

JOURNAL OF IMMUNE DISORDERS AND THERAPY

COVID-19 and Vitamin D (Co-VIVID Study): A meta-analysis of randomized controlled trials

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ABSTRACT

Background: Vitamin D levels have been reported to be associated with COVID-19 susceptibility, severity and mortality events. We performed a metaanalysis of randomized controlled trials (RCTs) to evaluate the use of vitamin D intervention on COVID-19 outcomes.

Methods: Literature search was conducted using PubMed, Cochrane library, and ClinicalTrials.gov databases (latest search on August 5, 2021). We included RCTs reporting the use of vitamin D intervention to control/placebo group in COVID-19. Two independent researchers did literature search, abstracted data, and the risk of bias assessment.

Results: A total of 6 RCTs with 551 COVID-19 patients were included. The overall collective evidence pooling all the outcomesacross all RCTs indicated the beneficial use of vitamin D intervention in COVID-19 (relative risk, RR = 0.60, 95% CI 0.40 to 0.92, Z=2.33, p=0.02, I2 = 48%). However, no statistical significance was observed for individual outcomes of ICU care (RR

 $=0.11,\ 95\%\ CI\ 0.15\ to\ 1.30,\ Z=1.48,\ p=0.14,\ I2=66\%)\ and\ mortality\ (RR=0.78,\ 95\%\ CI\ 0.25\ to\ 2.40,\ Z=0.66,\ p=0.02,\ I2=0.02,\ I3=0.02,\ I3$

33%), though decreased rates were noted. The rates of RT-CR positivity was significantly decreased in the intervention group ascompared to the non-vitamin D groups (RR = 0.46, 95% CI 0.24 to 0.89, Z=2.31, p=0.02, 12 = 0%).

Conclusion: COVID-19 patients supplemented with vitamin D are more likely to demonstrate fewer rates of ICU admission, mortality events and RT-PCR positivity. Completion of ongoing trials is largely needed to precisely establish the association between vitamin D use and COVID-19 mortality.

3rd European Congress on Immunology, Webinar | September 29-30, 2021