

## Editorial

## The Existing Facts Regarding the Level of Vitamin D in Pregnant Women in Indonesia

Noroyono Wibowo

Vitamin D serves not only to control and maintain the regulation of essential minerals like calcium and phosphorous in bones but also plays a crucial role in various functions throughout the human body. It is involved in regulating inflammation, free radicals, the immune system, cell proliferation, differentiation, and the prevention of various diseases such as infections, autoimmune disorders, cancer, and metabolic conditions like diabetes and thyroid issues.

Within the field of obstetrics and gynecology, vitamin D is known to play a significant role in conditions like PCO (polycystic ovary), Endometriosis, Ovarian Cancer, Cervical Cancer, Preterm birth, preeclampsia, Gestational Diabetes Mellitus (GDM), and Intrauterine Growth Restriction (IUGR). In essence, vitamin D is a key player in reproductive health. Unfortunately, existing research shows that both pregnant and non-pregnant women in Indonesia generally have insufficient levels of vitamin D, even though comprehensive studies like riskedass have not been conducted yet.

In pregnant women with early-onset preeclampsia, fetal growth delays, or preterm births (both early and late onset), their vitamin D levels are lower compared to those of normal pregnant women.

The human body can naturally produce vitamin D with the help of sunlight, and Indonesia, being located near the equator, receives abundant sunlight. If low vitamin D levels are detected, the possible reasons could include; Pregnant women having insufficient exposure to sunlight at specific times, inadequate intake of pro-vitamin D nutrients, the presence of genetic variations in enzymes responsible for providing active vitamin D, or Vitamin D requirements surpassing intake and production. Research needs to be conducted on these four conditions. However, given Indonesia's vast geographical area, sampling from various regions is necessary, requiring significant efforts and funding.

The initial step involves collecting and reviewing all existing research on vitamin D during pregnancy in Indonesia. Subsequently, a research framework focusing on vitamin D (and nutrients in general) during pregnancy, including preparations up to BioBank level, should be developed. This research framework can then be proposed to Bapenas (National Development Planning Agency).

### REFERENCES

1. Umar M, Sastry KS, Chouchane AI. Role of Vitamin D Beyond the Skeletal Function: A Review of the Molecular and Clinical Studies. *Int J Mol Sci.* 2018 ;19(6):1618. doi: 10.3390/ijms19061618.
2. Pludowski P, Grant WB, Konstantynowicz J, Holick MF. Editorial: Classic and Pleiotropic Actions of Vitamin D. *Front Endocrinol (Lausanne).* 2019 10:341. doi: 10.3389/fendo.2019.00341.
3. Yan L, Gu Y, Luan T, Miao M, Jiang L, Liu Y, Li P, Zeng X. Associations between serum vitamin D and the risk of female reproductive tumors: A meta-analysis with trial sequential analysis. *Medicine (Baltimore).* 2018 ;97(15):e0360. doi: 10.1097/MD.00000000000010360.
4. Cermisoni GC, Alteri A, Corti L, Rabellotti E, Papaleo E, Viganò P, Sanchez AM. Vitamin D and Endometrium: A Systematic Review of a Neglected Area of Research. *Int J Mol Sci.* 2018 19(8):2320. doi: 10.3390/ijms19082320.
5. ovnik A, Dovnik NF. Vitamin D and Ovarian Cancer: Systematic Review of the Literature with a Focus on Molecular Mechanisms. *Cells.* 2020 Feb ;9(2):335. doi: 10.3390/cells9020335.
6. Avila E, Noriega-Mejía BJ, González-Macías J, Cortes-Hernández U, García-Quiroz J, García-Becerra R, Díaz L. The Preventive Role of the Vitamin D Endocrine System in Cervical Cancer. *Int J Mol Sci.* 2023 ;24(10):8665. doi: 10.3390/ijms24108665.
7. Deuster E, Jeschke U, Ye Y, Mahner S, Czogalla B. Vitamin D and VDR in Gynecological Cancers-A Systematic Review. *Int J Mol Sci.* 2017 ;18(11):2328. doi: 10.3390/ijms18112328.
8. Askandar B, Ekaputra V, Iskandar T. Comparison of VDR Expression and Blood Vitamin D 1.25 (OH)<sub>2</sub> Level between Cervical Cancer Patients and Normal Women. *Indones J Cancer.* 2020;14(3):80-85. doi: 10.33371/ijoc.v14i3.719.
9. Jakubiec-Wisniewska K, Huras H, Kolak M. Effect of Vitamin D Supplementation on the Fetal Growth Rate in Pregnancy Complicated by Fetal Growth Restriction. *Children (Basel).* 2022 ;9(4):549. doi: 10.3390/children9040549.

10. Octavius GS, Daleni VA, Angeline G, Virliani C. A systematic review and meta-analysis of prevalence of vitamin D deficiency among Indonesian pregnant women: a public health emergency. *AJOG Glob Rep.* 2023 ;3(2):100189. doi: 10.1016/j.xagr.2023.100189.
11. Hutabarat M, Wibowo N, Obermayer-Pietsch B, Huppertz B. Impact of vitamin D and vitamin D receptor on the trophoblast survival capacity in preeclampsia. *PLoS ONE.* 2018 ;13(11):e0206725. doi: 10.1371/journal.pone.0206725
12. Wibowo N, Bardosono S, Irwinda R, Syafitri I, Putri AS, Prameswari N. Assessment of the nutrient intake and micronutrient status in the first trimester of pregnant women in Jakarta. *Med J Indones .* 2017 ;26(2):109-15. Available from: <http://mji.ui.ac.id/journal/index.php/mji/article/view/1617>
13. Irwinda R, Wibowo N, Putri AS. The Concentration of Micronutrients and Heavy Metals in Maternal Serum, Placenta, and Cord Blood: A Cross-Sectional Study in Preterm Birth. *J Pregnancy.* 2019 ;2019:5062365. doi: 10.1155/2019/5062365.
14. Ilham M, Akbar A, Alkaff FF, Adrian A, Harsono H. Serum Calcium and 25-Hydroxy Vitamin D Level in Normal and Early Onset Pre-eclamptic Pregnant Women: A Study from Indonesia. *J Clin Diagnos Res.* 2019;13(3):4–7.
15. Silalahi ER, Wibowo N, Prasmusinto D, Djuwita R, Rengganis I, Mose JC. Decidual dendritic cells 10 and CD4+CD25+FOXP3 regulatory T cell in preeclampsia and their correlation with nutritional factors in the pathomechanism of immune rejection in pregnancy. *J Reprod Immunol.* 2022 154:103746. doi: 10.1016/j.jri.2022.103746.