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**Title:** Are we effectively monitoring and treating vitamin D deficient patients with tuberculosis?

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**Body:** INTRODUCTION Hypovitaminosis D is associated with active tuberculosis (TB). It is controversial whether the condition predisposes to TB infection or is a result of it. AIMS Following release of local guidelines on vitamin D replacement, the aim was to examine if vitamin D replacement was effective in TB patients prior to this. METHODS TB cases from March 2011 - March 2012 treated at King George Hospital were identified via London TB Register. The hospital pathology database identified patients that had vitamin D levels measured and if this had been rechecked following supplementation. Levels were classified as replete; insufficient; deficient. Chronic kidney disease patients were excluded. RESULTS 124 patients had vitamin D levels measured and commenced on supplementation. Of these, 97 were deficient, 25 had insufficient levels and 2 were replete. 30 patients had vitamin D levels re-checked (mean interval of 184 days). Initial tests in this group showed that 7 patients had insufficient levels and 23 were deficient. Following supplementation, 6 patients had insufficient levels, 21 were deficient and 3 were replete. 12 patients had lower vitamin D levels than at diagnosis. 3 were unchanged. CONCLUSIONS Results suggest vitamin D supplementation was ineffective in TB patients. Causative mechanism(s) remain unclear but could be due to disease process, indicate lack of patient compliance or a need for local guidelines (primary and secondary care). Re-audit in line with local guidelines and anticipated NICE guidelines may add clarity as to the causative mechanism(s).