geographic				notable worldwide uitemie D events	COVID-19 prophylaxis recommendations (25OHD serum;		month
area of support	t work	English title (and link to English translation)	authors/supporters	involved	D3 protocol)	COVID-19 treatment recommendations (D3 or calcifediol)	released
		ups on the order of 100+ experts):					
		"Beneficial effect of vitamin D in Covid: what are the data?	73 French authors, with the support of 6 French national scientific societies: the French Association for the Fight against Rheumatism (AFLAR), the French Society of Endocrinology (SFE), the French Society of Geristrics and Gerontology (SFG), the				
France	French review in La Revue du Praticien	Ensuring satisfactory vitamin D status in the general population is particularly important in the context of Covid-19"	French Pediatric Society (SFP), the French Society of Pediatric Endocrinology and Diabetology (SFEDP), and the Francophone Society of Nephrology, Dialysis and Transplantation (SFNDT).	Cedric Annweiler	20-60ng/ml; 1200 IU/day [cites Cashman 2018 on dose response]. 2x for obesity. Also emphasizes the safety of 2000-4000 IU/day.	100,000 IU upon COVID-19 diagnosis, repeated a week later (2x that for obese or high-risk of severe case patients).	Jan 2021
international	International VitaminDforAll open letter	"Over 200 Scientists & Doctors Call For Increased Vitamin D Use To Combat COVID-19 Scientific evidence indicates vitamin D reduces infections & deaths"	215 signatories (as of Jan 25, 2021) from 33 countries, almost all medical doctors & PhDs, including over 100 professors, also including the leaders of 4 Vitamin D non-profits: the Vitamin D Society, GrassrootsHealth, the European Vitamin D Association (EVIDAS), and VitaminDAssociation.org.	Michael Holick (#1), Martin Hewison, William Grant, Cedric Annweller, Jean-Claude Souberbielle, Bruce Hollis, Carol Wagner, Reinhold Vieth	30ng/ml; 10,000 IU/day for 2-3 weeks then 2000-4000 IU/day folies Veugelers & Exwaru 2014 and Heaney et al 2015 on dose response). More (eg 2x) for excess weight, dark skin, or care homes. 75% of signatories recommend 4000 IU/day, 25% 2000 IU/day, 25% 2000 IV/day.	Test and treat deficiency, possibly with protocol of either Castillo et al 2020 (calcifediol 0.532 mg on day 1, 0.266 mg or day 3, 7, and then once a week), or Rastogi et al 2020 (60,001 IU/day for 7 days to achieves 50	n 0 Dec 2020
	CovidConsensus.org's		Approximately 100 authors of published papers on vitamin D & Covid polled anonymously by an LSE project. (100 = 865 polled * 16% response rate * 73% of responders fully or mostly agreed with the above <u>Vitamin/DforAll</u> org open letter.) See				
international	Vitamin D results	n/a	also this write-up about the results.		<implicitly, above="" as="" directly="" row="" same=""></implicitly,>	<implicitly, above="" as="" directly="" row="" same=""></implicitly,>	Feb 2022
Italy	Italian Academy of Medicine of Turin letter	"Vitamin D in the prevention and treatment of COVID-19: new evidence"	156 Italian professors & physicians (as of Feb 26, 2021).		40ng/ml; up to 4000 IU/day.	Protocol of either Annweiller et al 2020 (80,000 IU), Castillo et al 2020 (calcifediol 0.532 mg on day 1, 0.266 mg on day 3, 7, and then once a week), or Rastogi et al 2020 (60,000 IU/day for 7 days to achieve 50ng/mt.).	Dec 2020
international	Grant et al spring. Nutrients paper	"Evidence that Vitamin D Supplementation Could Reduce Risk of Influenza and COVID-19 Infections and Deaths"	7 authors, also cited by 1835 other scholarly works according to Google Scholar (as of Sep 1, 2022) with thousands of authors in total.	William Grant	40-60ng/ml; 10,000 IU/day for 2-3 weeks then 5000 IU/day.	"For treatment [], higher vitamin D3 doses might be useful."	Apr 2020
Notable authori	itative groups (groups on I						
Spain	Spanish Society of Geriatrics and Gerontology position statement	"VitaminD supplementation for the prevention and treatment of COVID-19: a position statement from the Spanish Society of Geriatrics and Gerontology"	9 Spanish authors			1000-16,000 IU/day D3 or calcifediol depending on starting serum level. (See table in paper.)	Feb 2021
