



SPECIAL INSERT

Children at risk for fractures and osteoporosis because of complex medical needs, medications or mobility differences may need to take calcium supplements and will need more vitamin D than other children.



Parent and child tips for calcium intake:

See the reverse side of this insert for daily calcium recommendations based on age. If these cannot be met through diet intake then a supplement is needed. A daily multi-vitamin does not contain enough calcium to be adequate as a supplement.

- * All calcium supplements should be taken with food or soon after eating. They are absorbed more effectively when there is food in the stomach.

Some tablets are very large and may be difficult to swallow. In this case, try chewable or effervescent (melting) tablets or a liquid form.

- * Avoid supplements that have calcium from "oyster shells", "dolomite", and "bone meal". They are not recommended, as these sources can contain variable amounts of lead. **Lead in a child's body can have negative effects on development.**
- * Calcium supplements will decrease the absorption of iron supplements and should be timed away from these.

(*Reference: Compendium of Pharmaceuticals and Specialties, 2008)

See over please →→→

Why the Vitamin D?



The sun gives us vitamin D through our skin, especially in the summer months.

With the risk of cancer from the UV rays of the sun it is important to use sunscreen, hats and sun glasses. This means that vitamin D from the sun will never be able to help us enough. Instead, because of your child's increased risk for osteoporosis they need to take some vitamin D by mouth.

The type of vitamin D taken by mouth determines how it is absorbed in the body and how well it works. "Cholecalciferol" is the preferred supplement for all children. Use D drops, D-Vi-Sol, Pediavit D or D3 generics. Check the labels to know exactly how many IU (International Units) there are in every drop, milliliter or tablet or ask your pharmacist for help. Because of your child's high risk for osteoporosis we recommend they take in at least the following amounts of calcium and vitamin D per day.

Minimum recommendations for **all** high risk children

Age	Calcium/day	Vitamin D/day
1-3 years	500 mg	1000 IU
4-8 years	800 mg	1000 IU
9-11 years	1300 mg	1000 IU
12-18 years	1300 mg	2000 IU

We are recommending the above vitamin D supplements before doing the blood test for vitamin D called Vit D25(OH or Hydroxy) because of your child's risk for osteoporosis and fractures. After at least 1 month or more on the above vitamin D supplements we need to make sure that your child's Vit D25(OH) level is at its best "winter" level of over 75 nmol/L. Your doctor may increase the dose of vitamin D to ensure a normal Vit D25(OH) level.

For further information or testing please speak with your child's doctor.

All above recommendations are from the Pediatric Bone Health Project Committee, Children's Hospital HSC. July 2010

funded by:

