

Vitamin D And Preeclampsia: Maternal Adverse Outcomes

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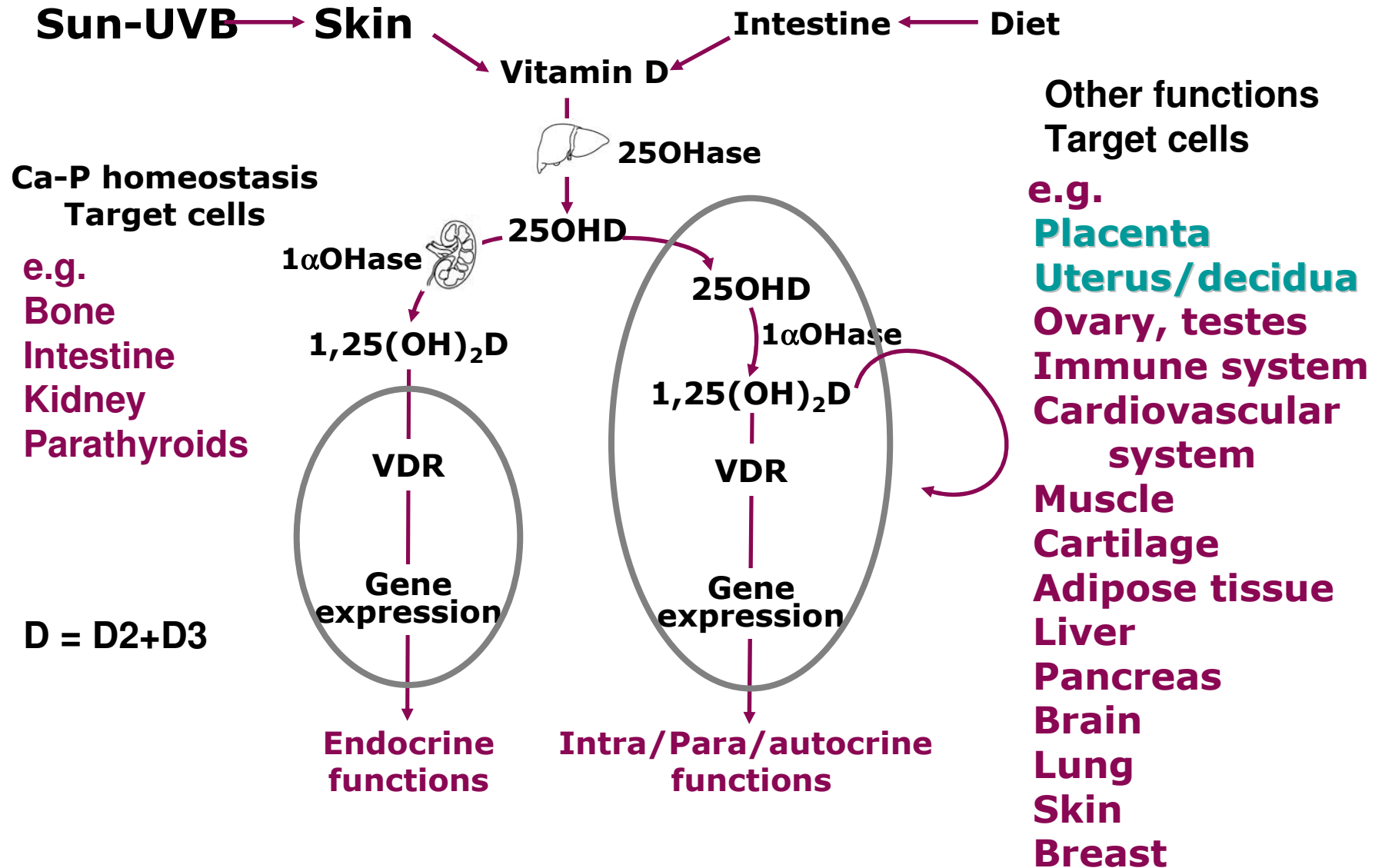
Cornell University

Division of Nutritional Sciences

Objectives of Presentation

- **Overview of preeclampsia & placentation**
- **Critical assessment of evidence linking vitamin D and preeclampsia**
- **Role of vitamin D in placenta**
 - immunomodulation at maternal-fetal interface
 - regulation of placental hormonal function
- **Knowledge gaps & research needs**

