Clinical Study Summary

Protocol number: PAT12-730DS

Clinical Phase: Phase 3

Study dates: 10/Feb/2013 – 30/Oct/2013

Name of Test Drug:

kolekalciferol Vitamin D3 1000 IU filmtablets (cholecalciferol 1000 IU)

kolekalciferol Vitamin D3 7000 IU filmtablets (cholecalciferol 7000 IU)

kolekalciferol Vitamin D3 30000 IU filmtablets (cholecalciferol 30000 IU)

Study title: Controlled, randomized, four-arm comparative, open label, multi-centric

trial to compare the efficacy and safety parameters of the once-a-week or once-a-month administered 7000 IU, or 30000 IU vitamin D (cholecalciferol) to a 1000 IU dosage applied daily in vitamin D deficient patients

Objectives: Primary Objective Comparison efficacy by 25(OH)D and safety parameters of a daily single dose of 1000 IU to a once-a week or once-a month administered 7000 IU or 30000 IU vitamin D, respectively. Secondary Objective: Comparison efficacy by 25(OH)D and safety parameters of a daily single dose of 1000 IU to a once-a week administered 7000 IU or 30000 IU vitamin D. Register and compare the safety parameters for each group.

Trial Summary: The treatment of a daily dose of 1000 IU; versus weekly dose of 7000 IU and a monthly dose of 30,000 IU are similar in normalisation of 25(OH)D levels in Vitamin D-deficient patients. The treatment patients with 1000 IU/day dose schedule are considered effective to restore the 25(OH)D values to close normal range (above 20 ng/ml). The efficacy of 30,000 IU dose in a weekly schedule resulted in significantly faster reconciliation to normal levels of 25(OH)D for vitamin-D deficient patient compared to the standard daily dose of 1000 IU/ day schedule. As a result of treatment the serum 25(OH)D values in over 75% of patients were reached the normal level (30 ng/ml) within 2 months.

The treatment of the various daily, weekly or monthly doses of Vitamin D3 did not raise safety concerns: no difference in side effects, no alterations in laboratory safety parameters were detected between the treatment groups. The most common AEs reported are increase in urinary calcium levels (6/89), increase in urinary Ca/creatinine ratio (3/89), increase in serum calcium level (2/89) revealed no difference between treatments arms or in daily/weekly or monthly administration schedule. There was no serious adverse event (SAE) reported in overall the study. There was no dropout due to AE.

As an overall conclusion according the datasets of the study results, the treatment of the different formulations of daily, weekly and monthly schedule of Vitamin D dosages provided similar efficacy in normalisation of 25(OH)D levels in vitamin D deficient patients. The applied doses and treatment schedules of Vitamin D3 administered and did not possess difference in benefits/risk evaluation compared to 1000 IU/day standard dose. Administration of 30,000 IU dose in weekly schedule resulted in rapid and efficient resolution of vitamin D deficiency assessed by an increase of 25(OH)D levels.