Association of vitamin D receptor gene polymorphisms and serum 25-hydroxyvitamin D levels with Crohn's disease in Chinese patients.

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Abstract

BACKGROUND AND AIM: The vitamin D receptor (VDR) regulates immune responses and inflammation through binding with 1,25-dihydroxyvitamin D, the active form of vitamin D. The serum 25-hydroxyvitamin D (25(OH)D) level clinically reflects vitamin D status in the human body. We investigated the association of VDR polymorphisms and 25(OH)D levels in Chinese patients with Crohn's disease (CD).

METHODS: Vitamin D receptor polymorphisms (Fokl, Bsml, Apal, and Taql) were genotyped by SNaPshot. Serum 25(OH)D levels were measured by electro-chemiluminescence immunoassay.

RESULTS: A total of 297 patients with CD and 446 controls were recruited. Compared with controls, mutant alleles and genotypes of Bsml and Taql were less prevalent in patients with CD (all P < 0.05/4 = 0.0125). The AAC haplotype formed by Bsml, Apal, and Taql was also less prevalent in patients with CD (P = 0.004). Furthermore, 124 patients and 188 controls were randomly selected for measurements of 25(OH)D levels. Average 25(OH)D level was lower in patients with CD than in controls (15.46 ± 8.11 vs 21.64 ± 9.45 ng/mL, P < 0.001) and negatively linked to CD activity index (β = -0.829, P < 0.001), platelet count (β = -0.253, P < 0.001) and neutrophil percentage (β = -0.136, P = 0.005) in patients with CD. The Apal mutant genotype and vitamin D deficiency (<20 ng/mL) were independently associated with CD (P = 0.009, P < 0.001, respectively). In patients with CD, vitamin D deficiency interacted with Fokl, Apal, and Taql mutant genotypes (P = 0.027, P = 0.024, and P = 0.040, respectively).

CONCLUSIONS: Vitamin D receptor (Bsml, Apal, and Taql) mutations and lower 25(OH)D levels are associated with CD in Chinese patients. Moreover, VDR (Fokl, Apal, and Taql) mutations and vitamin D deficiency may have a combined impact on CD.

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KEYWORDS: 25-hydroxyvitamin D; Crohn's disease; polymorphism; vitamin D receptor

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