

CADTH Reference List

Vitamin D Supplementation for the Prevention and/or Treatment of COVID-19 in Residents of Long-Term Care Facilities

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Authors: Shannon Hill Hannah Loshak

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Key Messages

- One non-randomized study was identified regarding the clinical effectiveness of vitamin
 D supplementation for the prevention and/or treatment of coronavirus disease in elderly
 patients residing in long-term care facilities.
- No evidence-based guidelines were identified regarding vitamin D supplementation for the prevention and/or treatment of coronavirus disease in elderly patients residing in long-term care facilities

Research Questions

- 1. What is the clinical effectiveness of vitamin D supplementation for the prevention and/ or treatment of coronavirus disease (COVID-19) in elderly patients residing in long-term care facilities?
- 2. What are the evidence-based guidelines regarding vitamin D supplementation for the prevention and/or treatment of COVID-19 in elderly patients residing in long-term care facilities?

Methods

Literature Search Methods

A limited literature search was conducted by an information specialist on key resources including MEDLINE and Embase via OVID, the Cochrane Database of Systematic Reviews, the international HTA database, the websites of Canadian and major international health technology agencies, as well as a focused internet search. The search strategy comprised both controlled vocabulary, such as the National Library of Medicine's MeSH (Medical Subject Headings), and keywords. The main search concepts were vitamin D, COVID-19, and long-term care or older adults. No filters were applied to limit the retrieval by study type. Conference abstracts were excluded. When possible, retrieval was limited to the human population. The search was also limited to English-language documents published between January 1, 2019, and June 6, 2021. Internet links were provided if available.

Selection Criteria and Summary Methods

One reviewer screened literature search results (titles and abstracts) and selected publications according to the inclusion criteria presented in Table 1. Full texts of study publications were not reviewed. The Overall Summary of Findings was based on information available in the abstracts of selected publications. Open-access, full-text versions of evidence-based guidelines were reviewed when abstracts were not available, and relevant recommendations were summarized.



Table 1: Selection Criteria

Criteria	Description
Population	Geriatric patients (i.e., age 65 and older) residing in long-term care facilities
Intervention	Vitamin D supplementation in any formulation and dose, with or without calcium supplementation
Comparator	Q1: No vitamin D supplementation; different dosing of vitamin D Q2: Not applicable
Outcomes	Q1: Effectiveness (e.g., COVID-19-related symptom severity, requirement for invasive mechanical ventilation, mortality, rates of transmission); safety (e.g., adverse events or adverse health outcomes related to supplementation)
	Q2: Recommendations regarding the prevention and/or treatment of COVID-19 (e.g., optimal use of vitamin D supplementation; optimal vitamin D supplementation; optimal dosing; who should and should not be supplemented)
Study designs	Health technology assessments, systematic reviews, randomized controlled studies, non-randomized studies, evidence-based guidelines

Results

One non-randomized study was identified regarding the clinical effectiveness of vitamin D supplementation for the prevention and/or treatment of COVID-19 in elderly patients residing in long-term care facilities. No health technology assessments, systematic reviews, randomized controlled trials, or evidence-based guidelines were identified.

Additional references of potential interest that did not meet the inclusion criteria are provided in Appendix 1.

Overall Summary of Findings

One non-randomized study was identified in the literature.¹ The purpose of this study was to determine if vitamin D3 supplementation taken before or during COVID-19 was effective in improving survival outcomes among elderly individuals in a nursing-home setting who contracted COVID-19.¹ Individuals with COVID-19 who received vitamin D3 supplementation in the month preceding or during COVID-19 were compared with those who did not receive supplementation.¹ The authors found that vitamin D3 supplementation before or during COVID-19 infection was associated with less severe symptoms and a better survival rate in elderly individuals.¹ No evidence-based guidelines were identified regarding vitamin D supplementation for the prevention and/or treatment of COVID-19 in elderly patients residing in long-term care facilities; therefore, no summary can be provided.



References

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-Analyses

No literature identified.

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies

 Annweiler C, Hanotte B, Grandin de l'Eprevier C, Sabatier JM, Lafaie L, Celarier T. Vitamin D and survival in COVID-19 patients: A quasi-experimental study. J Steroid Biochem Mol Biol. 2020 11;204:105771. PubMed

Guidelines and Recommendations

No literature identified.



Appendix 1: References of Potential Interest

Systematic Reviews and Meta-Analyses

Alternative Population: Geriatric Patients Residing in Long-Term Care Facilities Not Specified

 Drame M, Cofais C, Hentzien M, et al. Relation between Vitamin D and COVID-19 in Aged People: A Systematic Review. Nutrients. 2021 Apr 17;13(4):17. PubMed

Non-Randomized Studies

Alternative Population: Long-Term Care Facility Not Specified

 Annweiler G, Corvaisier M, Gautier J, et al. Vitamin D Supplementation Associated to Better Survival in Hospitalized Frail Elderly COVID-19 Patients: The GERIA-COVID Quasi-Experimental Study. Nutrients. 2020 Nov 02;12(11):02. PubMed

Guidelines and Recommendations

Expert Opinion Position Statement

 Tarazona-Santabalbina FJ, Cuadra L, Cancio JM, et al. VitaminD supplementation for the prevention and treatment of COVID-19: a position statement from the Spanish Society of Geriatrics and Gerontology. Rev Esp Geriatr Gerontol. 2021 May-Jun;56(3):177-182. PubMed