

## СРАВНЕНИЕ ДАННЫХ ОЦЕНКИ ВИТАМИННОЙ ОБЕСПЕЧЕННОСТИ НАСЕЛЕНИЯ АРКТИЧЕСКОЙ ЗОНЫ РОССИИ С ПОМОЩЬЮ РАСЧЕТНЫХ И БИОХИМИЧЕСКИХ МЕТОДОВ

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**Цель.** Сопоставить расчетные показатели потребления с рационами питания витаминов А, В<sub>2</sub>, D и бета-каротина и биомаркеры витаминного статуса 178 жителей поселков Тазовский и Гыда Ямало-Ненецкого автономного округа РФ. **Материалы и методы.** Фактическое питание было исследовано частотным (по частоте потребления пищевых продуктов за предшествующий месяц) и 24-часовым (суточным) методами воспроизведения. Витаминный статус оценивали по содержанию витаминов в сыворотке крови. **Результаты.** Была установлена статистически значимая взаимосвязь между концентрацией бета-каротина в сыворотке крови и его потреблением с рационом. Не обнаружено выраженной взаимосвязи между уровнем потребления рыбы и обеспеченностью витамином D. **Заключение.** Расчетные данные потребления витаминов позволяют выявлять отклонения от оптимального питания и группы риска развития алиментарной недостаточности, но не всегда дают возможность провести объективную оценку индивидуальной витаминной обеспеченности. Так, у лиц с явным недостатком витамина А в рационе в предыдущий перед взятием крови день, в крови он находился в диапазоне, характерном для адекватной обеспеченности.

**Ключевые слова:** фактическое питание, обеспеченность витаминами, потребление витаминов, сыворотка крови, коренное и пришлое население.

## EVALUATION OF VITAMIN STATUS OF THE POPULATION OF THE RUSSIAN ARCTIC ACCORDING TO THE DATA ON VITAMIN CONSUMPTION AND SERUM LEVEL

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**Aim.** To compare the calculated data of A, B<sub>2</sub>, D vitamins and beta-carotene consumption with diets and biomarkers of vitamin status of 178 residents of Tazovsky and Gyda settlements of Yamal-Nenets Autonomous Area. **Materials and Methods.** The actual nutrition was studied by frequency (according to the frequency of food consumption for the previous month) and 24-hour (daily) reproduction methods. Vitamin status was assessed by serum vitamin concentration. **Results.** A statistically significant relationship between serum beta-carotene level and its consumption with rations was established. There was no significant relationship between the level of fish consumption and vitamin D sufficiency. **Conclusion.** Vitamin intake data provide a framework to reveal deviations from optimal nutrition and to identify risk groups with vitamin deficiency.



cy, but they do not always make it possible to carry out an objective assessment of individual vitamin sufficiency. Thus, in individuals with a clear lack of vitamin A in the diet on the previous day before taking blood, blood retinol level was in the normal range.

**Keywords:** *actual nutrition, vitamins sufficiency, consumption of vitamins, serum, indigenous and ancestral populations.*

A potential risk factor for the development of vitamin deficiency in the population of the Polar region is the uniformity of the diet, associated both with a limited set of local types of food (mainly fish and fish products, venison) [1], and with the difficulties of importing certain foods (dairy, vegetables and fruits) in conditions of complex transport accessibility of the territory in combination with extreme climatic conditions. The loss of the egalitarian («horizontal») principle of distribution due to the donation-distribution of reindeer-breeding products within the community serves as one of the factors that violate the maintenance of the nutritional status and health of the indigenous northerners [2]. Low sun rise above the horizon and a short day length in winter do not provide adequate levels of vitamin D in the blood due to its endogenous synthesis in the skin [3,4], which may be one of the reasons for the widespread prevalence deficiency of this vitamin in the North [5]. An additional risk factor for the development of vitamin deficiency in the population of the Polar region can be exposure to pollutants and toxic substances as a result of intensive industrial development of hydrocarbon deposits, which is accompanied by activation of free radical oxidation processes [6]. Several vitamins (B group, E, C, carotenoids) involved in metabolic processes, are antioxidants [7,8], this allows us to consider the biochemical markers of vitamin status as one of the criteria for the integral assessment of adaptation reserves of the body in extreme climatic conditions of the Far North [9].

*Aim* of the study was to compare the calculated data of vitamins consumption with food rations and the results of the assessment of vitamin status based on the concentration of their metabolites in the blood.

