




ATC codes: **A12AA20**

Indication	Calcium deficiency <b>ICD11 code: 5B5K.1</b>
Medicine type	Chemical agent
List type	Core
Formulations	Oral > Solid: 500 mg (elemental calcium)
EML status history	First added in 2013 ( <b>TRS 985</b> )
Sex	All
Age	Adolescents and adults
Therapeutic alternatives	The recommendation is for this specific medicine
Patent information	Patents have expired in most jurisdictions Read more <b>about patents</b> . 
Wikipedia	<b>Calcium</b> 
DrugBank	<b>Calcium</b> 

### Summary of evidence and Expert Committee recommendations

An application to include tablets of calcium (500 mg of elemental calcium as calcium carbonate) was prepared by the Department of Nutrition for Health and Development, Evidence and Programme Guidance unit, WHO. The Expert Committee noted that the proposed inclusion of calcium supplementation in the EML followed two recent WHO guidelines assessing the use of calcium supplements in pregnant women: WHO recommendations for the prevention and treatment of pre-eclampsia and eclampsia, published in 2011, and Calcium supplementation in pregnant women, developed in 2012 (1,2). In both guidelines, WHO makes a strong recommendation for supplementation for pregnant women with 1.5–2 g of elemental calcium per day in areas where dietary calcium intake is low, and for women at high risk of developing hypertensive disorders during pregnancy. Two recent Cochrane systematic reviews investigated whether calcium supplements consumed on a daily basis during pregnancy safely improved maternal and infant outcomes (3,4). Calcium supplementation during pregnancy significantly reduced the risk of pre-eclampsia and high blood pressure (with or without proteinuria). Two types of calcium salts (lactate and carbonate) for oral supplementation are listed in the Management Sciences for Health International Drug Price Indicator Guide (5), with estimated monthly costs of approximately US\$ 11 and US\$ 4 respectively. However, given the scarcity of comparative price data for such products, the exact choice should be guided by local availability and cost. The Expert Committee recommended the listing of solid oral dosage forms of calcium, providing 500 mg of elemental calcium per dose. The Committee also indicated that an application for calcium and other micronutrient supplementation in children would be required before this item could be considered for addition to the EMLc.

1. WHO recommendations for prevention and treatment of pre-eclampsia and eclampsia. Geneva: World Health Organization; 2011. 2. Guideline: calcium supplementation in pregnant women. Geneva: World Health Organization; 2013. 3. Hofmeyr GJ, Lawrie TA, Atallah AN, Duley L. Calcium supplementation during pregnancy for preventing hypertensive disorders and related problems. Cochrane Database Syst Rev. 2010;(8):CD001059. <http://dx.doi.org/10.1002/14651858.CD001059.pub3> PMID:20687064 4. Buppasiri P, Lumbiganon P, Thinkhamrop J, Ngamjarus C, Laopaiboon M. Calcium supplementation (other than for preventing or treating hypertension) for improving pregnancy and infant outcomes. Cochrane Database Syst Rev. 2011;(10):CD007079. <http://dx.doi.org/10.1002/14651858.CD007079.pub2> PMID:21975761 5. International drug price indicator guide. Cambridge (MA): Management Sciences for Health; 2012.

