

# Abstract

J Gynecol Obstet Biol Reprod (Paris). 1997;26(8):834-6.

## Nutritional fetal rickets. A case report

Blond MH, Gold F, Pierre F, Berger C, Guerois M, Queru MS, Ramponi N.

Service de Médecine Néonatale, Centre de Pédiatrie Gatien de Clocheville, Tours.

**BACKGROUND:** We report the case of a newborn who showed typical signs of rickets at birth: craniotabes and severe hypocalcemia. The diagnosis of fetal rickets was confirmed by radiography.

**FINDINGS:** Maternal deficiency was revealed by an excessively low vitamin D level. The multiparous Moroccan mother had suffered low back pain and paraesthesia for several years. She wore the veil and rarely left her home. Nutritional and vitamin D deficiency was demonstrated.

**CONCLUSION:** We report this exceptional case to recall the importance of vitamin D in the development of fetal calcium supply, the prevention of gravid osteomalacia and the prevention of neonatal hypocalcemia. Vitamin D supplementation (ideally 1000 IU per day during the third trimester or at least one 100,000 IU dose at the sixth and eighth months or a single dose of 2 to 3,000,000 IU at the sixth month) should be the rule in pregnancy.

PMID: 9509328

