

Vitamin C (Antiscurbutic)

Ascorbic acid

It is a water soluble vitamin, deficiency of which leads to scurvy.

Physiological action

- ① Formation of collagen.
- ② Increases the absorption of iron by reducing ferric to ferrous form.
- ③ Strong reducing agent, Antioxidant.
- ④ Supports wound healing.

Sources

- Water soluble vitamin so cooking makes 50% loss.
- Fresh Vegetables, Green leafy, pulses.
- Indian Gooseberry, Guava, Berries.
- Animal Food like milk and meat contain only little.
- If the potatoes are boiled with the skin, the vitamin diffuses into deep layers.
- Daily Requirement $\Rightarrow$ 30-40 mg ~~day~~.
- Body cannot store them for long time.

Scurvy $\Rightarrow$ Deficiency of Vitamin C.

Risk factors:

- Babies fed on cows milk for more than 1 year.
- $\Rightarrow$ Alcoholism, tea drinking, smokers, pregnancy and thyrotoxicosis, malabsorption.

Clinical Features

- $\Rightarrow$ Classical scurvy is seen only here.
- Frequently in India as Indian diet contains small amount of vit. C.

- Usually starts as lassitude, weakness and normocytic normochromic anemia.

Haemorrhages → Bleeding and spongy gums

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Subperiosteal hemorrhage → Easily bruised and bleeding
Poor wound healing
Bleeding under nails

Teeth → loose and infected.

Hair → Cockroach appearance, since the follicles are obstructed.

Normocytic Normochromic anemia.

Treatment → It could be fatal and cause sudden death.

→ 500 mg in Adult upto 49.

Prevention → 500 mg once a month.

Adverse effects → If more than 3 g/day

→ Digesting upsets and hypoglycemia.

→ Oxaluria and oxalate stone formation in urinary tract.