Functions of Vitamin D

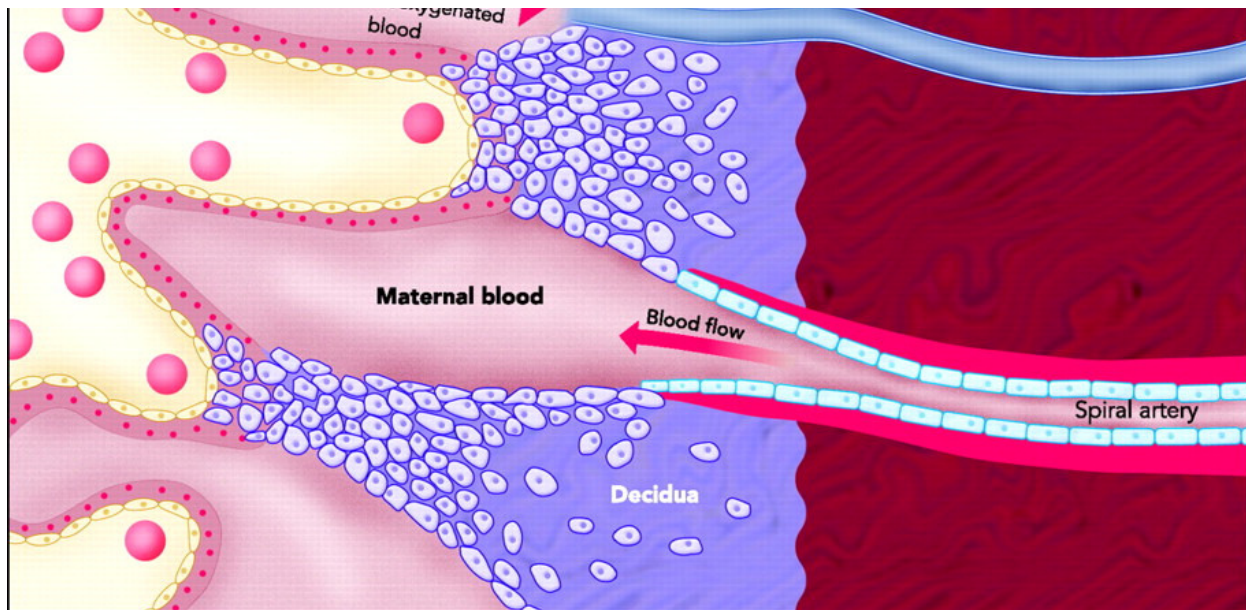
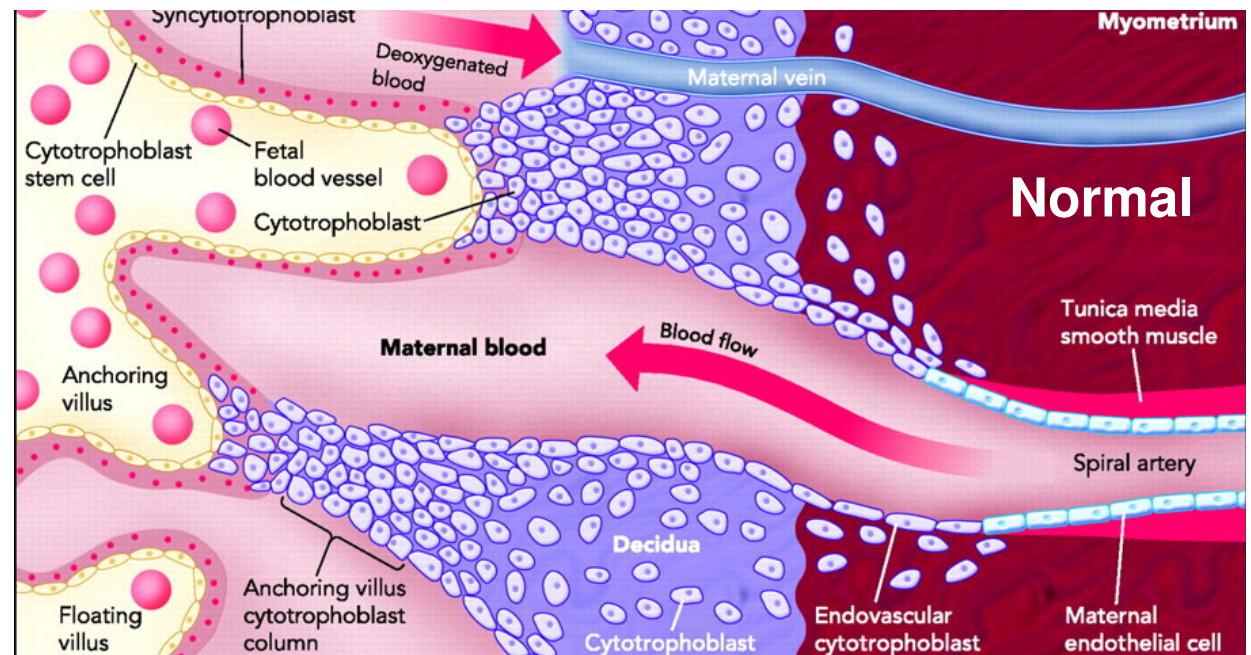


