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## High Calcium Intake Is Associated with Earlier Mortality in Women

*Higher death rates occurred with daily intakes exceeding 1400 mg.*

Oral calcium supplementation is associated with elevated risk for adverse cardiovascular (CV) events such as myocardial infarction (e.g., *JW Gen Med May 12 2011* (Link to: <http://general-medicine.jwatch.org/cgi/content/full/2011/512/1>)). Moreover, in a recent study (*JW Gen Med Feb 26 2013* (Link to: <http://general-medicine.jwatch.org/cgi/content/full/2013/226/2>)), high-dose calcium supplementation was associated with excess CV-related mortality in men. In this prospective cohort study, Swedish investigators assessed the associations between long-term calcium intake and all-cause and CV-related death in 61,000 women born between 1914 and 1948.

Researchers estimated dietary, supplemental, and total calcium intake from food-frequency questionnaires that were completed at baseline (1987–1990) and in 1997. Median follow-up was 19 years. Compared with dietary calcium intakes of 600 to 999 mg daily, daily intakes of  $\geq 1400$  mg were associated with significantly higher rates of death from all causes (multivariate adjusted hazard ratio, 1.4), CV disease (AHR, 1.5), and ischemic heart disease (AHR, 2.1), but not from stroke. Similar results were obtained for total calcium intake. Vitamin D intake did not modify the associations.

**Comment:** In this study, high calcium intake was associated with excess risk for all-cause and CV-related mortality but not from stroke-related death. Although these results do not prove causality, they — along with the results of prior studies — suggest that people avoid excessive calcium intake (i.e.,  $\geq 1400$  mg daily) and that high calcium intake should be reserved for situations in which benefits clearly outweigh risks.

— **Paul S. Mueller, MD, MPH, FACP** (Link to: [http://general-medicine.jwatch.org/misc/board\\_about.dtl#aMueller](http://general-medicine.jwatch.org/misc/board_about.dtl#aMueller))

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