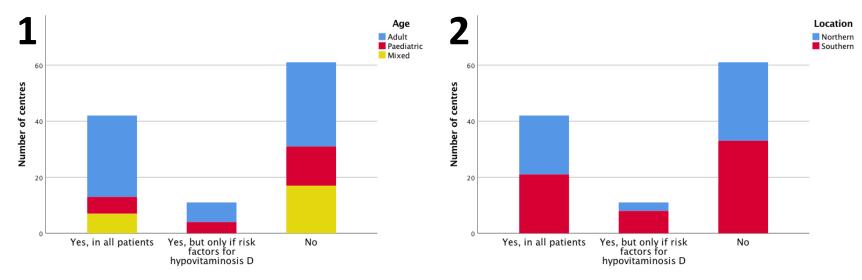
	Pre-HSCT	Post-HSCT
Osteopenia/osteoporosis	94	86
Treatment with steroids	75	68
Previous fracture	75	71
Premature menopause	56	46
Established menopause	50	32
Total body irradiation	7	NR
Low vitamin D levels in serum	6	NR
Other*	NR	6%

* Risk of avascular necrosis of the femur, breastfeeding, total parenteral nutrition. *NR* = not reported

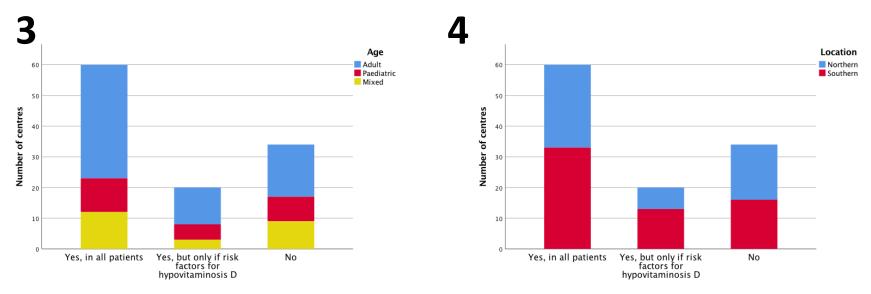
Table 2. Indications for prescribing vitamin D replacement in HSCT patients

	%*
Maintain calcium metabolism and prevent bone loss	92%
Enhancement of immune reconstitution post-HSCT	24%
Prevent GvHD	17%
Enhancement of response to immunosuppression in GvHD	10%
Fatigue	2%
Reduce relapse risk	2%
Depression	1%

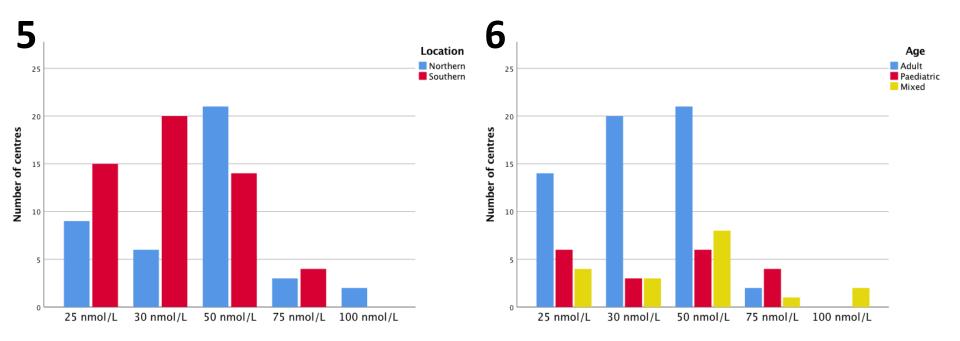
* % = percentage of the responder centres



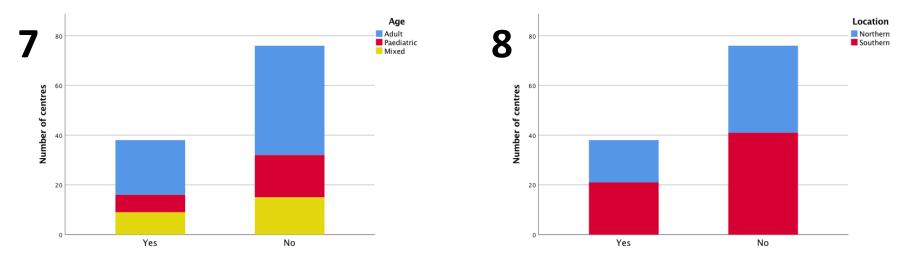
Figures 1 and 2. Measurement of serum vitamin D prior to HSCT depending on age group (1) and centre location (2).



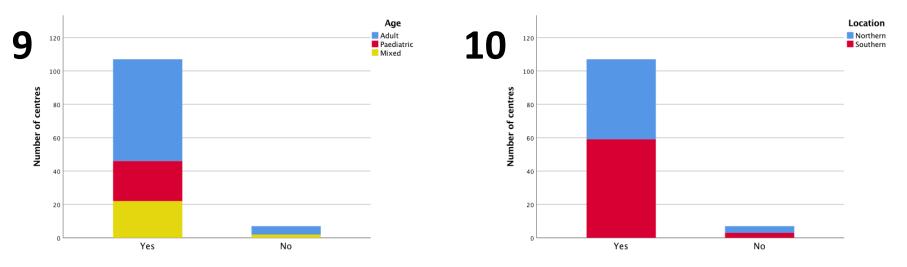
Figures 3 and 4. Measurement of serum vitamin D after HSCT depending on age group (3) and centre location (4).



Figures 5 and 6. Cut-off value for vitamin D deficiency depending on age group (5) and centre location (6).



Figures 7 and 8. Number of centres prescribing loading dose of vitamin D replacement depending on age group (7) and centre location (8).



Figures 9 and 10. Number of centres prescribing maintenance dose of vitamin D replacement depending on age group (9) and centre location (10).