Primary Care Prevention of Falls and Fractures in the elderly by Annual Vitamin D Supplementation

Submission date	Recruitment status No longer recruiting	Prospectively registered		
19/08/2005		☐ Protocol		
Registration date 13/09/2005	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited 09/02/2016	Condition category Injury, Occupational Diseases, Poisoning	[] Individual participant data		

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

NHMRC 251682

Study information

Scientific Title

Primary Care Prevention of Falls and Fractures in the elderly by Annual Vitamin D Supplementation

Acronym

Vital D Study

Study objectives

That an annual high-dose (500,000 IU) of 25-hydroxyvitamin D will reduce the rate of fractures and falls compared to placebo in older women.

Ethics approval required

Old ethics approval format

Ethics approval(s)

- 1. Barwon Health Human Research Ethics Committee (ref: 02/60)
- 2. University of Melbourne Human Research Ethics Committee (HREC) (ref: 0200700)

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Not specified

Study type(s)

Prevention

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Fractures, osteoporosis and falls.

Interventions

Current interventions as of 11/11/2009: 500,000 IU cholecalciferol or placebo

Previous interventions:

500,000 IU ergocalciferol or placebo annually

Intervention Type

Supplement

Phase

Not Specified

Drug/device/biological/vaccine name(s)

25-hydroxyvitamin D

Primary outcome measure

Reduction of fracture rate in active arm compared to placebo.

Secondary outcome measures

- 1. Reduction in rate of falls
- 2. Improvement in mental well-being
- 3. Duration of independent residency
- 4. Reduction in total healthcare utilisation (added 11/11/2009)

Substudy group are tested for various parameters of muscle strength, balance, gait and mobility.

Overall study start date

01/04/2003

Completion date

30/09/2008

Eligibility

Key inclusion criteria

- 1. Female
- 2. Over 70 years old
- 3. High risk of falls or fracture

Participant type(s)

Patient

Age group

Senior

Sex

Female

Target number of participants

2300

Key exclusion criteria

- 1. Hypercalcemia
- 2. Bone-trophic medications
- 3. Renal disease

Date of first enrolment

Date of final enrolment 30/09/2008

Locations

Countries of recruitment

Australia

Study participating centre

Department of Clinical and Biomedical Sciences

Geelong

Australia
3220

Sponsor information

Organisation

The University of Melbourne (Australia)

Sponsor details

Grattan Street Parkville Australia 3010

Sponsor type

University/education

Website

http://www.unimelb.edu.au

ROR

https://ror.org/01ej9dk98

Funder(s)

Funder type

Research council

Funder Name

National Health and Medical Research Council (NHMRC) (Australia) (refs: 251682, 509109 and 509310)

Alternative Name(s)

NHMRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Australia

Funder Name

Commonwealth Department of Health and Ageing RC (Australia) (ref: 100505 8)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results of recruitment strategies	25/11/2009		Yes	No
Results article	main results	12/05/2010		Yes	No
Results article	mental well-being results	01/05/2011		Yes	No
Results article	results	01/07/2014		Yes	No
Results article	results	01/03/2015		Yes	No