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Analysis of the knowledge our patients have on calcium and vitamin D

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Background & Aim: To analyse the knowledge patients attending medical centres have regarding calcium and vitamin D, and how these can be obtained.

Method: Descriptive, transversal study using questionnaires completed by patients attending the rural medical centre in Lamasón, between June and September 2015. Social and demographic variables related to calcium, vitamin D, and how these are obtained, were collected. Averages and standard deviation was used for quantitative variables, and percentages for qualitative values.

Results: 50 subjects were analysed, with an average age of 62.16 ± 17.8 years, mainly female (56%). With regards to calcium, 100% knew of its relationship with bones. 100% thought it was obtained through food; 26.5% through sun exposure; and 16.3% only through medicines. With regards to foods containing calcium, 100% identified dairy products, 24% identified fish (sardines, anchovies), 2% said fruit (cherries, oranges), 6% said vegetables and pulses (cabbage) and 18% said nuts (hazelnuts, almonds). With regards to vitamin D, 32.4% said it had an influence on bones. 23.5% said it was obtained through food; 23.5% through exposure to sunlight, and 17.6% said it could only be obtained through medicines. Analysis by gender led to findings that say the only significant difference between the two is in the way calcium and vitamin D are obtained through sunlight and fish calcium.

Conclusions: The population clearly identified the relationship between calcium and vitamin D with bones, but not the way they are obtained. There are important lapses in knowledge such as whether calcium is acquired through sunlight exposure or just through medicines. The patients are also not clear on the foods that are high in calcium, with the exception of dairy products. People should receive information on how they are obtained, as correcting their diet and lifestyle is a good way to prevent osteoporosis.