





Vitamin D Deficiency in Swiss Elite Wheelchair Athletes

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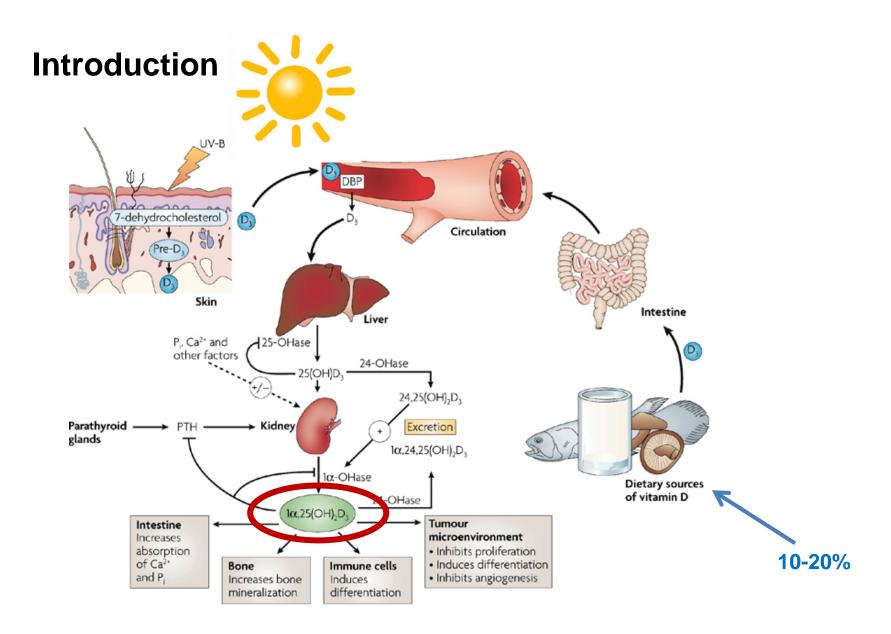
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Introduction

| Vitamin D Food Source | IUs per serving |
|---|--------------------|
| High Vitamin Cod Liver Oil, 1 tsp | 1,150 |
| Standard Cod Liver Oil, 1 tsp | 400 |
| Salmon, cooked, 3.5 oz | 360 |
| Mackerel, cooked, 3.5 oz | 345 |
| Tuna, canned in oil, 3 oz | 200 |
| Sardines, canned in oil, drained, 1.75 oz | 250 |
| Egg Yolk | 20 |
| Beef Liver, cooked, 3.5 oz | 15 |
| Cheese, swiss, 1 oz | 12 |

Source: National Institutes of Health, 2009



Nature Reviews | Cancer Deeb et al. 2007

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Vitamin D Deficiency: Risk Factor

- Rickets
- Osteomalacia
- Osteoporosis
- Diabetes
- Depression
- Multiple sclerosis
- Cancer
- Cardiovascular diseases (hypertonia, ischemia, etc.)

But also:

- Impaired neuromuscular function
- Impaired performance

Holick et al. 2011

Aim of the Study

→ Prevalence of vitamin D deficiency in Swiss elite wheelchair athletes

- National team members in their discipline
- Sports: rugby, basketball, paracycling, athletics, curling, tennis, ski alpine
- Blood samples during the whole year (medical check-up, performance testing)

Methods

- Total serum 25[OH] vitamin D
- Automated benchtop immunoanalyzer (VIDAS®, bioMérieux, France)

Vitamin D status:

>75 nmol/L: no deficiency

50 – 75 nmol/L: insufficiency

• 27.5 – 49.9 nmol/L: deficiency

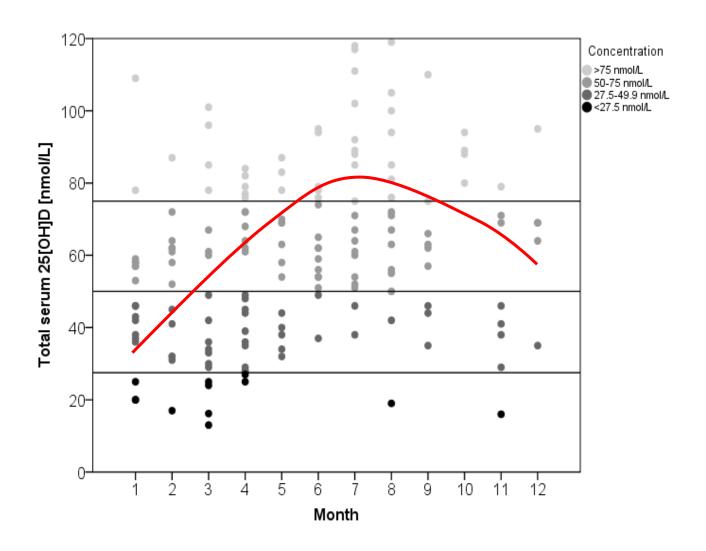
<27.5 nmol/L: severe deficiency

Results: Study Participants

- 164 blood samples from 72 Swiss elite wheelchair athletes
- Age: 32 ± 13 years
- 73.2% of all samples showed an insufficiency/deficiency during the whole year (independent of the season)

- Indoor vs. outdoor athletes
- Summer vs. winter

Results: Insufficiency or deficiency?



