

'REDUCING RISK OF FALLS AND FRACTURES IN OLD AGE PSYCHIATRY PATIENTS: ARE WE CHECKING VITAMIN D?'



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BACKGROUND

- Vitamin D is essential in maintaining bone integrity and function of the neuromuscular system.
- Deficiency is a significant factor in metabolic bone disease and is linked to an increased risk of falls and fractures .
- The impact of this on morbidity and mortality in the elderly population contributes significantly to healthcare costs and overall burden
- NICE advises treating vitamin D deficiency (<25nmol/L) and vitamin D insufficiency (25-50nmol/L with additional risk factors).
- Screening for medical comorbidities in psychiatric patients is well practiced; however vitamin D is not always routinely assessed on old age psychiatry wards.

AIM

- To assess how many of our patients had vitamin D levels checked on admission and the subsequent management of those with vitamin D insufficiency or deficiency.

METHODS

- Retrospective study of patients admitted between June 2019 and January 2020 to Garnet Ward, Highgate Mental Health Centre
- Patient demographics and blood results were recorded using hospital software (Carenotes, Sunquest ICE).
- Patients were stratified by falls risk: low (no previous falls, no co-morbidities increasing falls risk), medium (one previous fall, no co-morbidities) and high (≥ 1 previous fall, ≥ 1 co-morbidity).
- Vitamin D levels were classified as deficient or insufficient based on NICE guidelines.

RESULTS

- **44 patients** were admitted; **25 female**, with an **age range of 56-95**. 26 patients (59%) were over the age of 70, 7 patients (16%) over the age of 80
- **19 were high falls risk**, 10 medium and 15 low.
- **19 patients (43.2%) had vitamin D checked** on admission. The range was 13-131 nmol/L.
- **9 patients (47%) had vitamin D < 25**, 6 (32%) between 25-50 and 4 (21%) > 50.
- Everyone with a vitamin D of < 25 or 25-50 was prescribed **colecalciferol** (loading dose of 40000 units OD for a week and then maintenance dose of between 800 and 1000 units OD)

Fig. 1. Falls risk

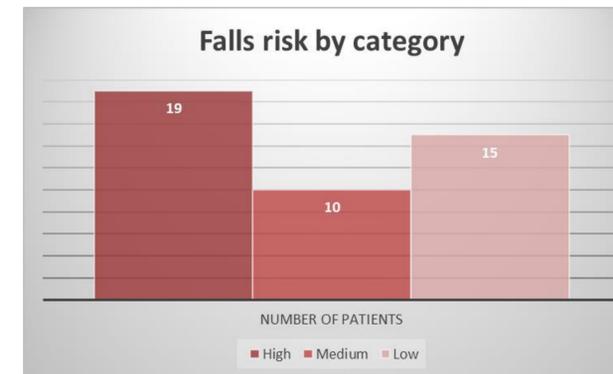
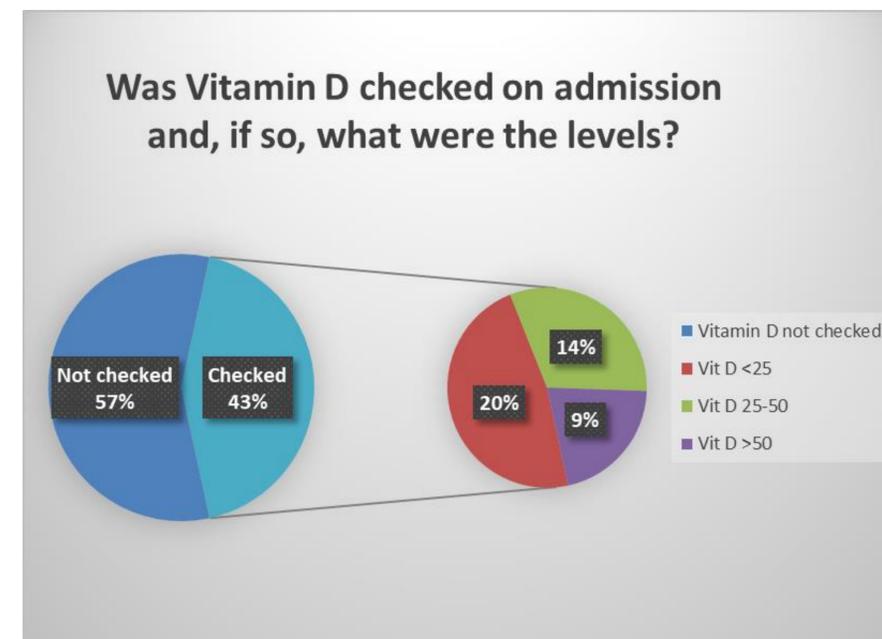


Fig 2. Vitamin D levels



CONCLUSION

- Our patient demographic is elderly and co-morbid, with a majority at high falls risk. Only 43% of patients had Vitamin D checked on admission.
- Where it was checked, and was low, colecalciferol was prescribed.

We advise including Vitamin D as part of routine admission bloods for every patient admitted to an old age psychiatry ward. Further investigations could include a routine FRAX score.