

## ***Disease Pattern in India*** **Vitamin D 'neurosis' among General Practitioners**

**OP Kapoor**

**T**he blood test for Vitamin D level is a very costly (Rs. 2900/-), but it is not necessary to ask for it in normal people, who have no kidney disease. Vitamin D3 is the test usually asked to be done and costs only Rs. 1040/-. My observation is that many GPs have started asking for this test, and make a diagnosis of osteomalacia based on this report. In my opinion this is wrong. I say so, because in India, among the normal population in different parts of the country, in spite of good diet and exposure to enough sunlight, the levels of Vitamin D have been found to be low. I have seen so many patients with backache, where the Vitamin D level is low, but the serum alkaline phosphatase is absolutely normal.

Ex. Hon. Physician, Jaslok Hospital and Bombay Hospital, Mumbai. Ex. Hon. Prof. of Medicine, Grant Medical College and JJ Hospital, Mumbai 400 008.

That brings me to the next question, how will you know whether backache of the patient is due to osteomalacia or osteoarthritis (osteoporosis will cause backache only if patient gets fracture of vertebra). Although I may prescribe Vitamin D in such a patient (with normal alkaline phosphatase), I would not attribute backache to lack of Vitamin D, and rather look for some other causes like osteoarthritis, chronic disc disease or some other disease. Also, other bone pain and muscle weakness, especially of pelvic girdle muscles, will help in the diagnosis of Vitamin D deficiency. Blood Calcium levels and P.T.H levels may also help.

After knowing about levels of Vitamin D in normal Indian population, in future, it will be better to ask for serum alkaline phosphatase rather than Vitamin D level to diagnose whether the backache is due to osteomalacia.

### **TISSUE-ENGINEERED AIRWAY REPLACEMENT**

The patient had had bronchial malacia caused by tuberculous bronchitis. However, airway replacement as an alternative to lengthy primary tracheal anastomosis has attracted immense attention from researchers.

**Toshihiko Sato, Tatsuo Nakamura; The Lancet; 2008; 372 : 2003-4.**