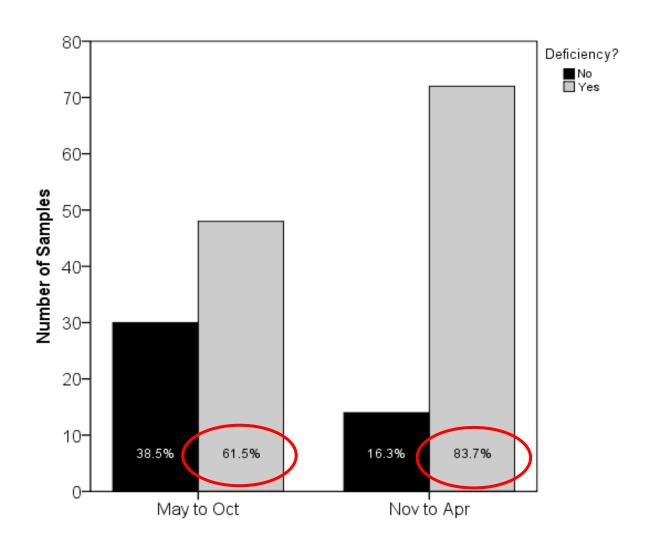
Results: 25[OH]D month per month

| Month | No. of samples (N) | Total serum 25[OH]D [nmol/L] |
|-----------|--------------------|------------------------------|
| January | 18 | 49.0 ± 21.2 |
| February | 14 | 51.1 ± 19.0 |
| March | 18 | 48.8 ± 27.3 |
| April | 23 | 53.5 ± 20.3 |
| May | 14 | 58.5 ± 18.5 |
| June | 16 | 65.3 ± 16.2 |
| July | 19 | 75.8 ± 24.4 |
| August | 16 | 72.2 ± 25.4 |
| September | 9 | 62.0 ± 21.9 |
| October | 4 | 87.8 ± 5.8 |
| November | 8 | 48.6 ± 22.3 |
| December | 5 | 66.4 ± 21.3 |

Results: 25[OH]D between groups

| Groups | Total serum 25[OH]D (nmol/L) | p value |
|-------------------|------------------------------|---------|
| Gender | (mean ± SD) | |
| Male | 60.4 ± 23.2 | |
| Female | 59.2 ± 24.1 | 0.77 |
| Impairment level | | |
| Paraplegia | 60.6 ± 22.6 | |
| Tetraplegia | 58.1 ± 29.2 | 0.69 |
| Impairment extent | | |
| Complete | 63.7 ± 24.7 | |
| Incomplete | 57.7 ± 22.6 | 0.12 |
| Season | | |
| Summer | 69.5 ± 21.4 | 2 224 |
| Winter | 51.5 ± 21.9 | <0.001 |
| Sport | | |
| Outdoor | 62.5 ± 22.6 | 0.042 |
| Indoor | 53.9 ± 24.7 | |

Results: winter vs. summer



Discussion

Surprising?

No! →Results from questionnaire with 65 wheelchair athletes:

| Supplement | Training | Competition |
|------------------------|------------|-------------|
| Energy Gel | 5 (8%) | 5 (8%) |
| Regi-Shake | 11 (17%) | 17 (26%) |
| Sports drink | 19 (29%) | 5 (8%) |
| Proteine | 7 (11%) | 1 (1.5%) |
| Creatine | 1 (1.5%) | 3 (5%) |
| Caffeine | 3 (5%) | 3 (5%) |
| Mulituitomin | 0.(4.40/.) | 2 (50) |
| Vitamin D | 10 (15%) | 4 (6%) |
| Bicarbonate | 0 | 1 (1.5%) |
| Iron supplement | 6 (9%) | 1 (1.5%) |
| Calcium | 3 (5%) | 0 |
| Carnosine | 0 | 0 |
| Beta-alanine | 0 | 1 (1.5%) |
| Glucose | 0 | 0 |
| L-Carnitine | 0 | 0 |
| Nitrate/Beetroot juice | 1 (1.5%) | 1(1.5%) |
| Prebiotics | 0 | 0 |
| Vitamin C | 4 (6%) | 3 (5%) |
| Arginine | 0 | 0 |
| BCAA | 2 (3%) | 0 |
| Chrome | 0 | 0 |
| Coenzyme | 0 | 0 |
| Cordyceps | 0 | 0 |
| Magnesium | 8 (12%) | 3 (5%) |
| Pyruvaet | 0 | 0 |
| Ribose | 0 | 0 |
| Others | 3 (5%) | 0 |

Take Home Message

- Relative high prevalence of vitamin D insufficiency/deficiency overall (73.2%)
- Very high prevalence during winter months
- Indoor athletes showed a higher prevalence and lower total serum 25[OH]D

 We recommend to check vitamin D status in all athletes during fall and supplement, where an insufficiency or deficiency was detected!!

Thank you for the attention!!



