From: Perry Holman [mailto:pholman.vitamindsociety@gmail.com] Sent: Tuesday, October 18, 2011 11:39 AM To: pholman.vitamindsociety@gmail.com Subject: Proposal to Declare November 2 - Vitamin D Day

Hi,

My name is Perry Holman and I work for the Vitamin D Society. We are helping InspireHealth by following up on their previous request for you to declare a "Vitamin D Day" proclamation in your city for November 2, 2011. Please consider.

November is Vitamin D Awareness month. A time to remind Canadians that they need to seek alternative methods from UV, food or supplements to keep their Vitamin D levels optimal during the long winter months. Optimal Vitamin D levels represent the greatest opportunity for people to optimize their health, prevent cancer and serious diseases and at a very low cost. Over 40 of the top Vitamin D Doctors and Scientists in North America have recommended that people obtain a blood serum level for 25(OH)D of between 100-150 nmol/L for cancer and disease prevention. This is the natural levels that the human body had as it evolved over thousands of years. Everyone should be tested and make sure they are within these guidelines. Stats Canada completed a study in 2010 that found that 90% of all Canadians were below these levels. We need to improve this and make people aware that optimal Vitamin D levels will have a profound positive impact on their personal health.

Holick, Michael F., PhD., M.D., Boston University School of Medicine, textbook - Physiology, Molecular Biology, and Clinical Applications (2nd Ed 2010 Humana Press). Page 12 of this 1155 page medical textbook shows a summary of the health benefits and disease incidence prevention that could be achieved by raising the public's vitamin D levels to 125 nmol/L:

- a) Cancers, all combined, reduced by 75%
- b) Breast Cancer, reduced by 50%
- c) Ovarian Cancer, reduced by 25%
- d) Colon Cancer, reduced by 67%
- e) Non-Hodgkins, reduced by 30%
- f) Kidney Cancer, reduced by 67%
- g) Endometrial Cancer, reduced by 35%
- h) Type 1 Diabetes, reduced by 80%
- i) Type 2 Diabetes, reduced by 50%
- j) Fractures, all combined, reduced by 50%
- k) Falls, women reduced by 72%
- I) Multiple Sclerosis, reduced by 50%
- m) Heart Attack, men, reduced by 50%
- n) Peripheral Vascular Disease, reduced by 80%
- o) preeclampsia reduced by 50%

p) Cesarean Section, reduced by 75%

Most people think that Vitamin D is best received through a healthy balanced diet. The problem with this advice is that there are very few foods with Vitamin D and the amount contained is very small ie. wild salmon has approximately 400 IU. A study by Dr. Robert Heaney showed that the average man used 4,000 IU of Vitamin D a day. So we must replace at least this amount to keep our Vitamin D tank full. That would be 10 meals of salmon or 40 glasses of vitamin D fortified milk every day. This is why diet is not your best source of vitamin D.

Dr. William Grant released a study in 2010 which estimated that if Canadians raised their vitamin D blood levels to 105 nmol/L it would prevent 37,000 deaths and save \$14B in associated healthcare costs. It is important to get this message out to as many people as possible so they re-gain control of their health and live a long healthy life.

Anderson et al., 2011 – Ontario, Canada – This large population-based, case-control study of 3,101 people found that time spent outdoors between May and September was associated with reduced breast cancer risk of 50% for women aged 60-74 years old. The authors concluded "This study suggest that factors suggestive of increased cutaneous production of vitamin D are associated with reduced breast cancer risk."

- I have attached the following for you:
- Vitamin D Day proclamation
- Scientists Call to D*action

Please consider declaring November 2 as Vitamin D Day in your city. Please call me at 1-877-520-4867 for more information or to confirm that your city is joining others from across Canada in the Nov. 2 Vitamin D Day proclamation. Thank you for your consideration.

Sincerely, Perry

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Perry Holman Executive Director Vitamin D Society 1-877-520-4867 University of California Scientists Panel

University of California Davis Bruce D. Hammock, Ph.D. Hari A. Reddy, Ph.D. Ray Rodriguez, Ph.D. University of California Los Angeles John Adams, M.D. Martin Hewison, Ph.D. H. Phillip Koeffler, M.D. Keith C. Norris, M.D. University of California Riverside Mathew Mizwicki, Ph.D. Anthony W. Norman, Ph.D. Laura P. Zanello, Ph.D. University of California San Diego Richard L. Gallo, M.D., Ph.D. Cedric F. Garland, Dr. P.H. Frank C. Garland, Ph.D. Edward D. Gorham, Ph.D. Tissa Hata, M.D. University of California San Francisco David Gardner, M.S., M.D. Bernard P. Halloran, Ph.D.

