

For follow-up of
Vitamin D deficiency treatment 
25(OH) Vitamin D test





What is vitamin D deficiency?

Vitamin D deficiency is a common condition that occurs when the body does not have enough vitamin D. This can happen due to a variety of reasons, including not getting enough sunlight, not eating enough foods that contain vitamin D, or having a medical condition that affects the body's ability to absorb or produce vitamin D. Symptoms of vitamin D deficiency can include fatigue, muscle weakness, and bone pain.

Vitamin D is essential for maintaining healthy bones and teeth. It also plays a role in regulating the immune system and reducing inflammation. People who are at risk of vitamin D deficiency include those who live in northern latitudes, those who spend a lot of time indoors, and those who have certain medical conditions.

Vitamin D deficiency can lead to a number of health problems, including osteoporosis, osteomalacia, and rickets. It can also increase the risk of heart disease, depression, and certain types of cancer. If you suspect you may have a vitamin D deficiency, it is important to see your doctor for a blood test and to discuss treatment options.

Vitamin D levels in the body can fluctuate seasonally and depending on the individual's condition, even among healthy individuals, it is important to monitor vitamin D levels at least once a year to maintain adequate vitamin D concentrations in the body.

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Vitamin D deficiency and other associated diseases

Vitamin D deficiency is associated with a number of other health conditions, including cardiovascular disease, depression, and certain types of cancer. Higher vitamin D concentrations are associated with a lower incidence of cardiovascular disease. Given that vitamin D functions as a hormone that regulates cell growth, it has been found to be linked to various tumors, including breast and colorectal cancer.

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The relationship between Alzheimer's disease and vitamin D₃ insufficiency has also been suggested, and reports indicate that vitamin D₃ insufficiency is associated with the onset and exacerbation of immune-related disorders (e.g., multiple sclerosis, allergic rhinitis, and atopic dermatitis).

Reimbursement criteria for vitamin D testing

[MOHW bulletin 2022-204 (practice), enforced Sep 1, 2022]

The reimbursement criteria for Nu490Da vitamin- [high-quality immunoassay]-D2, D3, total vitamin D, 25-OH-Vitamin D(total), Nu490Da vitamin -[High-quality LC-MS]- D2, D3 test are as follows:

A. Eligibility for reimbursement

- 1) Gastrointestinal disorders and malabsorption conditions that can cause vitamin D malabsorption
- 2) Current use of antiepileptic drugs (such as phenytoin, phenobarbital), tuberculosis medications, antiretroviral agents, antifungal drugs (ketoconazole), and lipid-lowering agents (cholestyramine)
- 3) Liver failure, cirrhosis
- 4) Chronic kidney disease
- 5) Malignant tumors
- 6) Rickets
- 7) After the diagnosis of osteoporosis (including cases requiring differentiation of secondary osteoporosis causes)
- 8) Osteomalacia
- 9) Burns involving more than 40% of the body surface area
- 10) Parathyroid dysfunction (hypo, hyper)
- 11) Calcium metabolism disorders (hypercalcemia, hypocalcemia, hypercalciuria, hypophosphatemia)

B. Reimbursement calculation

- 1) Only one test for D2, D3, total vitamin D, and 25-OH-Vitamin D(total) is eligible for reimbursement.
- 2) Number of reimbursed tests:
 - a) 1 test for diagnosis before drug therapy, 1 test for treatment response evaluation 3-6 months into drug therapy
 - b) 2 times a year for follow-up of continuous drug therapy

C. Other screening tests for Nu490Da vitamin- [High-quality LC-MS] are not reimbursed.

Test information

Code No.	Test Name	Specimen	Schedule	Method
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Reference

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