Preeclampsia (PE)

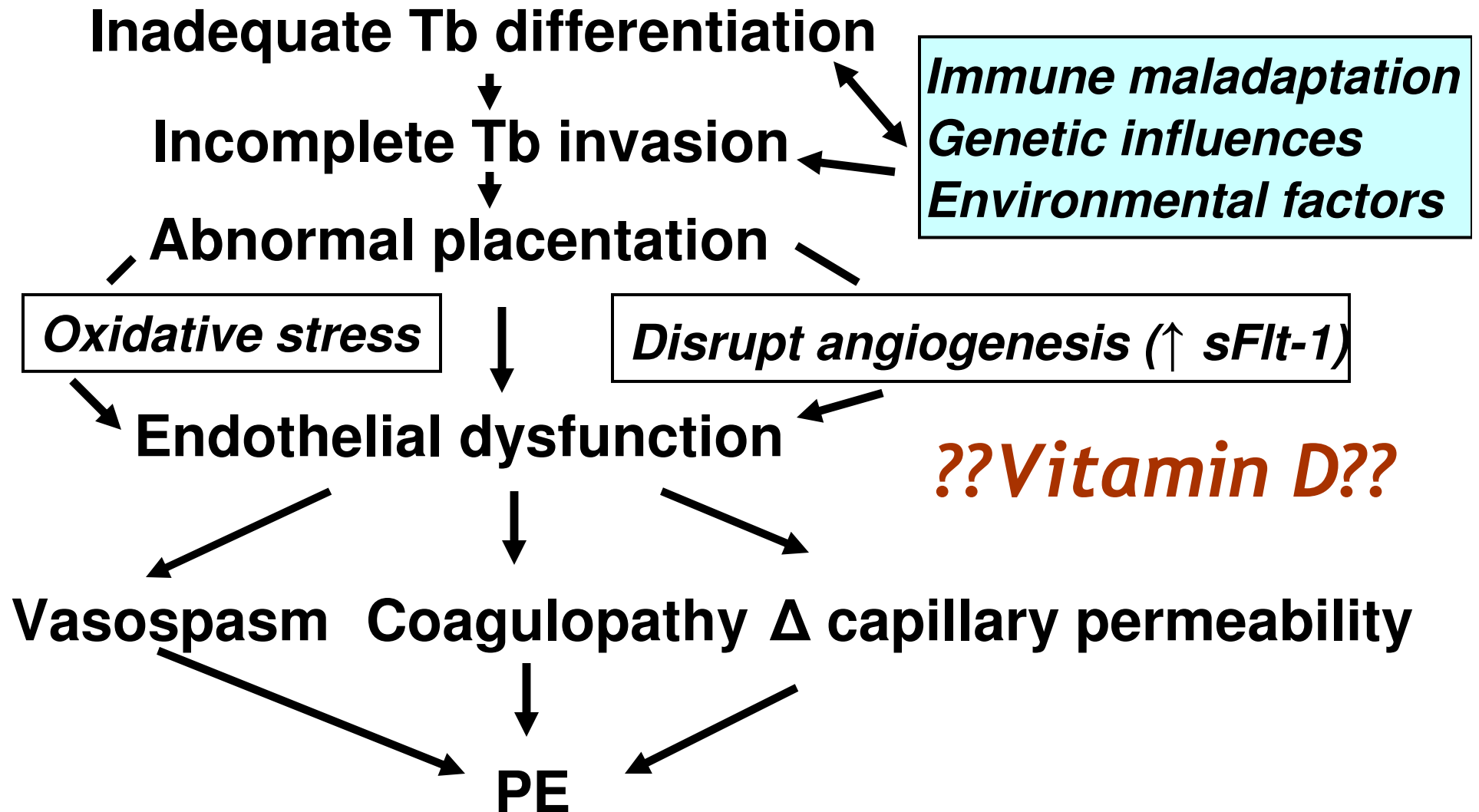
- **Major cause maternal mortality & maternal/fetal morbidity**
 - **50,000 maternal deaths/yr worldwide**
- **Characterized > 20 weeks by**
 - **Pregnancy induced hypertension**
 - **>140 mmHg systolic or >90 mmHg diastolic**
 - **Proteinuria**
 - **>300 mg 24 hr urine or >1+ dipstick**
 - **>0.3 protein to creatinine ratio**
- **Prevalence similar US & India**
 - **5-8% US and 4-10% India**
 - **> in nulliparous or multiparous with new partner**
 - **> prior PE or family history of PE**

