SHAREABLE PDF

Genetic polymorphisms, vitamin D binding protein and vitamin D deficiency in COVID-19

Marijn M. Speeckaert [1,2], Reinhart Speeckaert[2,3] and Joris R. Delanghe[4]

Affiliations: [1]Dept of Nephrology, Ghent University Hospital, Ghent, Belgium. [2]Research Foundation-Flanders (FWO), Brussels, Belgium. [3]Dept of Dermatology, Ghent University Hospital, Ghent, Belgium. [4]Dept of Diagnostic Sciences, Ghent University, Ghent, Belgium.

Correspondence: Marijn M. Speeckaert, Ghent University Hospital, Dept of Nephrology, Corneel Heymanslaan 10 9000 Ghent, Belgium. E-mail: Marijn.Speeckaert@ugent.be

@ERSpublications
Besides adiposity and skin pigmentation, different DBP polymorphisms could also partly influence the low 25(OH)D concentrations in the BAME group with COVID-19 https://bit.ly/3bIQRsm

Cite this article as: Speeckaert MM, Speeckaert R, Delanghe JR. Genetic polymorphisms, vitamin D binding protein and vitamin D deficiency in COVID-19. *Eur Respir J* 2021; 57: 2004638 [https://doi.org/10.1183/13993003.04638-2020].

To the Editor:

With interest, we read the paper of Faniyi *et al.* [1], which investigated the relationship between vitamin D status and seroconversion for coronavirus disease 2019 (COVID-19) in UK healthcare workers. More specifically, vitamin D deficiency was an independent risk factor for the development of COVID-19 seroconversion, with the biggest differences seen in the Black, Asian and minority ethnic (BAME) male group. Although several comorbidities were taken into account, we would like to highlight the importance of vitamin D binding protein (DBP) and its polymorphism in the interpretation of low 25-hydroxyvitamin D (25(OH)D) levels in the BAME population with COVID-19.