



## Profile of French community-dwelling older adults supplemented with vitamin D: findings and lessons

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**INTRODUCTION:** The vast majority of older French adults exhibit some degree of hypovitaminosis D. The objective of this cross-sectional study was to determine the rate and the reasons for vitamin D prescription among older French adult community dwellers.

**METHODS:** Vitamin D supplementation was systematically assessed among 1876 French community dwellers aged  $\geq 65$  years. Theoretical indications for vitamin D supplementation were collected, ie, the causes of hypovitaminosis D (older age, male gender, kidney failure, undernutrition, polymorbidity) or its clinical complications (vertebral or non-vertebral fractures, gait disturbances, history of falls, muscle weakness, and cognitive impairment).

**RESULTS:** In total, 13.8% of the subjects (n=258) had vitamin D supplementation. They were more often malnourished (P=0.002), exhibited polymorbidity (P<0.001) and muscle weakness (P<0.001), and had a history of vertebral fractures (P<0.001), non-vertebral fractures (P<0.001), and accidental falls (P<0.001). Vitamin D supplementation was explained by the number of complications of hypovitaminosis D (odds ratio [OR]=1.61, P<0.001) including vertebral fractures (adjusted OR=1.49, P=0.007), non-vertebral fractures (adjusted OR=1.74, P=0.026), accidental falls (adjusted OR=1.44, P=0.015), and muscle weakness (adjusted OR=3.96, P<0.001), but not by the number of causes of hypovitaminosis D (P=0.464).

**CONCLUSION:** Even if vitamin D supplementation is selected well for appropriate patients, the rate of supplementation remains insufficient in France, and probably comes too late, ie, at the stage of complications of hypovitaminosis D. These findings should encourage physicians to supplement vitamin D more often and sooner in their elderly patients.

Résumé en  
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