British Isles	Griffin et al Royal Society evidence synthesis	"Vitamin D and COVID-19: evidence and recommendations for supplementation"	8 authors (7 from UK).	Martin Hewison	50nmol/L (20ng/ml); 4000 IU/day for 4 weeks (in those likely deficient) then 800-1000 IU/day [cites Zitterman 2014 on dose response]. Also emphasizes the safety of 4000 IU/day.	Hosptial: test or supplement.	Dec 2020
USA	US FLCCC Alliance I- MASK+ & MATH+ protocols		10 US physicians, including Paul Marik and Pierre Kory.		1000-3000 IU/day.	Outpatient: 4000 IU/day. Hospital: Calcifediol preferred: 0.5 mg day 1, then 0.2 mg day 2 & then weekly. Otherwise 20,000–60,000 IU ther 20,000 IU weekly (~= 2860 IU/day).	Nov 2020 (I- MASK+),
Ireland	Irish Covit-D Consortium position statement in Nature Public Health Emergency Collection	"Vitamin D and SARS-CoV-2 infection—evolution of evidence supporting clinical practice and policy development A position statement from the Covit-D Consortium"	9 Irish authors from across "(reland's leading universities".		50nmol/L (20ng/ml) & widespread testing both to identify deficiency and confirm 50nmol/L achievement; 800-1000 IU/day (clies Zitterman 2014 on dose response; also clies others such as Cashman et al 2008 but seems to go with the lower dose from Zitterman]. More for overweight, dark skin, old age. Also emphasizes the safety of 4000 IU/day.		Nov 2020
Ireland	2022 review paper from same group as above	"Understanding a Low Vitamin D State in the Context of COVID-19"	2022 update from highly overlapping set of 9 Irish authors as row above.		800-1000 IU/day; 1500-2000 IU/day for vulnerable groups (those with obesity, darker skin, diabetes mellitus and older adults) with monitoring		Mar 2022
France	French National Academy of Medicine statement	"Vitamin D and Covid-19"	French National Academics of Medicine		Reiterates recommendation for supplementation.	Age 60+: Test and treat with 50,000-100,000 IU loading dose if deficient. Age <60: 800-1000 IU/day.	May 2020
	uals (on the order of 1 exp						.,
	Ames, Grant, Willett	*Does the High Prevalence of Vitamin D					
USA	racial disparities Nutrients paper	Deficiency in African Americans Contribute to Health Disparities?"	Walter Willett, Harvard School of Public Health, 2nd most cited author in all of clinical	William Grant	75nmol/L (30ng/ml). Risks of up to 4000 IU/day are minimal		Feb 2021
	Richard Carmona	"Op-Ed: Don't Let COVID-19 Patients Die With Vitamin D Deficiency— We can't wait for perfect	medicine accrording to Wikipedia.	William Grant	Identify and eradicate deficiency with early & aggressive supplementation; also emphasized the safety of 4000 IU		
USA	MedPage Today Op-Ed Anthony Fauci Interview with Jennifer	evidence*	Richard Carmona, former US Surgeon General. Anthony Fauci, US NIH National Institute of Allergy & Infectious Diseases		and the lack of adverse effects of 10,000 IU. Vitamin D deficiency does impact infection risk and he		Jan 2021
USA	Garner JoAnn Manson		Director and Chief Medical Advisor to the President.		takes it.		Sep 2020
USA	summer op-ed in Elsevier Public Health Emergency Collection	"Commentary. Eliminating vitamin D deficiency during the COVID-19 pandemic: A call to action"	JoAnn Manson, Harvard Medical School & Harvard School of Public Health, top global vitamin D researcher.	JoAnn Manson (#2)	12ng/ml; 1000-2000 IU/day during the pandemic.		Jul 2020
USA	Tom Frieden spring Fox News interview	-	Tom Frieden, former US CDC Director.	. ,	Vitamin D might help. 800-2000 IU/day probably safe. 1000 IU/day reasonable. Get sun [but note that was said in March].		Mar 2020
sumamries:							
big internationa	al, Italian, & French groups	i, notable individuals	several hundred credible scientific academic and medical supporters, and thousands when factoring in authors citing Grant et al. (even if only a portion support its recommendations)	9 notable world renowned vitamin D experts, including #1 & #2	 Clear consensus that vitamni D deficiency is important and must be fixed urgently, and without waiting for more studies. 		
			acknowledgment of importance from former US surgeon general, former US CDC director, & current NIAID director, plus top nutrition and clinical medicine researchers		Almost unanimous agreement to achieve at least 20ng/ml serum levels.		
					Clear consensus for intakes above current government guidelines, with a range from 800-5000 IU/day, and many suggesting more for certain groups. Clear consensus that 4000 IU/day is safe.		