Impaired Placentation in Preeclampsia

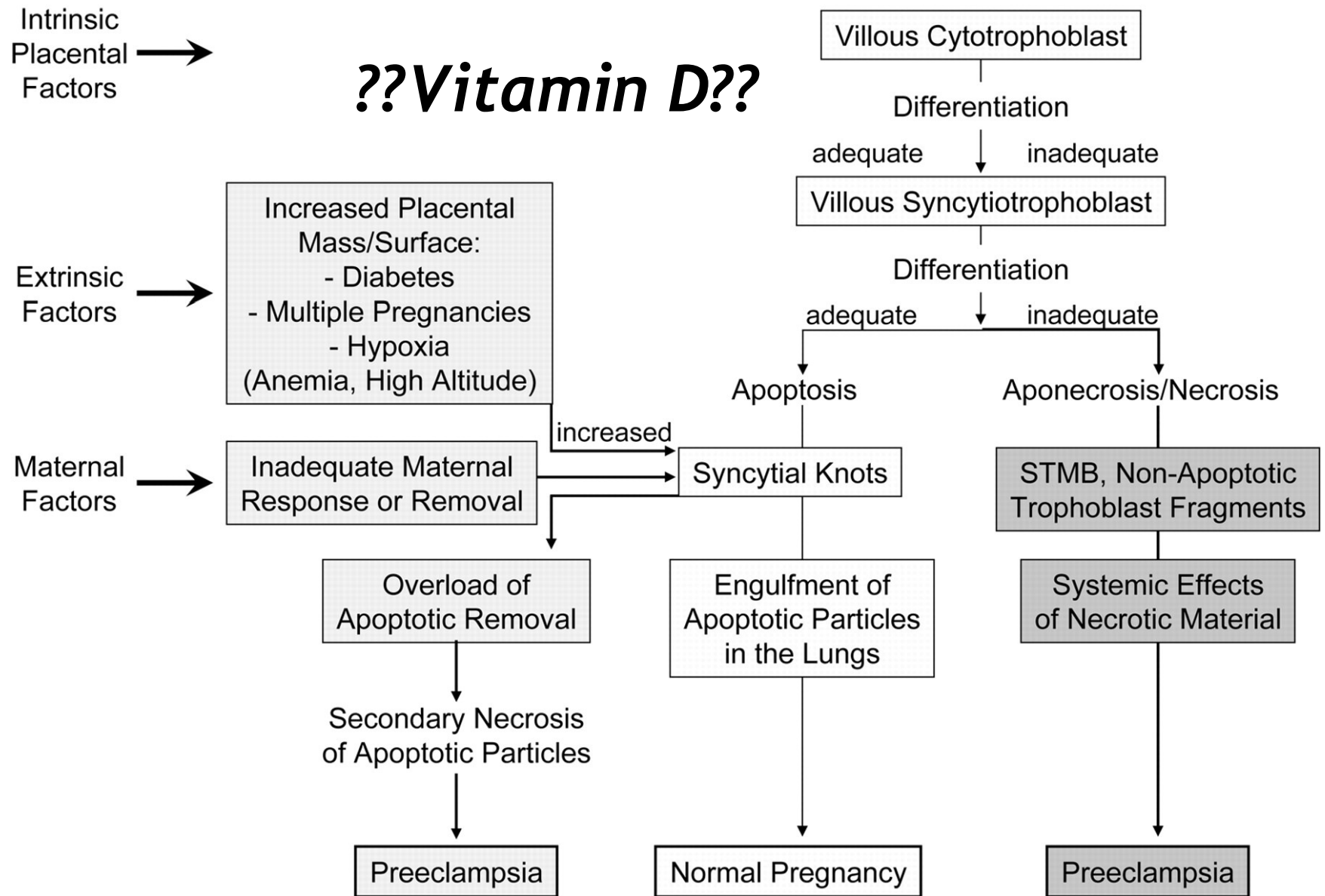
Incomplete trophoblast (Tb) invasion



Multifactorial Model of Preeclampsia



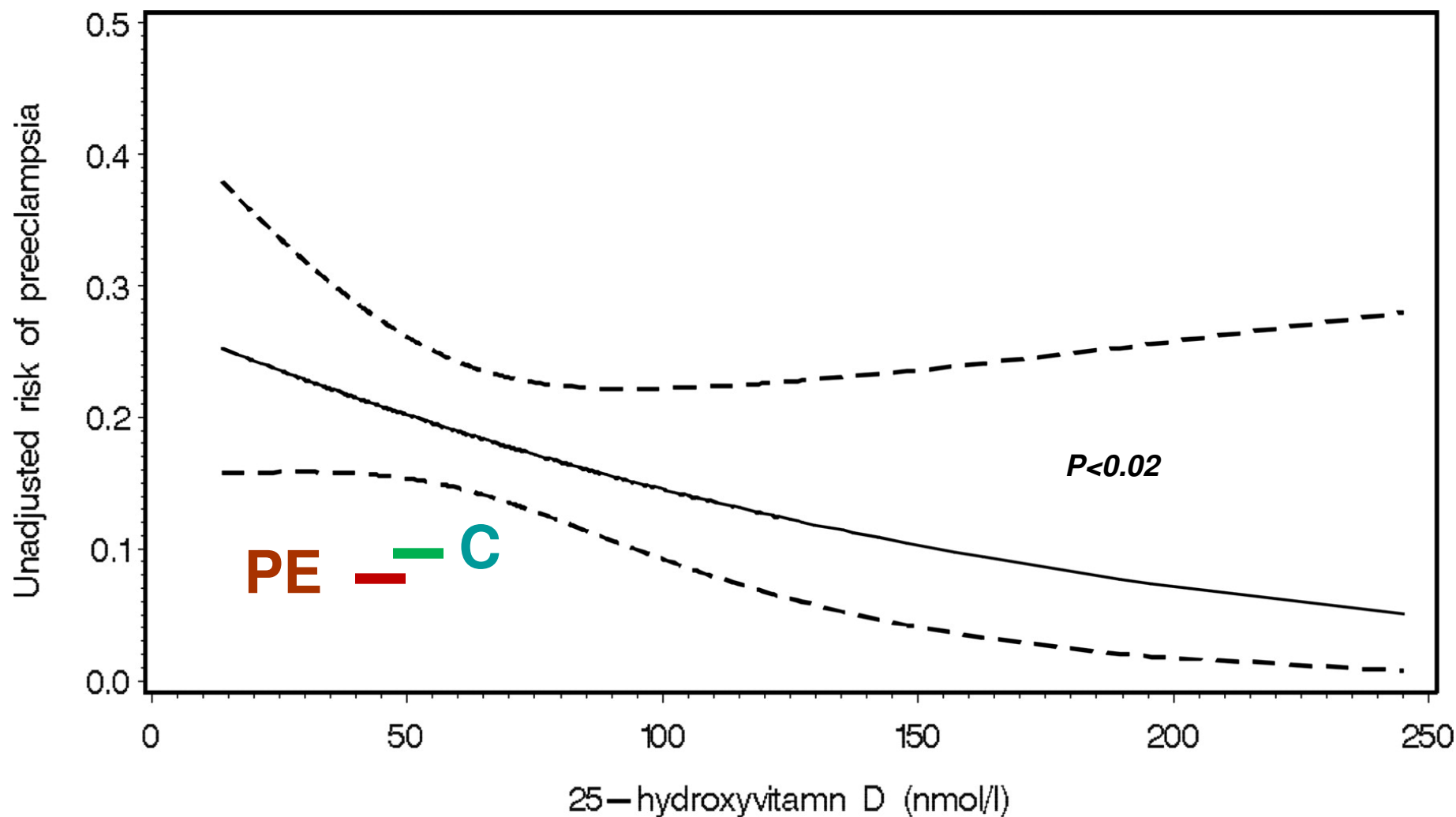
Multifactorial Model of Preeclampsia



Observational Studies on Vitamin D & PE or PIH

	<i>PE</i>		<i>C</i>		<i>1,25(OH)₂D</i>		<i>25(OH)D</i>	
	----- <i>n</i> ----				<i>pmol/L</i>		<i>nmol/L</i>	
	<i>PE</i>				<i>PE</i>	<i>C</i>	<i>PE</i>	<i>C</i>
<u><i>Prospective nested case control</i></u>								
Halhali 2004 (MX)	10	40(160)	21 wk	77.5	72.5			
			28 wk	107.5	97.5			
			36 wk	137.5	132.5			
Bodner 2007(US; NP)	49(59)	216(220)	<22 wk				45.4*	53.1
			Term				54.7*	64.7
<u><i>Case control</i></u>								
Seely 1992 (US; 3 rd)	12	24		172.1*	219.6	73.9	89.8	
August 1992 (US; 2/3)	9	9		95*	165			
Frolich 1992 (DN;3 rd)	53 (37%PIH)	20		96.5*	227.5	67.5	59	
Lalau 1993 (FR; 2 nd /3 rd)	21(PIH/1PE)	25		215*	275			
Halhali 1995 (MX; 3 rd)	26	26		106.5*	130.3			
Halhali 2000 (MX; Term)	24	24		117.5*	157.5			
