

High dose of vitamin D does not cut COVID-19 hospital stay

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(HealthDay)—A single high dose of vitamin D₃ does not shorten length

of stay or improve other outcomes among patients hospitalized for COVID-19, according to a study published online Feb. 17 in the *Journal of the American Medical Association*.

Igor H. Murai, Ph.D., from the University of Sao Paulo in Brazil, and colleagues randomly assigned hospitalized patients with moderate-to-severe COVID-19 (June 2 to August 27, 2020) to receive a single oral dose of 200,000 IU of [vitamin D₃](#) (120 patients) or placebo (120 patients).

The researchers found that the median length of stay was not significantly different between the vitamin D₃ and placebo groups (seven days for both; unadjusted hazard ratio for hospital discharge, 1.07; 95 percent confidence interval [CI], 0.82 to 1.39; P = 0.62). The groups were also similar with respect to in-hospital mortality (7.6 versus 5.1 percent; difference, 2.5 percent; 95 percent CI, -4.1 to 9.2 percent; P = 0.43), admission to the [intensive care unit](#) (16.0 versus 21.2 percent; difference, -5.2 percent; 95 percent CI, -15.1 to 4.7 percent; P = 0.30), and need for [mechanical ventilation](#) (7.6 versus 14.4 percent; difference, -6.8 percent; 95 percent CI, -15.1 to 1.2 percent; P = 0.09). There were increases observed in the mean serum levels of 25-hydroxyvitamin D after the single dose of vitamin D₃ versus placebo (44.4 versus 19.8 ng/mL; difference, 24.1 ng/mL; 95 percent CI, 19.5 to 28.7; P

"The findings do not support the use of a high dose of vitamin D₃ for treatment of moderate-to-severe COVID-19," the authors write.

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