

arrhythmia is possible in only about one-third of cases.

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Sunlight Exposure and Vitamin D Status in Breastfed Infant

I read with interest the recent article by Meena, *et al.* [1] published in *Indian Pediatrics* which concluded that there is a significant positive correlation between afternoon sunlight exposure and infant's vitamin D levels, independent of maternal vitamin D status. We appreciate that it was the first study of its kind for Indian infants, which could estimate the duration of sun exposure required to achieve sufficient vitamin D levels in breastfed infants at 6 months of age. These findings are important in the present scenario given the recommendation by American Academy of Pediatrics to supplement 200-400 IU/d of oral vitamin D to all newborns till 1 year of age.

But the prime limitation of cost of therapy in low income countries and poor adherence rates to supplementation in both high- and low-income countries precludes the optimization of its use in neonates. This trial was need based and addressed a very important and clinically relevant issue. However, we have few concerns related to the article.

Vitamin D level were measured using radioimmunoassay whose sensitivity is considered to be inferior as compared to tandem mass spectrometry which is now considered to be the 'gold standard' for measuring serum 25(OH)D levels. This should appear as limitation of this study [2].

In Table II of the article, the coefficient of determination is highest for morning sun index *i.e.* model II ($R^2=0.367$) followed by afternoon sun index *i.e.* model III ($R^2=0.354$), and least in cumulative sun index *i.e.* model I ($R^2=0.337$). Hence, according to this table, model II is superior to model I and III – contrary to the results mentioned by the author in result and discussion section.

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AUTHORS' REPLY

We thank the authors for the interest in our article [1], and for highlighting these points. We agree on the superiority of tandem mass spectrometry (TMS) over radioimmunoassay for vitamin D estimation. We could not measure vitamin D using TMS due to logistic concerns, and this can be considered as a limitation of our study.

R^2 was maximum in model 3 (afternoon sun index), as also mentioned in text 'Maximum R^2 (0.367) was achieved in Model 3 when afternoon sun index replaced cumulative sun index in the model. We regret the printing error in the table where values of morning and afternoon Sun index got interchanged.

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