Halhali 2007 (MX; 3 rd)	26	26		107.5*	125			

Dose-Response Association Early Maternal 25OHD and Risk of PE



Bodnar et al. Maternal vitamin D deficiency increases the risk of preeclampsia. J Clin Endocrinol Metab 2007;92:3517-3592.

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Clinical Trials on Vitamin D and PE or PIH

Randomized Clinical Trial

	<i>+Ca/vit D</i>	<i>NS</i>
<u>Marya et al. 1987</u>	200	200
<i>Rohtak, India</i>	+ 375 mg Ca	
<i>Dietary Ca 500mg;</i>	1200 IU D	
<i>vit D 40 IU</i>		
PE	12	18
Blood Pressure (32 wk)		
Systolic	109.6*	117.7
Diastolic	70*	66

Non-randomized Clinical Trial

Ito et al. 1994

Kuramoto, Japan	High Risk	PE
	+ 312 mg Ca/d	2/10
	+ 312 mg Ca/d + 20 IU vit D/3 days	3.7

Assessed risk based on Angiotensin Sensitivity Test BUT differed between the 2 groups

Observational and Trial Evidence for Vitamin D and PE

- **No double-blind placebo controlled RCT on vitamin D and incidence of PE**
- **1 RCT (no placebo) found no effect on PE but a small ↓ in systolic and diastolic BP with Ca/vitamin D supplements**
- **Inconsistent association of 1,25(OH)₂D and PE**
 - **29% lower 1,25(OH)₂D in PE in cross-sectional case studies**
 - **No association in prospective nested case control study**
- **Inconsistent association of 25(OH)D and PE**
 - **No association in 2 cross-sectional case studies**
 - **15% lower in PE in prospective nested case control study**

Vitamin D Metabolism in Placenta

- **Placental trophoblasts and decidua express 1α OHase**

Vitamin D Metabolism in Placenta

- Placental trophoblasts and decidua express 1α OHase
- Placental specific methylation of 24OHase promoter may ↓ capacity of $1,25(\text{OH})_2 \text{D}$ to induce 24OH-lase

% Methylation

24 OHase

<i>Placenta</i>	<i>57</i>
<i>Placental Fb</i>	<i>3</i>
<i>Decidual cells</i>	<i>2</i>
<i>Choriocarcinoma</i>	<i>80</i>

1 α OHase

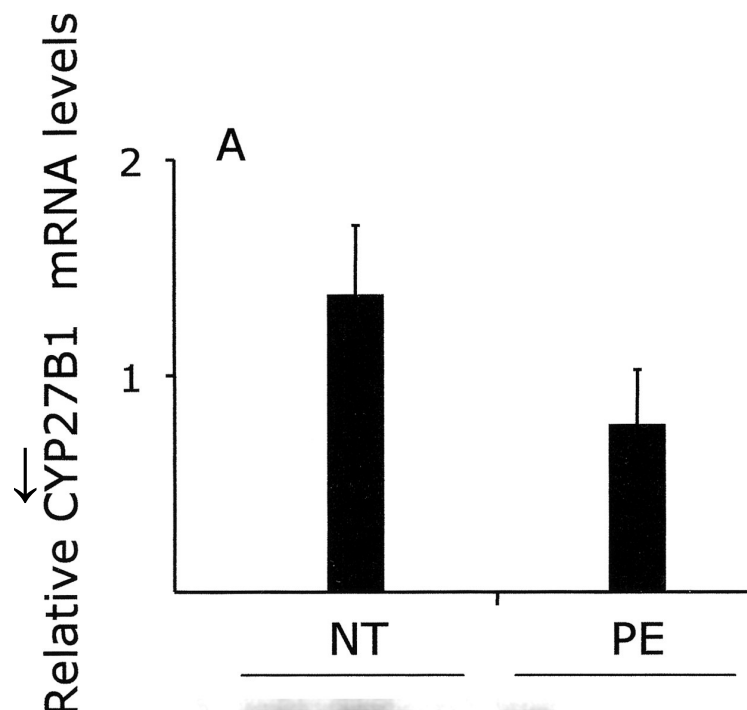
<i>Placenta</i>	<i>5</i>
<i>Choriocarcinoma</i>	<i>87</i>

