Vitamins: Are They Really as Beneficial as We Think They Are?

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Abstract

Taking multivitamins or vitamin supplements has become a part of the daily routine for many Americans. Each person takes vitamins to stay healthy for the same reason, whether they were prescribed by a doctor, recommended by a coach or colleague, child being forced to take them by parents, or self prescribed, a person takes vitamins to stay healthy. By surveying college students we were able to determine that a majority of students who take multivitamins or vitamin supplements do so because they are under the impression that the vitamins will improve their health.

Over the years, research has been done in an attempt to determine exactly how beneficial these vitamin supplements and multivitamins are. As expected, many of the surveys and research done have shown that vitamin supplements and multivitamins are beneficial to an individual’s health. Whether it increases longevity, improves bone health, or keeps people from getting sick, they are advantageous to those who take them. However, other studies have produced slightly different results. Some of the research and surveys done to study vitamins have found no negative results, but in a way, no results at all. Many studies have suggested that people are wasting their money on vitamin supplements and multivitamins because they do absolutely nothing for the individual taking them. They do not harm the individual, but they don’t help them in any way either.
In conclusion, vitamins and multivitamins have become part of many people’s daily diet. It is true that some researchers believe that taking them could very well elongate life and reduce the chance of sickness. However, they are certainly not miracle pills (avoid idiomatic expressions) the benefits are to some extent controversial and one should do a little bit of research before purchasing something that may not do anything at all.

**Introduction**

Our topic was vitamin supplements and the difference between what people thought they did do, and what they actually did do. We found that most people, like we assumed, thought that multivitamins were nothing but healthy for you. There is a significant amount of data that supports this idea, more so than the contrary. In general, we found data supporting the perception that multivitamins are beneficial to your health, but we also found research suggesting and that they could also do nothing or even harm you.

**Ethnographic Methods**

In order to gather information regarding the perception of multivitamins and their effects, we surveyed SUNY Geneseo students and asked questions about health, vitamin use, and perspectives. We also found some information on who uses multivitamins through scholarly articles. Sample size?

**Results of Ethnographic Research**

Through our survey (of who? describe sample), we found that the majority of multivitamin users exercised more than once a week, didn’t smoke, and ate fruits and vegetables. Surprisingly, many of the vitamin users still believed that getting the correct amount of vitamins and nutrients should be done through a healthy diet. As far as vitamins being considered beneficial or not, the population seemed to be split. 55% believed that they are beneficial while 32% people weren’t entirely sure. The remaining 13% didn’t think vitamins were beneficial. Most students said that they have never been advised not to take vitamins, but the few that were advised, were told not to take them if they were taking other medications that would provide too much of a specific vitamin or nutrient. Also, most vitamin-users didn’t consider themselves athletes anymore. There appeared to be a large gap in the range of years that students have been taking vitamins. Many replied that they have been taking them their whole lives, while others just started taking them recently. From our data, multivitamins appeared to have no effect on how often people get sick.

Also, there were some interesting statistics found within an experiment done in “Multivitamin Use Among Multi-Ethnic, Low-Income Adults” (Author date) where researchers found that education, employment and insurance were not linked to multivitamin use. Regarding ethnicity, Hispanics showed the lowest percentage of people who take multivitamins. When comparing health status and vitamin use, it turned out that there was also no correlation.

I would have liked to have seen a better description of your sample population and more of the results, perhaps in the form of a table.

**Scientific Perspective**

The research we summarize below shows that vitamin supplements and multivitamins have been associated not only with a healthier lifestyle and more positive body image, but also with decreasing mortality in the elderly and those afflicted with HIV/AIDS, colon cancer, stomach cancer, cardiovascular disease, and VAD.

Individuals taking a multivitamin containing folic acid saw “a small reduction in risk of colon cancer mortality after 15 years since first use” (Calle 2001; direct quotes need page numbers). Research has been fairly consistent showing that vitamin C intake, along with vitamins E and A, plays a role in reducing the risk of stomach cancer and cardiovascular disease. The presence of these vitamins “increase the body’s defense system against free radicals and reduce the risk of arteriosclerosis” (Enstrom 1992: direct quotes need page numbers).

Vitamin A has been proven to decrease overall mortality of children in underdeveloped countries by 30%, those with measles by 60%, and solve the problem of VAD (source? is if Fawzi?). It has been proposed (who proposed this? avoid passive construction) that vitamin A supplements “should be considered as part of the standard of care among children infected with HIV” because it has been proven to decrease the death rate of children infected with the disease (Fawzi 2000 direct quotes need page numbers).

Also, many aging Americans are not receiving nearly as much vitamin D as necessary, yet it is proven that adequate amounts of vitamin D would be beneficial to one’s health and elongate life (Keast 2004).

these paragraphs are too short and choppy. Paragraphs outside of newspapers have to be more than one paragraph. This is noted in the assignment guidelines.

In the United States, children who reported taking vitamin supplements daily were most likely to have healthy diets, positive self-images, watch less television, and more physical activity. Children who did not take vitamins more often showed unhealthy dietary profiles (George 2009). Although this study does exemplify the effects of vitamins, it does show that they are often associated with a healthier lifestyle, good point.

