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## OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS Home | Current Issue | AAP Policy | eArchives | Supplements | Topic Collections | Subscribe | Contact Us Published online March 2, 2009 PEDIATRICS Vol. 123 No. 3 March 2009, pp. 917-923 (doi:10.1542/peds.2008-1173) ARTICLE This Article Search Advanced Search Maternal Vitamin B<sub>12</sub> Status and Risk of Neural Full Text **Tube Defects in a Population With High Neural** Full Text (PDF) **MY PEDIATRICS** Tube Defect Prevalence and No Folic Acid Submit a response Fortification Alert me when this article is cited Join/Subscribe Alert me when eLetters are posted Manage My Account Anne M. Molloy, PhD<sup>a</sup>, Peadar N. Kirke, FFPHMI<sup>b</sup>, Alert me if a correction is posted Renew My Subscription James F. Troendle, PhD<sup>c</sup>, Helen Burke, BSocSc<sup>b</sup>, Citation Map RSS Feeds Marie Sutton, MB, MPH<sup>b</sup>, Lawrence C. Brody, PhD<sup>d</sup>, Services John M. Scott, ScD<sup>e</sup> and James L. Mills, MD, MS<sup>c</sup> **INSTITUTIONS** E-mail this article to a friend Manage My Account <sup>a</sup> Schools of Medicine Similar articles in this journal Activate My Subscriptions <sup>e</sup> Immunology and Biochemistry and Immunology, Trinity Similar articles in PubMed College, Dublin, Ireland Alert me to new issues of the journal **AUTHORS** <sup>b</sup> Child Health Epidemiology Unit, Health Research Board, Add to My File Cabinet Dublin, Ireland **Author Guidelines** Download to citation manager **Copyright Form** <sup>c</sup> Division of Epidemiology, Statistics, and Prevention Request Permissions **Editorial Policies** Research, Eunice Kennedy Shriver National Institute of Child **Citing Articles** Submit and Track My Health and Human Development, National Institutes of Manuscript Citing Articles via CrossRef Health, Bethesda, Maryland <sup>d</sup> Molecular Pathogenesis Section, Genome Technology **Google Scholar** JOURNAL INFORMATION Branch, National Human Genome Research Institute, Articles by Molloy, A. M. Bethesda, Maryland About the Journal Articles by Mills, J. L. **Editorial Board** OBJECTIVE. Folic acid fortification has reduced neural tube For News Media **PubMed** defect prevalence by 50% to 70%. It is unlikely that For Advertisers fortification levels will be increased to reduce neural tube PubMed Citation Articles by Molloy, A. M. defect prevalence further. Therefore, it is important to **SERVICES** Articles by Mills, J. L. identify other modifiable risk factors. Vitamin B<sub>12</sub> is Permissions **Related Collections** metabolically related to folate; moreover, previous studies Reprints have found low B<sub>12</sub> status in mothers of children affected by Nutrition & Metabolism **RELATED RESOURCES** neural tube defect. Our objective was to quantify the effect **AAP** Journals

of low B<sub>12</sub> status on neural tube defect risk in a high-prevalence, unfortified population.

METHODS. We assessed pregnancy vitamin  $B_{12}$  status concentrations in blood samples taken at an average of 15 weeks' gestation from 3 independent nested case-control groups of Irish women

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within population-based cohorts, at a time when vitamin supplementation or food fortification was rare. Group 1 blood samples were from 95 women during a neural tube defect-affected pregnancy and 265 control subjects. Group 2 included blood samples from 107 women who had a previous neural tube defect birth but whose current pregnancy was not affected and 414 control subjects. Group 3 samples were from 76 women during an affected pregnancy and 222 control subjects.

RESULTS. Mothers of children affected by neural tube defect had significantly lower B<sub>12</sub> status. In all 3 groups those in the lowest B<sub>12</sub> quartiles, compared with the highest, had between two and threefold higher adjusted odds ratios for being the mother of a child affected by neural tube defect. Pregnancy blood B<sub>12</sub> concentrations of <250 ng/L were associated with the highest risks.

CONCLUSIONS. Deficient or inadequate maternal vitamin B<sub>12</sub> status is associated with a significantly increased risk for neural tube defects. We suggest that women have vitamin B<sub>12</sub> levels of >300 ng/L (221 pmol/L) before becoming pregnant. Improving B<sub>12</sub> status beyond this level may afford a further reduction in risk, but this is uncertain.

Key Words: vitamin B<sub>12</sub> • cobalamin • neural tube defects • folic acid fortification • folate

**Abbreviations:** NTD—neural tube defect • B<sub>12</sub>—vitamin B<sub>12</sub> • AP—affected pregnancy • NAP nonaffected pregnancy • RCF—red cell folate • OR—odds ratio

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