## Materials and Methods

The actual nutrition and vitamin status of the indigenous and alien populations were examined in 178 people over 18 years old living in the villages of Tazovsky and Gyda, located in the northeast of the Yamal-Nenets Autonomous Area. 78.9% of the surveyed were women, 21.1% were men. The number of the indigenous population leading a settled, nomadic or semi-emacid lifestyle was 79.2% of all those surveyed, while the alien population was 20.8%. The actual nutrition was studied by frequency (according to the frequency of food consumption for the previous month) and 24-hour (daily) reproduction methods [10,11]. Vitamin status was assessed by the content of vitamins in the serum. The concentration of retinol (vitamin A) and beta-carotene was determined using high performance liquid chromatography [12], riboflavin (vitamin B<sub>2</sub>) – by fluorimetric method using riboflavin-binding apoprotein [13], 25-hydroxyvitamin D [25(OH)D] (vitamin D) – enzyme immunoassay method using the test system «ELECSYS Vitamin D Total» (F. Hoffmann-La Roche Ltd., Switzerland). Persons with indicators that did not reach the lower limit of the norm [13] were considered to be insufficiently provided with vitamins.

Statistical analysis of the obtained data was performed using the SPSS v.20.0 program (SPSS Inc., USA). Significant differences were considered at  $p < 0.05$ .

## Results and Discussion

Analysis of the actual nutritional data revealed vitamin A intake due to retinol  $821.0 \pm 169.0 \mu\text{g RE/day}$ ; beta-carotene –  $2501.0 \pm 205.0 \mu\text{g/day}$ ; vitamin B<sub>2</sub> –  $1.5 \pm 0.1 \text{ mg/day}$  [14]. The content of vitamins in the blood serum of the examined was: retinol  $41.0 \pm 0.9 \mu\text{g/dL}$ , beta-carotene  $14.8 \pm 1.1 \mu\text{g/dL}$ , riboflavin  $8.3 \pm 0.5 \text{ ng/mL}$ , as previously pre-

sented [14]. Figures 1-3 show the results of individual assessment of micronutrient status obtained by biochemical methods and actual nutrition indicators for the preceding day for vita-

mins A, B<sub>2</sub> and beta-carotene. The indicators have the form of «clouds», and for vitamin B<sub>2</sub> there is a tendency of riboflavin level increasing with vitamin B<sub>2</sub> consumption elevation.

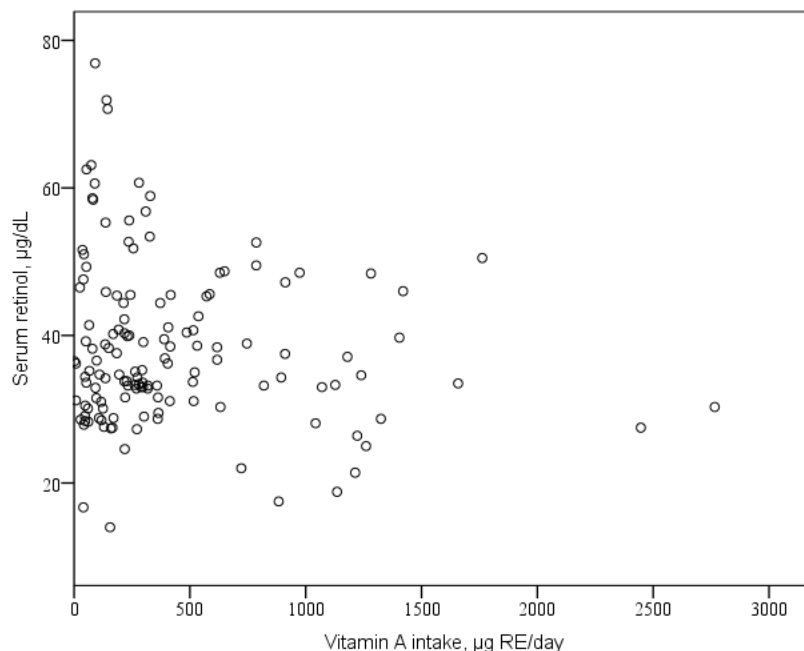


Fig. 1. Individual indicators of the surveyed in the coordinates: the serum concentration of retinol – vitamin A consumption with diet

