

Media Release

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Medicare Benefits Scheme taking the 'D' out of Disease Prevention

With nearly a third of Australian adults found to suffer from vitamin D deficiency,¹ Mr Carl Gibson, chief executive of Complementary Medicines Australia, expressed his disappointment at the recent changes to the Medicare Benefits Scheme to restrict rebates for vitamin D blood testing.

“Given the high level of vitamin D deficiency in the Australian population, it is a little alarming that the government response to increasing numbers of patients having their vitamin D levels checked is to create restrictions so that only ‘high-risk’ patients will get a rebate. Unfortunately, restricting the rebates on testing will not make the problem of vitamin D deficiency go away.”

Eligible patients under the changes to the Medicare Benefits Scheme will only include those with deeply pigmented skin, osteoporosis or those with chronic lack of sun exposure, and doctors may be referred to the Professional Services Review if they are seen to flaunt the new rules.

“Vitamin D is generally known as the sunshine vitamin, as skin exposure to sunlight is the most common way for vitamin D to be absorbed into the body. However, it is no longer acceptable to assume that Australians receive adequate vitamin D from casual exposure to sunlight.”

“A responsible approach would be to acknowledge that a majority of the population is vitamin D deficient and not just those at high risk. This is where vitamin D fortified foods and vitamin D supplements come into the disease prevention equation. More of us should be supplementing vitamin D, as it is a cost-effective and easy approach to avoiding vitamin D deficiencies,” Mr Gibson explained.

“Vitamin D is well-known as an essential element for strong bones for muscle strength, and randomised trials² have shown that high-dose vitamin D supplementation can reduce fractures in the elderly. Furthermore, vitamin D deficiencies are associated with increasing the risk of a myriad of health problems such as osteoporosis, heart disease and even multiple sclerosis.”

Whilst supporting individuals’ decisions to supplement vitamin D, CMA strongly advocates following the instructions and dosage guidance on labels, as with any medication, and to seek advice from a healthcare provider.

ENDS

¹ Daly RM, Gagnon C, Lu ZX, Magliano DJ, Dunstan DW, Sikaris KA, Zimmet PZ, Ebeling PR, Shaw JE. Prevalence of vitamin D deficiency and its determinants in Australian adults aged 25 years and older: a national, population-based study. *Clin Endocrinol (Oxf)*. 2012 Jul;77(1):26-35.

² Bischoff-Ferrari HA, Willett WC, Wong JB, Giovannucci E, Dietrich T, Dawson-Hughes B. Fracture prevention with vitamin D supplementation: a meta-analysis of randomized controlled trials. *JAMA*. 2005; 293:2257-64.

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