VDR

<i>Placenta</i>	<i><1</i>
<i>Choriocarcinoma</i>	<i>87</i>

Vitamin D Metabolism in PE Placenta

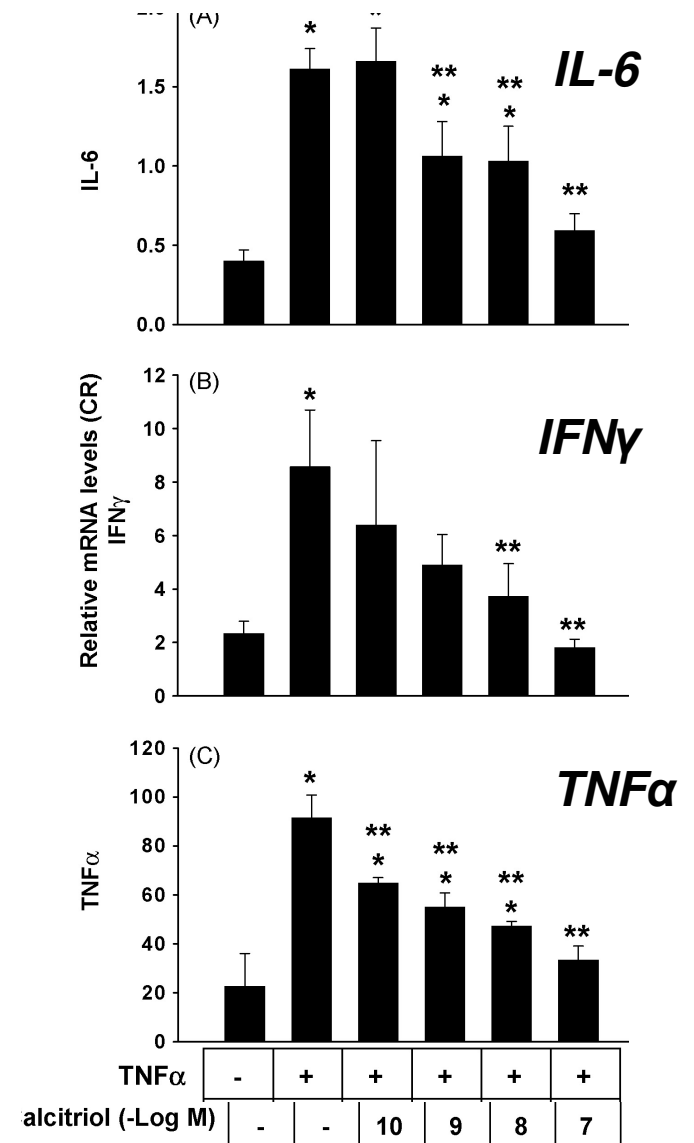
- **Conflicting reports on 1α OHase in PE placenta at term**
 - **Fischer and co-workers report $\uparrow$**
(Clin Exp Obstet Gynecol 2007;34:80-4).
 - **Diaz and co-workers report $\downarrow$ in cultured syncytiotrophoblasts**
- **Fischer and co-workers also report $\downarrow$ 24 OHase**



