

# “Millions at Risk: A Decade of Silence from the National Academies on Correcting Vitamin D Recommendations”

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## Introduction: A Public Health Mistake No One Will Acknowledge

More than ten years ago, researchers uncovered a major statistical error in the official vitamin D recommendations used across the United States, Canada, and Europe. The finding wasn't ambiguous. It wasn't theoretical. It was a straightforward mathematical mistake with massive public health implications.

Yet in the decade since this error was documented—and independently confirmed—not a single major health organization has corrected the vitamin D RDA.

Not one. Not even a formal response.

This silence has consequences. Not abstract ones. Real ones. People rely on these numbers to make decisions about their health. When the number is wrong, the guidance is wrong. And when guidance is wrong for long enough, people get sick or injured.

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## **The Error: Clear, Repeated, and Left Unaddressed**

### **2014: The Mistake Is Exposed**

In 2014, researchers Paul Veugelers and John Paul Ekwaru reanalyzed the Institute of Medicine's own vitamin D data. They revealed that the RDA for vitamin D—**600 IU per day**—was off by a factor of ten.

Why?

Because the IOM calculation used the wrong statistical boundary.

Instead of estimating the intake needed for **97.5% of individuals**, they estimated the dose for **97.5% of group averages**.

Anyone trained in applied statistics understands the difference. It isn't subtle. And it flipped the outcome.

When corrected, the appropriate intake wasn't 600 IU. It was closer to **8,895 IU**.

### **2015: Independent Confirmation**

A year later, Robert Heaney and colleagues analyzed data from over 3,600 individuals. They arrived at nearly the same number: **around 7,000 IU a day**.

**Two independent teams.**

**Two different datasets.**

**One conclusion:**

**The official RDA is WRONG!**

This is the point where responsible oversight would have demanded a review. It never happened.

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## **A Decade of Inaction: The Question Health Authorities Have Not Answered**

Why has no public health agency acknowledged this correction?

Why has there been no re-evaluation?

Why has there been no public communication—not even an explanation for maintaining the old number?

**This silence is not neutral. It's not harmless.**

### **Vitamin D guidelines influence:**

- clinical decision-making
- diagnostic thresholds
- supplementation policies
- public health messaging
- long-term chronic illness management

Millions of people have been living under guidance that the scientific record no longer supports. Many have remained deficient despite “following the rules.” And deficiency has been repeatedly associated with weakened immunity, higher inflammation, reduced bone integrity, and worsened outcomes in multiple chronic conditions.

Without overstating any one effect, one fact remains undeniable:

**A decade-long failure to correct a documented error can and does lead to preventable harm.**

And the people harmed are not the policymakers—they are patients, seniors, immune-compromised individuals, and those living in northern regions with limited sun exposure.

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## **This Is No Longer a Scientific Disagreement—It’s a Policy Failure**

The math is not in question.

The correction is not in question.

The evidence from two independent analyses is not in question.

The only question left is this: **Why have major health organizations chosen not to act—and not to respond—despite being aware of the error for over a decade?**

People deserve an answer.

Clinicians deserve updated guidance.

And public health authorities have a responsibility to correct known mistakes, especially when those mistakes influence global health recommendations.

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## **A Call to Health Organizations: You Cannot Ignore This Any Longer**

[The National Academies of Sciences, Engineering, and Medicine](#) (NASEM), through its Food and Nutrition Board, are responsible for establishing and updating the Recommended Dietary Allowances (RDAs) as part of the broader Dietary Reference Intakes (DRIs) system.

The continued silence from institutions like the National Academies of Medicine, the NIH Office of Dietary Supplements, the World Health Organization and major international health bodies undermines public trust.

You have had more than ten years to respond. Not to agree—just to respond. And still, nothing has changed. Only silence.

This situation demands urgent attention, transparency, and corrective action. At a minimum, it requires a formal review and a public explanation.

The cost of inaction has already been paid by the public. It is time for health authorities to acknowledge the evidence, address the error, and restore confidence in the guidelines millions rely on.

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## References

1. Heaney, R. P., Armas, L. A., Shary, J. R., et al. (2015). Letter to Veugelers, P. J., & Ekwaru, J. P.: A statistical error in the estimation of the Recommended Dietary Allowance for vitamin D. *Nutrients*, 7(3), 1688. <https://doi.org/10.3390/nu7031688>
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