

Vitamin D in liquid food supplements: are labels in line with RDA?

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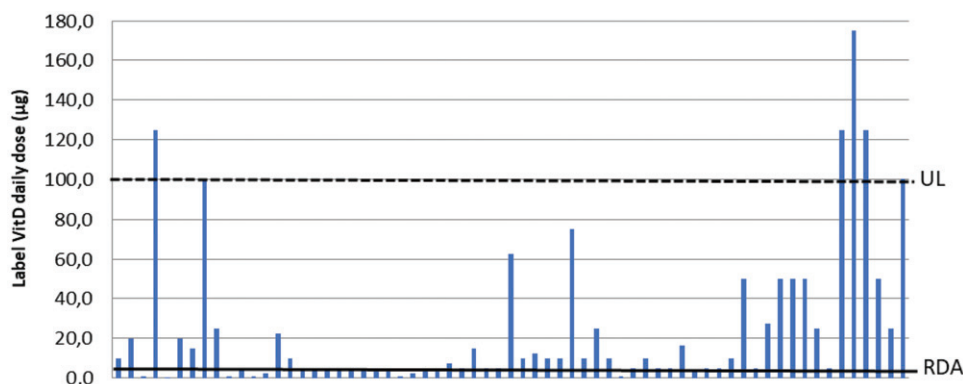


Figure 1. NIR calibration curve used to predict the amorphous fraction of OLZ.

ABSTRACT

Introduction: Nowadays, it has been observed an increase consumption in vitamins and food supplements (FS). In Portugal, in 2018, more than 2 million individuals reported the intake of these products [1]. Media has been given a particular attention to the high prevalence of vitamin D (VitD) deficiency, which may explain its highest consumption [2]. This vitamin increases intestinal calcium absorption and plays a central role in its homeostasis. Although vitD toxicity is uncommon, being a fat-soluble vitamin, excessive supplementation may result in body accumulation and toxicity [3]. The aim of this study is to evaluate if daily dose of vitamin D claimed in FS labels is in conformity with the recommended daily allowances (RDA) for this vitamin defined by European Union Directive and Portuguese legislation [4].

Materials and methods: A total of 65 FS sold in Portuguese pharmacies, health shops, supermarkets and on the internet were examined for indicated daily intake and dosage of vitamin D. Selection criteria included: oral liquid pharmaceutical forms, for adults or paediatric consumption containing vitD in its composition, as mentioned in the label, regardless of the purpose of the FS.

Results: 35 (54%) FS presented vitD label doses above RDA and six (9%) of them indicated a daily dose \geq the tolerable upper intake level defined by EFSA (UL = 100 $\mu\text{g}/\text{day}$) (Figure 1).

Discussion and conclusions: VitD label dose far exceeded RDA value in most of the FS evaluated and some exceeded UL defined by EFSA.

Currently, the economic operators who place FS on the market are the responsible for the safety and the authenticity of label data. Attending that these products are often taken without any medical supervision or counselling and vitD excess may trigger adverse effects and also considering that some of these liquid formulations are for children consumption, it increases the concern about FS safety, it is imperative that the daily doses of this vitamin are reviewed in FS, in accordance to RDA values. FS should be under the same quality control of pharmaceuticals, regarding FS consumers health.

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Are self-esteem and adult attachment affected by previous experiences of youth victimisation?

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ABSTRACT

Introduction: Some research show the impact of the traumatic experiences of emotional abuse during childhood in an insecure attachment style [1], leading to a negative attitude towards oneself and towards others [2]. Studies also show that child abuse is a significant predictor of low self-esteem in adulthood [3]. The objectives of the current study are to analyse the relationship between the youth victimisation and self-esteem in adulthood, the adult attachment and the youth victimisation, and the self-esteem in adults and the adult attachment. This study is important to show, in a Portuguese sample, how these variables are linked, providing knowledge about the implications of previous experiences of youth victimisation.

Materials and methods: The sample comprised 109 Portuguese participants, with ages between 18 and 68 years old ($M = 33.96$, $SD = 13.97$), and the majority was female ($n = 82$, 77.4%). Participants responded online to a sociodemographic questionnaire, a Childhood Trauma Questionnaire (CTQ) [4], a Rosenberg Self-Esteem Scale (RSES) [5], and an Adult Attachment Scale-R (AAS-R) [6]. Portuguese versions of the questionnaires were used.

Results: The total score of the RSES revealed a significant correlation with the CTQ subscales: Emotional Abuse ($r = -0.233$, $p = .016$), Emotional Neglect ($r = -0.201$, $p = .039$), and Physical Neglect ($r = -0.235$, $p = .015$). The total score of the CTQ showed significant statistical and correlations with the total score of the AAS-R and with its subscales: Anxiety ($r = 0.198$, $p = .042$), Close ($r = 0.477$, $p < .001$), and Depend ($r = 0.445$, $p < .001$). The factor Anxiety in the AAS-R showed a significant statistical correlation with the CTQ subscale Emotional Abuse ($r = 0.349$, $p < .001$). The subscale Close in the AAS-R showed significant statistical correlations with the CTQ subscales: Emotional Abuse ($r = -0.266$, $p = .006$), Emotional Neglect ($r = -0.346$, $p < .001$), Physical Neglect ($r = -0.244$, $p = .012$). The subscale Depend on the AAS-R revealed a significant statistical correlation with the CTQ subscales: Emotional Abuse ($r = -0.249$, $p = .010$). The RSES also showed a significant statistical correlation with the AAS-R subscales: Anxiety ($r = -0.590$, $p < .001$), Close ($r = 0.511$, $p < .001$), and Depend ($r = 0.354$, $p < .001$).

Discussion and conclusions: This study highlights the relationship between experiences of youth victimisation and the increase of attachment anxiety in adulthood, decreased self-esteem, comfort with proximity, and confidence in others concerning the attachment in adults. The current study corroborates previous findings [1,2]. This research contributes to the practice of clinical and forensic psychology in the prevention and intervention in childhood trauma, showing, in a Portuguese sample, the impact of the social implications of trauma on attachment style, and self-esteem, during adulthood. However, although this research achieved important results, further studies are recommended, developing a theoretical model with those variables, and with a larger sample.

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Do difficulties in emotion regulation impact self-esteem and adult attachment? – the role of trauma

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ABSTRACT

Introduction: Experiencing trauma in childhood, adolescence or adulthood has severe negative impact on several areas of individuals' lives. Concerning their psychological health, consequences often arise in terms of emotional deficits, self-