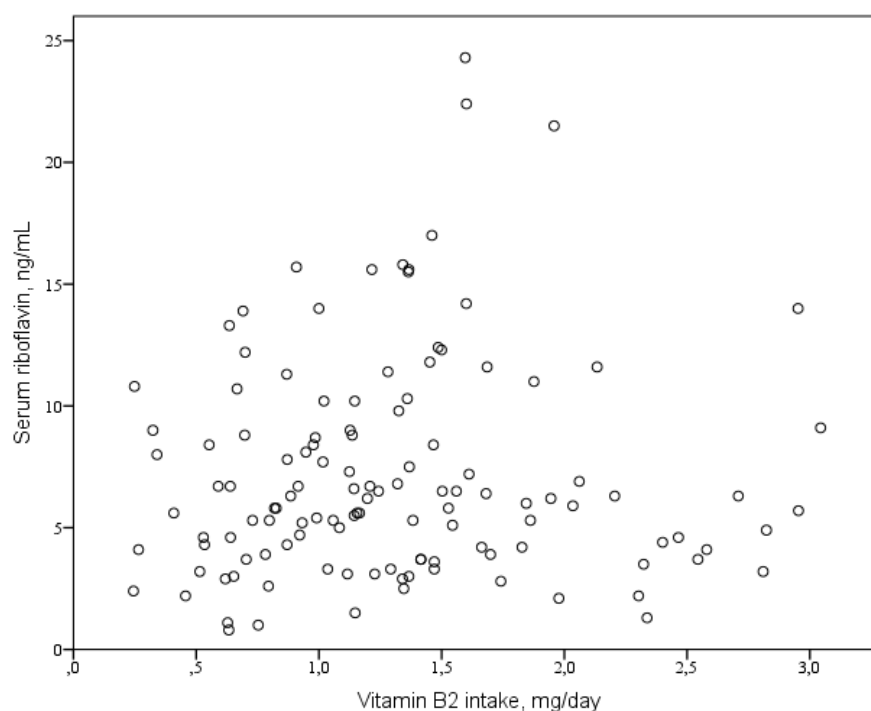


Fig. 2. Individual indicators of the surveyed in the coordinates: the serum concentration of riboflavin – vitamin B<sub>2</sub> consumption with a diet

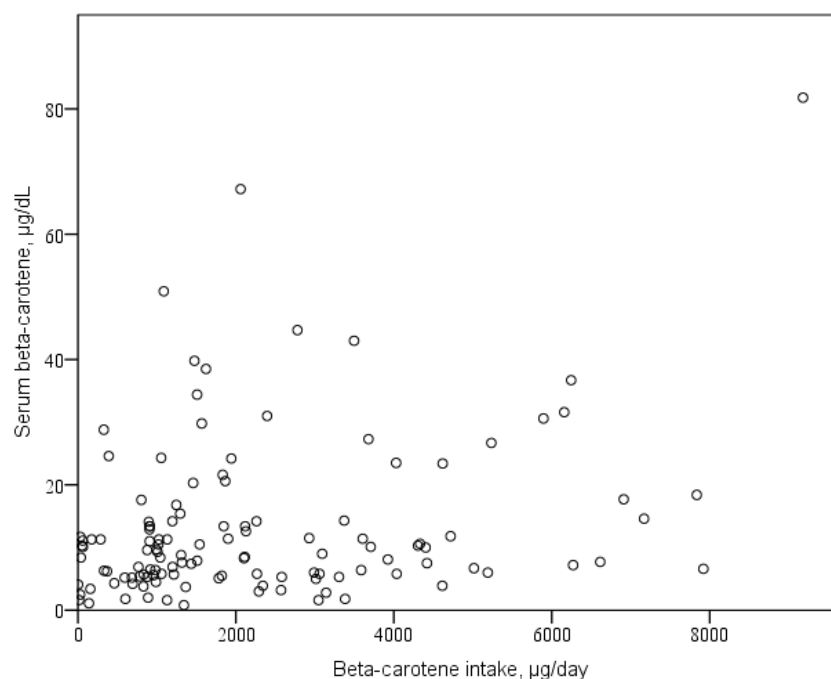


Fig. 3. Individual indicators of the surveyed in the coordinates: the serum concentration of beta-carotene – consumption with diet

An analysis of the relationship between the concentration of metabolites of vitamins in the serum and the consumption of micronutrients shows that a statistically

significant relationship is found only for beta-carotene; for the other two vitamins, it does not reach the level of significance (Table 1).

Table 1

*Indicators of the Correlation ( $\rho$  of Spearman) between Serum Vitamin Content, Diet Vitamin Intake and the Consumption of Certain Groups of Foods*

Biomarker (serum)	Dietary intake	$\rho$ (statistical significance, p)
Retinol, µg/dL	vitamin A (retinol), µg/day	-0.020 (>0.05)
	frequency of consumption of vegetables, portion/day	0.168 (0.042)
Riboflavin, ng/mL	vitamin B2, mg/day	0.051 (>0.05)
25(OH)D, ng/L	fish and fish products, g/day	0.119 (>0.05)
β-carotene, µg/dL	β-carotene, µg/day	0.241 (0.004)
	vegetables, g/day	0.273 (0.001)
	frequency of consumption of vegetables, portion/day	0.365 (<0.001)
	fruit, g/day	0.410 (<0.001)
	frequency of consumption of fruit, portion/day	0.350 (<0.001)

