

To :
Adult Care Home Providers
Copy to
Primary Care leads
NHS Directors of Pharmacy
Community Pharmacy Scotland
Care Inspectorate

21 January 2021

Dear Colleagues

Vitamin D and care home residents

I am writing to provide advice on vitamin D supplements for care home residents. You will be aware that it is generally recommended that everyone in Scotland should consider taking a daily supplement of 10 micrograms of vitamin D to help keep bones and muscles healthy. This is particularly important over the winter months.

As you will know, our main source of vitamin D is sunlight. In Scotland, we only get enough of the right kind of sunlight for our bodies to make vitamin D during roughly half the year (April to September). From October to March, we rely on food and supplements to get enough vitamin D. Only a small number of foods contain vitamin D, such as oily fish, red meat and egg yolks, so it is difficult to get enough from food alone

Some people are at higher risk of vitamin D deficiency and we recommend that they take a daily supplement. This includes pregnant and breastfeeding women, children under 5 years old, people who have low or no exposure to the sun and people from minority ethnic groups with dark skin such as those of African, African-Caribbean and South Asian origin as they require more sun exposure to make as much vitamin D.

Care home residents are one such group that could have little or no exposure to the sun and so may benefit from vitamin D supplements. Following Realistic Medicine principles, residents should therefore be assessed for vitamin D supplements (as per local formulary) as part of their regular routine clinical review. It is important that decisions on whether to prescribe vitamin D for care home residents, including those who are shielded, should be taken on an individual basis. This is to ensure that the supplements would be of benefit and to check the need for co-prescribing with calcium as well as for other contraindications or side effects. There are side effects when levels of vitamin D become too high. These include digestive problems such as nausea, poor appetite, stomach pain, constipation, and diarrhoea.

An offer of vitamin D supplements was attached to a recent letter sent on my behalf to everyone on the shielding list, including residents in care homes. The approach outlined above will ensure that the provision of vitamin D is considered for all care home residents,

including those who are on the shielding list, through their regular, routine clinical reviews, and prescribed where it is considered to be of benefit.

If you believe that some of your residents may benefit from vitamin D or have any questions about vitamin D, please discuss this with clinical colleagues as part of your routine communication arrangements.

Further information on vitamin D can be found in [Eating and Drinking Well in Care: Good Practice Guidance for Older People](#) which provides information on older people's dietary needs and related food and fluid requirements.

Yours sincerely



DR GREGOR SMITH
Chief Medical Officer