Diaz, L. et al. *J Clin Endocrinol Metab* 2002;87:3876-3882

Vitamin D Function in Placenta & Decidua In Vitro

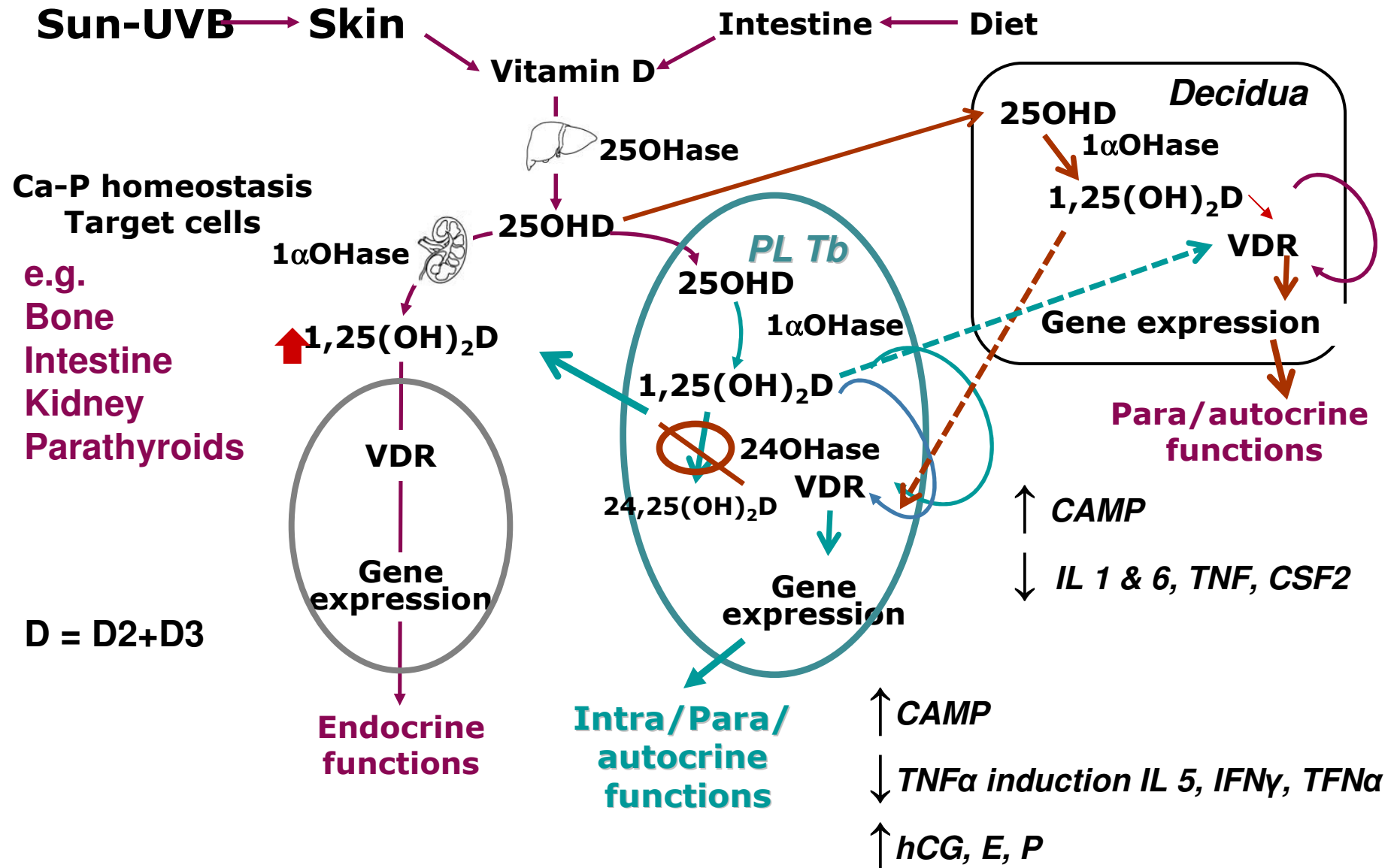
- Immunomodulatory regulation of cytokines and cathelicidin (CAMP)
 - ↓ TNF α induction of placental IFN γ , IL6, TNF α
 - ↓ decidual NK cell IL1, IL6, TNF & CSF2
 - ↑ placental & decidual CAMP



Vitamin D Function in Placenta & Decidua In Vitro

- **Immunomodulatory regulation of cytokines and cathelicidin antimicrobial peptide (CAMP)**
 - ↓ TNF α induction of placental IFN γ , IL6, TNF α
 - ↓ decidual NK cell IL1, IL6, TNF & CSF2
 - ↑ placental & decidual CAMP
- **Regulation of placental hormonal function**
 - ↑ hPL mRNA & secretion (10-100 0nmol/L)
 - ↑ hCG mRNA & secretion (0.1-10 nmol/L)
 - ↑ E & P secretion 0.1-100 nmol/L)

Functions of Vitamin D: Placenta



Vitamin D and PE

Gaps in Our Knowledge and Research Needs

- **Understand the regulation by vitamin D of normal placentation and abnormal placentation in PE**
 - immunomodulatory role
 - Placenta
 - Decidua
 - regulation of placental hormonal function
- **Need a double-blind placebo RCT on vitamin D and incidence of PE**

Acknowledgements

- **Jane Caty**
- **Sara Jones**