The lack of correlation between the level of vitamin a intake in the form of retinol and its concentration in the blood is obviously explained by the existing mechanism of maintaining the metabolite concentration at the

physiological level both due to the transport of retinol with retinol-binding protein from the liver (vitamin a depot) and due to the conversion of beta-carotene from food to retinol. As can be seen from Table 2, the main sources of

vitamin A were fish and fish products, as well as dairy products, beta-carotene – vegetables

and fruits, vitamin B<sub>2</sub> – meat products, including venison, as well as vegetables.

Table 2

***Significant Correlations ( $\rho$  of Spearman) between the Vitamins Content in the Diet and the Level of Consumption of the Main Food Groups***

Vitamin	Food group	$\rho$ (statistical significance, p)
A (retinol) $\mu\text{g/day}$	fish and fish products, g/day	0.396 (<0.001)
	milk products in terms of milk, g/day	0.291 (<0.001)
$\beta$ -carotene, $\mu\text{g/day}$	vegetables, g/day	0.642 (<0.001)
	fruit, g/day	0.215 (0.005)
B <sub>2</sub> , mg/day	meat products in terms of meat, g/day	0.567 (<0.001)
	venison, g/day	0.453 (<0.001)
	vegetables, g/day	0.371 (<0.001)

With regard to B vitamins, it is known that their absorption is affected by the food matrix [15]. Thus, for the final conclusion about the interchangeability of the calculated and biochemical methods for assessing the supply of vitamin B<sub>2</sub>, special studies are required, taking into account its bioavailability from different foods.

As can be seen from the data in Table 2, the main sources of vitamin A were fish and fish products, as well as dairy products, beta-carotene – vegetables and fruits, vitamin B<sub>2</sub> – meat products, including venison.

The statistically significant relationship

between the biochemical indices of vitamin status and the consumption of the main food groups (Table 1) was found only for beta-carotene that comes with vegetables and fruits, both in terms of quantity (g/day) and frequency of consumption (portions/day, for the last month). Contrary to expectations and literature data, it was not possible to identify a pronounced relationship between the level of fish consumption and vitamin D status (Table 1).

For further analysis, the results were ranked by the amount of consumption of the studied micronutrients (Table 3).

Table 3

***Serum Content of Vitamin ( $M \pm m$ ), Depending on the Level of its Consumption with a Diet [Me (min-max)]***

Index	Tretil consumption		
	1	2	3
Vitamin A			
Vitamin A (due to retinol) intake, $\mu\text{g/day}$	74 (47.0-159.0)	271 (165.0-413.0)	888 (415.0-1305.0)
Serum retinol, $\mu\text{g/dL}$	40.2 $\pm$ 2.0	38.2 $\pm$ 1.3	38.1 $\pm$ 1.6
Vitamin B2			
Vitamin B2 intake, mg/day	0.70 (0.5-1.0)	1.29 (1.0-1.5)	2.25 (1.6-9.3)
Serum riboflavin, ng/mL	7.2 $\pm$ 0.9	8.3 $\pm$ 1.0	8.3 $\pm$ 1.0
Beta-carotene			
Beta-carotene intake, mg/day	0.61 (0.13-1.04)	1.57 (1.05-2.40)	4.32 (2.48-6.51)
Serum beta-carotene, $\mu\text{g/dL}$	9.1 $\pm$ 0.8	15.7 $\pm$ 2.0 <sup>1</sup>	18.0 $\pm$ 3.0 <sup>1</sup>

Note: <sup>1</sup> – statistically significant difference from the first tretil

Thus, it was established that the concentration of beta-carotene in the serum of the subjects examined in the second and third tretil of intake was statistically significantly higher (1.7 and 2.0 times, respectively) compared to the first tretil.

### Conclusions

Comparison of two methods for assessing vitamin status showed that the data obtained by frequency and 24-hour recall methods do not always make it possible to conduct an objective assessment of individual vitamin status. Thus, in individuals with a

clear lack of vitamin A in the diet on the previous day before taking blood, blood retinol level was in the normal range.

At the same time, the evaluation of the calculated data of vitamin intake for identifying deviations from optimal nutrition and developing measures for correcting them, as well as identifying groups at risk of developing nutritional deficiency is not in doubt. The data obtained demonstrated the importance of simultaneously using several methods for studying actual nutrition and nutritional status.

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#### Дополнительная информация [Additional Info]

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