International Scientists Panel

Atascadero State Hospital John J. Cannell, M.D. **Boston University School of Medicine** Michael F. Holick, Ph.D., M.D. **Creighton University** Robert P. Heaney, M.D. Joan M. Lappe, Ph.D., R.N. **Emory University** Vin Tangpricha, M.D., Ph.D. Harvard School of Public Health Edward Giovannucci, M.D., ScD. Walter C. Willett, Dr. P.H., M.D. **International Medical Center of Japan** Tetsuya Mizoue, M.D., Ph.D. **Linus Pauling Institute** Adrian F. Gombart, Ph.D. Massachusetts General Hospital Carlos A. Camargo, Jr., M.D., Dr. P.H. **McGill University** John H. White, Ph.D. Medical University of Graz, Austria Stefan Pilz, M.D. Medical University of South Carolina Bruce W. Hollis, Ph.D. Carol L. Wagner, M.D. **Roswell Park Cancer Institute** Candace Johnson, Ph.D. Donald L. Trump, M.D. Society For Medical Information and Prevention Joerg Spitz, M.D. Sunlight, Nutrition and Health **Research** Center William B. Grant, Ph.D. **University of Albany - SUNY** JoEllen Welsh, Ph.D. University of Alberta Gerry Schwalfenberg, M.D., CCFP University of Saskatchewan Susan J. Whiting, Ph.D. University of Toronto, Mt Sinai Hospital Reinhold Vieth, Ph.D.

A Consortium of Scientists, Institutions, and Individuals Committed to Solving the Worldwide Vitamin D Deficiency Epidemic

Scientists' Call to D*action

The Vitamin D Deficiency Epidemic

40-75% of the world's population is vitamin.D deficient.

The causal link between severe vitamin D deficiency and rickets or the bone disease of osteomalacia is overwhelming, while the link between vitamin D insuffiency and osteoporosis with associated decreased muscle strength and increased risk of falls in osteoporotic humans is well documented by evidence-based intervention studies.

There are newly appreciated associations between vitamin D insufficiency and many other diseases, including tuberculosis, psoriasis, multiple sclerosis, inflammatory bowel disease, type-1 diabetes, high blood pressure, increased heart failure, myopathy, breast and other cancers which are believed to be linked to the non-calcemic actions of the parent vitamin D and its daughter steroid hormone. Based on the evidence we now have at hand, action is urgent.

It is projected that the incidence of many of these diseases could be reduced by 20%-50% or more, if the occurrence of vitamin D deficiency and insufficiency were eradicated by increasing vitamin D intakes through increased UVB exposure, fortified foods or supplements. The appropriate intake of vitamin D required to effect a significant disease reduction depends on the individual's age, race, lifestyle, and latitude of residence. The latest Institute of Medicine (IOM) report, 2010, indicates 10,000 IU/day is considered the NOAEL (no observed adverse effect level). 4000 IU/day can be considered a safe upper intake level for adults aged 19 and older.

It is well documented that the darker the skin, the greater the probability of a vitamin D deficiency. Even in southern climates, 55% of African Americans and 22% of Caucasians are deficient.

More than 1 billion people worldwide are affected at a tremendous cost to society.

A Scientists' Call to Action has been issued to alert the public to the importance to have vitamin D serum levels between 40 and 60 nanograms/milliliter (100-150 nanomoles/liter) to prevent these diseases. Implementing this level is safe and inexpensive.

The benefit of an adequate vitamin D level to each individual will be better overall health and a reduction in illnesses and, ultimately, a significant reduction in health care costs. The benefit of adequate vitamin D levels to society/businesses is a more productive workforce and, lower health care costs.

The D*action project has as its purpose to serve as a model for public health action on vitamin D. It is a test bed for techniques, and for providing outcome evaluation at a community level.

Revised 1/12/11

"VITAMIN D DAY"

| WHEREAS | Many Canadians have sub-optimal levels of vitamin D; |
|-----------------|--|
| AND WHEREAS | As a province, we are faced with rising healthcare costs that could prove financially unsustainable; |
| AND WHEREAS | With an aging population and increasing cancer drug costs, the rapidly rising conventional cancer budget is financially unsustainable; |
| AND WHEREAS | Substantial and growing evidence exists that engaging cancer patients in their own health through an integrative approach to care (i.e. exercise, healthful nutrition, emotional support, supplements, etc.) can substantially improve quality of life, reduce the risk of recurrence, improve survival, and reduce overall healthcare costs; |
| AND WHEREAS | Vitamin D supplementation is particularly noteworthy. It was found to reduce cancer incidence by 60%. Two recent studies (breast cancer and colon cancer) have clearly demonstrated that vitamin D blood level at the time of cancer diagnosis is highly correlated with survival; |
| AND WHEREAS | In addition to cancer prevention, vitamin D supplementation has the added benefit of substantially reducing our risk of heart disease, diabetes, strokes, MS, depression, and even the 'flu; |
| AND WHEREAS | The most cost effective way to reduce global cancer mortality rates is through optimal sunlight exposure and by simply adequately supplementing with vitamin D; |
| NOW, THEREFORE, | I,, Mayor of, DO HEREBY PROCLAIM Wednesday, November 2 nd , 2011 as |

"VITAMIN D DAY"

in the Municipality of _____.

MAYOR