

For Paul Seaton

Re: HB90

Written testimony re: HB 90

As a long-time practicing physician in Homer, I would like to share my experience on the use of Vitamin D in a full scope "rural" family Practice over the last 7 years. I was first introduced to Vitamin D 8 years ago through the work of John Cannell, MD of the Vitamin D Council and have investigated many of his claims by reading some of the extensive scientific literature that he provides on his website, originating as early as the 1920s. I would also agree with his comments that we should truly consider Vitamin D a hormone, rather than a vitamin, based on its mechanism of action.

Our annual health fair began voluntary testing for Vitamin D several years ago and it was clear that the great majority of those tested were markedly deficient in vitamin D. While reviewing those results, I could correlate reported self-supplementation with Vitamin D with those results and it became clear that those that were supplementing at a level of 5000 IU a day were very likely to have an adequate level, with a declining dose dependent correlation. At that time we began to recommend that level of supplementation to all patients during their annual visits. In the years since, most patients have been very appreciative of that advice with anecdotal reports that they feel better, are less depressed and have had less respiratory infections in that time. From a personal standpoint, at the same level of supplementation, despite my exposure to every illness in the community, I have had much less lost time to illness than in previous years. This has been independently confirmed by a community Health Aide in Northwest Alaska who has reported a marked decrease in community illness with village supplementation of Vitamin D.

Our next step was to begin supplementation of Vitamin D to all our pregnant patients at a level of 5000 units a day. We believe in this so strongly, given all the new clinical associations of beneficial neonatal outcomes, we provide the Vitamin D for free to our patients. I can remember, years ago, being taught that Vitamin D was not available in breast milk and that babies could get all the Vitamin D they needed from 20 minutes of exposure of their cheeks to the sun each day. It now turns out that the reason there is no Vitamin D in breast milk is because most women are severely deficient in their levels, and that babies need more than just Alaskan sun exposure to get to the appropriate new levels, with the subsequent benefits alluded to above. We are now asking all parents to supplement their children of any age.

As this information I have presented is all truly anecdotal, I very much welcome the chance to see the results of HB 90 and actually quantitate the Vitamin D levels in our newborns. Assuming that the suppositions we are making about Vitamin D will continue to be borne out, and they currently seem to

be, the administration of Vitamin D to our children, at appropriate levels could well turn out to be one of the most critical and cost effective interventions that we can make in this state.

William H Bell MD

Homer, AK.