

March 9, 2011

The Honorable Wes Keller  
Chair, House Health & Social Services Committee  
Alaska Capitol, Room 427  
Juneau, Alaska 99801



Dear Representative Keller,

On behalf of the more than 12,000 U.S. members of the American Academy of Dermatology Association (AADA), I am writing to point out several inaccuracies contained in HCR 5 regarding vitamin D. HCR 5 misrepresents several findings of the cited scientific literature, and as such endangers the health of Alaska's citizens by overemphasizing the role of vitamin D in disease prevention.

The AADA would not want HCR 5 to be used as grounds to legitimize use of indoor tanning beds as a means for increasing vitamin D levels. In 2010, the Institute of Medicine (IOM) released an exhaustive review of scientific literature and revised its previous recommendations on vitamin D intake. Of particular note, the IOM stated that individuals should not increase their exposure to UV radiation in order to increase their vitamin D levels, because of the risk of developing skin cancer and melanoma.

The AADA would like to point out specific omissions (**noted in bold**) in the cited data in HCR 5, which erroneously make the case for substantial vitamin D supplementation:

- A 2007 article published in the American Journal of Clinical Nutrition reported that a study that compared cancer rates of a group **of post menopausal women** taking 1100 IU of vitamin D supplements in combination with calcium to cancer rates of a group taking a placebo found the risk of developing any cancer after four years was 60 percent lower in the group taking vitamin D supplements (*page 1, line 16 – page 2, lines 1-4*);
- A 2007 article published in the American Journal of Preventative Medicine reported that a study found blood serum levels of vitamin D of at least 33 ng/ml **to be associated with a 50 percent lower risk of colorectal cancer incidence** compared with blood serum levels of vitamin D of less than 12 ng/ml (*page 2, lines 9-12*);
- A 2001 study published in the Lancet found that children in Finland who received 2,000 IU a day of vitamin D for the first year of life 78 percent reduced risk of type 1 diabetes **over the ensuing 31 years** compared to children receiving 400 IU a day of vitamin D (*page 2, lines 23-26*);
- The Centers for Disease Control and Prevention report that influenza vaccine effectiveness varies greatly **based on the age and immunocompetence of the vaccine recipient and the degree of similarity between the viruses in the vaccine and those in circulation** (*page 3, line 22-23*);

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- A 2010 article published in the American Journal of Clinical Nutrition reported that a study of a group of Japanese school children who received **1200 IU** of vitamin D ***had a decreased incidence of influenza compared to children receiving placebo. The reduction was more prominent in specific subgroups of children who had not been taking other vitamin D supplements and who started nursery school after age 3*** (page 3, lines 27-30); **and**
- A 2010 article in The Lancet reported that the risk of multiple sclerosis increases with latitude ~~**and with low blood serum levels of vitamin D**~~ (page 4, lines 3-4).

The key information missing from the above whereas clauses misrepresent the scientific data regarding vitamin D health benefits by neglecting to include critical information on the populations involved in the studies and the intent of the research.

While there are epidemiologic studies that show a statistical relationship between lower vitamin D levels and a higher incidence of some of these diseases, there are also multiple studies that have suggested an inverse association between vitamin D intake and cancer. There is some evidence that too much vitamin D may be harmful. Further, well-designed prospective studies of vitamin D intake and its association to diseases are needed to better assess this ambiguous association.

The AADA recommends vitamin D should be obtained through a healthy diet which includes drinking milk, eating foods which are good sources of vitamin D, and taking vitamin supplements. Intentional exposure to ultraviolet light from indoor tanning beds or the outdoor sun to produce optimum levels of vitamin D is not recommended, as ultraviolet (UV) radiation exposure is associated with increased risk of skin cancer and melanoma.

**FURTHER RESOLVED** that the Alaska State Legislature urges the Department of Health and Social Services to provide vitamin D supplements to the elderly to prevent bone loss, falls, fractures, and other age-related health problems;

Studies have demonstrated that calcium and vitamin D are two essential nutrients, long known for their joint role in bone health. The AADA supports use of vitamin D supplements taken orally (according to the Institute of Medicine recommended dosage) along with calcium for the elderly to prevent bone loss, falls, and fractures. It is critical for overall health, that individuals follow the recommendations of their physician and abide by the guidelines of the Institute of Medicine as there is emerging evidence that too much of these nutrients may be harmful.

**FURTHER RESOLVED** that the Alaska State Legislature urges the Department of Health and Social Services to investigate substituting vitamin D supplementation for influenza vaccination as a less costly method for preventing influenza;

Studies have not conclusively demonstrated that vitamin D supplements will prevent infectious diseases; yet, numerous studies have conclusively demonstrated that vaccines are very effective in preventing infectious diseases. Vigorous vaccination practices and healthy living conditions will lower the rates of preventable infectious diseases and also reduce morbidity and mortality from these preventable diseases.

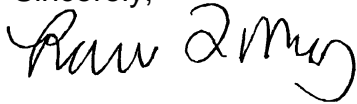
HCR 5 would endanger patients by replacing a proven method of disease prevention with a vitamin supplementation program which has not been tested to protect the general population from infectious disease, such as influenza.

**FURTHER RESOLVED** that the Alaska State Legislature urges the Department of Health and Social Services to provide vitamin D supplements to pregnant women and infants to prevent pregnancy complications, preterm births, type 1 diabetes, and rickets.

The AADA strongly cautions the Alaska Legislature to further review the scientific literature regarding vitamin D, and disease prevention before moving forward with a supplementation program aimed at specific, vulnerable segments of the population. Moreover, it is critical that the public be appropriately educated about vitamin D and be encouraged to consult their physician before taking any vitamin supplements. Lastly, Alaskans should be educated about the dangers of ultraviolet radiation (UV). As stated previously, UV radiation from the sun and indoor tanning beds is associated with a significant increased risk in the development of skin cancer and melanoma. The public should be educated about proper sun protection and urged to avoid UV exposure from indoor tanning devices.

Thank you for the opportunity to provide written comments on HCR 5. For further information, please contact Kathryn Chandra, Assistant Director of State Policy for the AADA, at [kchandra@aad.org](mailto:kchandra@aad.org) or (202) 712-2615.

Sincerely,

A handwritten signature in black ink, appearing to read "Ron L Moy", written in a cursive style.

Ronald L. Moy, MD, FAAD  
President, American Academy of Dermatology Association  
RLM/kgc

CC: Alaska House Health & Social Services Committee Members  
Jim Jordan, Executive Director, Alaska State Medical Association