Vit D			
Structure	A steroid hormone		
Synth reg.	-strictly controlled by PTH (used for hydroxylation)		
Synth steps	 formation of <u>cholecalciferol</u> "Vit D3" subcutaneously by sun liver uses 25-hydroxylase to convert cholecalciferol into <u>25-hydroxyCholecalciferol</u> kidneys use 1-a-hydroxylase to convert <u>25-hydroxyCholecalciferol</u> to <u>1,25-DiHydroxycholecalciferol</u> 		
Molecular info	-cholecalciferol: derived from 7-DeHydroCholesterol (which is derived from cholesterol) -1,25-DiHydroxycholecalciferol: binds to blood Gc-globulin Pr as a transporter		
Active form	1,25 DiHydroxyCholecalciferol (aka: calcitriol)		
Vit D2	-derived from ergosterol -taken from animals & plants -structure: ergocalciferol -both Vit D2 & 3 are clinically available as sup		
Fun	-bone resorption during hypocalcemia -bone mineralization		
Ca regulation	-directly: Vit D -indirectly: PTH		

Path				
	Osteomalacia	Rickets	Osteoporosis	
Epedim	-Adults	-children	-	
Is	No bone mineralization	No bone or cartilage	Less <u>bone</u> mass (matrix	
		mineralization	is preserved)	
Incidence	Rare due to food <u>Ca & Vit D</u> supp nowadays		primary	
[tiplogy	All diseases in regard of Vit D		-Postmenopausal	
Etiology	and/or Ca homeost.			
Symptms	-weak bones	-weak bones	<u>secondary</u>	
	-weak muscles	-weak muscles	-Meds	
	-bone pain	-bone pain	-OH	
	-frequent fractures	-frequent fractures	-immobalization	
			-smoking	
	-vertebra compression	-skeletal deformity	-cushing	
		(bowed legs)	-hypertsm	
		-dental deformity	-gonads failure	
		-growth deformity	-GIT diseases	
	-Low blood 25-hydroxyCh	-hydroxyproline		
Lab	-hypocalcemia (rare)		(causes bone resorp)	
	-inc blood PTH (rare)		-osteocalcin	
	-inc blood alkaline phosphatase (rare)		(caises bone formatin)	
	-Low blood <u>25-</u>	-high blood <u>PTH</u>	-no lab tests!	
Diagnosis	<u>hydroxyCholecalciferol</u>	-high blood <u>Alkaline</u>	-measuring bone	
	-low blood <u>PO4</u>	<u>phosphatase</u>	density (radio)	

Osteoporosis		
Prevention	-good diet & exercises	
	-hormone replacement therapy in menopausal women	
Treatment	(very hard) -weak treators: oral Ca, estrogens & fluorides	

Rickets		
Etiology	Genetics	
Types	1 & 2	