DIET & WEIGHT

Do You Actually Need More Calcium?

Your age, diet and life stage matter more than supplement marketing-and sometimes a calcium question needs a clinician, not another tablet.

The gap hiding in plain sight

You finish breakfast and calcium has barely crossed your mind. That is often how this nutrient works: quietly present in milk, yogurt or fortified cereal-or quietly missing when those foods have slipped out of your routine. You will not necessarily spot the gap by how you feel. But over time, consistently getting too little can leave your bones paying the difference.

Your body contains more calcium than any other mineral, and almost all of it is stored in your bones and teeth. That store is not decorative. Calcium also helps muscles move, nerves carry messages, blood vessels move blood and hormones perform many of their jobs. When your diet does not provide enough, your body can take the calcium it needs from bone.

That trade can keep essential functions going, but it is not free. Over time, drawing calcium from bone can weaken it and raise the risk of osteoporosis, in which bones become weaker and more likely to break. In children, too little calcium can contribute to rickets; soft bones can also occur in children and adults as osteomalacia.

This does not mean everyone needs a supplement. Food can provide enough calcium, and the amount you need changes with age and sex. The useful question is not whether calcium matters. It is whether your usual meals reliably contain enough for the stage of life you are in.

The years that ask for more

Calcium needs rise during periods when bones are being built quickly. Children aged four to eight need 1,000 milligrams a day, while those aged nine to eighteen need 1,300 milligrams. Pregnant and breastfeeding teenagers also need 1,300 milligrams. These are food-and-drink targets, not instructions to take that amount as a supplement.

For most adults aged nineteen to fifty, the recommended amount is 1,000 milligrams a day. Pregnancy and breastfeeding do not raise that recommendation for adults: it remains 1,000 milligrams. The need changes later, when women older than fifty and adults of any sex older than seventy are advised to get 1,200 milligrams a day.

Men aged fifty-one to seventy remain at 1,000 milligrams. After menopause, however, the

body absorbs and retains less calcium. That makes the contents of an ordinary day's meals more important, not because every postmenopausal woman automatically needs tablets, but because the same casual eating pattern may no longer cover the recommendation.

Age is not the only clue. Children and teenagers, people who do not drink milk or eat other dairy products, and adults over fifty living in poverty may have more difficulty getting enough. People who are Black or Asian are also among the groups identified as potentially having trouble meeting their needs. None of those categories proves an individual shortfall; each is a reason to look more closely.

More calcium is not automatically the answer to an abnormal calcium result.

Dairy-free needs more attention, not panic

Milk, cheese and yogurt are the main calcium sources for many people in the United States, so removing dairy can remove a dependable part of the diet. It does not make adequate calcium impossible. Kale, broccoli, Chinese cabbage, calcium-set tofu, edible-boned sardines and canned salmon can all contribute, as can calcium-fortified drinks, cereals and juices.

The label matters with fortified foods because calcium is added only to some products. Soy and rice drinks, breakfast cereals, juice, oatmeal and tofu may contain calcium, but you cannot assume that every version does. Checking the calcium information turns "plant-based" from a broad identity into a meal-by-meal accounting question.

A 2022 systematic review of 141 studies found that calcium intake was generally lower in people eating vegetarian and vegan diets than in meat-eaters. Vegans had the lowest calcium intake and lower bone mineral density. Yet the review also found nutrient inadequacies across vegan, vegetarian and meat-based patterns, with some meat-eaters also at risk of inadequate calcium intake.

A separate 2021 systematic review of 48 European studies reached a similar, if sobering, conclusion: calcium intake in the majority of vegans was below recommendations. That does not mean a vegan diet inevitably causes harm, and low intake was not always linked with health impairment. It does mean calcium deserves deliberate planning when dairy and all animal products are excluded.

A supplement is not a reflex

Calcium supplements are available alone and in multivitamins, but the existence of a tablet does not tell you whether you need it. Food remains a practical first place to look. If your

regular meals already include several dependable calcium sources, adding more without discussing it with a health professional may answer a question you did not have.

The two main supplement forms are calcium carbonate and calcium citrate. Calcium carbonate is absorbed best with food. Calcium citrate can be absorbed on an empty or full stomach and is absorbed more easily by people with low stomach acid. Supplements can cause gas, bloating and constipation in some people.

The decision becomes medical when a blood test is abnormal or a health professional is investigating calcium balance. Most people have four pea-sized parathyroid glands in the neck. They produce parathyroid hormone (PTH), which helps regulate calcium and phosphorus. Too much PTH can raise blood calcium; too little can leave blood calcium too low.

More calcium is not automatically the answer to an abnormal calcium result. Parathyroid disorders can disturb the balance in either direction, and care is aimed at restoring calcium and phosphorus balance. If you are considering a supplement, especially because of a test result or known gland disorder, ask your health care provider whether you need one and how much. A calcium blood test may be part of that conversation.

Monday's calcium check

On Monday, do not begin with a bottle of tablets. Begin with the foods and drinks you actually use. Put the milk or fortified alternative, yogurt, cheese, tofu, cereal, leafy greens and edible-boned fish that appear in your routine on one mental list. Leave out foods you merely intend to eat.

Next, examine the labels on any fortified cereal, juice, soy drink, rice drink or tofu. The word "fortified" is not something to guess from the front of a package; the calcium information on the label tells you whether that food is doing meaningful work in your diet. Unfortified products may still suit you, but they cannot fill a calcium gap they do not address.

Then compare the pattern with your life stage. Pay particular attention if you are between nine and eighteen, a woman over fifty, an adult over seventy, postmenopausal, pregnant or breastfeeding, or avoiding dairy. If dependable calcium foods rarely appear, take that observation-not a self-selected supplement dose-to a health professional.

This small audit takes the food labels from the cartons, tins and packets you already buy, plus a pen and a sheet of paper. Write down your regular calcium sources and circle the days that contain none. By the end of the week, you will have something more useful than a vague worry: a visible pattern you can improve with food or bring to a clinician.

Where this comes from

- Calcium

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/calcium.html
- Parathyroid Disorders

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/parathyroiddisorders.html
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  Nutrients, 2022 · https://pubmed.ncbi.nlm.nih.gov/35010904/
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  Clinical nutrition (Edinburgh, Scotland), 2021 · https://pubmed.ncbi.nlm.nih.gov/33341313/