

## Request for advice

On 12 September 2016, the President of the Health Council of the Netherlands received a request from the Minister of Health, Welfare and Sport for advice on vitamin K for infants. The Ministers wrote (letter 988700-152965-VGP):

The guideline on vitamin K administration for breastfed infants aged 0-3 months was modified in 2011. Based on a recommendation from the Health Council, the dose was increased from 25 to 150 micrograms per day in order to prevent bleeding due to vitamin K deficiency. At the time, I asked the professional groups involved, including the Dutch Paediatrics Society (NVK), to monitor this guideline.

The NVK informed me about its experiences with this guideline this past May. It bases its conclusions on the article published in 2016 in the scientific journal 'Pediatrics' about the efficacy of the current vitamin K prophylaxis in infants in the Netherlands. In the article, Professor H.J. Verkade and his colleagues at the UMC Groningen describe that the changes to vitamin K standards in 2011 have not resulted in improved protection for breastfed infants aged 0-3 months with biliary atresia, the condition based on which prophylaxis recommendation were changed.

The researchers of the UMC Groningen found an unchanged incidence of bleeding in this group of infants. According to the researchers, the incidence of such bleeding was higher than in Denmark. A different prophylactic vitamin K regimen is employed in newborns in Denmark, and bleedings are not observed in breastfed infants aged 0-3 months with biliary atresia.

The UMC Groningen researchers concluded that the current vitamin K prophylaxis regimen in the Netherlands does not provide sufficient protection for breastfed infants with biliary atresia. The NVK endorses this conclusion, and believes that an evaluation of the current vitamin K prophylaxis regimen for breastfed infants aged 0-3 months in the Netherlands is necessary.

They have requested that I evaluate this new information and examine whether this should lead to adjustment of the current vitamin K prophylaxis regimen for infants. I believe it is important to ensure this vulnerable group within Dutch society is protected. Considering the consequences of updating the current vitamin K prophylaxis regimen for infants, I would like to support my decision with evidence based research. I ask that you employ the expertise of the Health Council for this purpose.

Request for advice:

- Does recent national and international scientific research into vitamin K prophylaxis for newborn infants aged 0-3 months give reason to change the currently applicable regimen in the Netherlands on vitamin K prophylaxis for newborn infants aged 0-3 months?

- If so, can you provide a recommendation on what changes will be required in the short and long term?  
Please comment on the method of administration, frequency and dose.

Considering the target group, I kindly ask you to address this advice request as quickly as possible. In view of the possible implementation, I ask you to consider involving parties that will put the guideline into practice in your advisory process, such as the NVK, midwives and gynaecologists.

Sincerely,

the Minister of Health, Welfare and Sport

(signed)

Mrs. E.I. Schippers