It has been shown that (who showed? avoid passive construction) seniors need about 800 milligrams of Calcium that are supposed to should be consumed per each day along with 800 milligrams of Vitamin D. Diet alone will not account for the entire necessary dosage, and multivitamins designed for seniors usually don’t contain the full amount either. “Among the bestselling brands, for example, Centrum Silver contains 200 milligrams of calcium, 400 IU of vitamin D” (Tufts University no author??? 2010). Even though vitamins may not contain all the vitamins that you need, they can still make up for what your diet lacks.
Although some nutrients like vitamin C, which are very prominent in multivitamins, may help you live longer (Enstrom 1992) there are other ingredients in them which may not be as good for you as you think. “Study after study finds little or no long-lasting benefit from taking a daily multivitamin-and-mineral” (Schardt 2011: page number). Multivitamins can be useful to fill in some shortages of vitamins and minerals, but there are three nutrients that scientists have under their watch. One of these nutrients is folic acid, which is useful in preventing anemia and birth defects. According to a study done by the North Carolina School of Medicine (author? date?), men who took folic acid supplements where were three times more likely to develop prostate cancer. Now, this can be misleading because that could only happen if you are taking too much of folic acid. Recent studies said that a moderate amount is good and healthy, like the amount you get in your fruits and vegetables. However, with a multivitamin supplement this can push the limit over the edge. these sentences on folic acid are confusing and could be clearer and more streamlined. Another nutrient that scientists have a close eye on is Selenium, which in high doses can increase your risk of diabetes. Again, this is only if you take too much too often. The third nutrient is vitamin A, and a study done by Harvard researches (author, date?) showed that too much of this in women increases the risk of bone fractures (Schardt 2011).

Another vitamin that has recently concerned scientists is vitamin E. The Selenium and Vitamin E Cancer Prevention Trial (SELECT) study participants (written by?? your referencing almost obscures your sources. Make it easy for the reader to figure out your sources, usually with an author and date) were told to stop taking these supplements because they found an increased chance of prostate cancer (Vitamin E) and type II diabetes (Selenium). Also, “The increased risk for the association of lung cancer and vitamin E was equivalent to a 7% rise for every extra 100mg of vitamin E taken per day over a decade” (O’Connell 2009: page number). Other researchers (such as?) believe that vitamin E could help immune functions in seniors, but it is recommended to obtain these from a healthy diet rather than a multivitamin. Disappointing to see the repeated use of the passive construction (e.g., “It is recommended”), given that I discuss this on the assignment description and have spent time on it in class. You are obscuring the sources of your information,

Another problem with multivitamins is that their labeling data is out of date. “For example, an MVM (multivitamin-mineral supplements) that contains 100% of the daily value for vitamin D provides only 67% of today’s recommended dietary allowance or adequate intake for adults older than 70 years” (Marra 2008: page number). Marra (2008) also said that the quality and safety of MVMs is inadequate, as there is not enough scientific research out there to prove the benefits or shortcomings of multivitamins (Marra 2008).

There are also many claims that say that Vitamin A, D, and E, as well as zinc, remove comma will help to improve your immune system, “but the human immune system is complex, and the evidence that any single nutrient or combination of vitamins significantly improves its functioning is mixed at best” (Tufts University 2010 author? page number?). Though there may be a slight possibility of vitamins helping certain parts of the body, the likelihood that it will benefit your immune system as a whole is very low.

Many believe that B vitamins are designed to increase your body’s abilities to turn the food you consume into more energy to be used throughout the day. Even though this is one of the functions of B vitamins, most scientists say that the necessary amount of them can be obtained through diet and that “the added B vitamins in many multivitamins...mostly just get flushed out of your system” (Tufts University 2010 author? page number?).

**Conclusion**

In conclusion, there is sufficient evidence out there to question the true effects of multivitamins, but there isn’t any hard evidence that they are either beneficial or harmful to your health in the long term. We think that there should be additional research on the long term effects of the average multivitamin on healthy people of all ages to get more conclusive data. Also, the labeling should be fixed updated? so people are aware of what they are putting in their bodies. It would have been appropriate to reference your survey information as well.

**Scholarly and Peer-Reviewed References Cited**

**Source 1:**

sources should not be numbered, just listed alphabetically.


**Source 2:**


**Source 3:**

**Source 4:**

Enstrom, James; Kanim, Linda; Klein, Morton


**Source 5:**

Fawzi, Wafaie W.; Villamore, Eduardo


**Source 6:**

George, Goldy C.; Hoelscher, Deanna M.; Kelder, Steven H.; Nicklas, Theresa A.


**Source 7:**

Hannan, Marian T.; McLean, Robert R.; Sahni, Shivani; Zoltick, Emilie S.;


**Source 8:**

Keast, Debra R.; Holick, Michael F.; Moore, Carolyn; Murphy, Mary M.


**Source 9:**

Marra, Melissa V.; Wellman, Nancy S.


**Source 10:**

O'Connell, Nicola


**Source 11:**

Scheidt, David


**Source 12:**


**Appendix**