UV-B and vitamin D₃ metabolism in juvenile Komodo dragons (Varanus Komodoensis)

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Abstract
The aim of this research project was to assess the vitamin D status in juvenile Komodo dragons held in captivity in Rotterdam Zoo. In addition, the effect of interference with UV-B on the serum levels of vitamin D metabolites and on the serum calcium concentrations were investigated in three Komodo dragons. Supplying 450 IU vitamin D₃/kg feed orally did not increase 25-hydroxyvitamin D₃ (25-(OH)D₃), the 24-hydroxylated metabolite of vitamin D (24,25-(OH)₂D₃), 1,25-dihydroxyvitamin D₃ (1,25-(OH)₂D₃) and calcium levels. In contrast, exposing the Komodo dragons to UV-B altered the levels of vitamin D metabolites. The amount of 25-(OH)D₃ increased in komodo dragon 1 (K1) (18 to 195 nmol/ml) and in komodo dragon no 2 (K2) (31 to 291 nmol/ml). The amount of 1,25-(OH)₂D₃ did not change significantly in both komodo dragons (139.5 ± 1.6 to 235.3 pmol/l). Measurement of 24,25-(OH)₂D₃ in K2 showed a dramatically improvement after exposing to UV-B; the amount of 24,25-(OH)₂D₃ rose (7.5 to 448.1 ng/ml). Komodo dragon 3 (K3) was send to Gran Canaria where it received natural UV-B. The level of 25-(OH)D₃ improved from 18 to 272 nmol/l. The amount of 1,25-(OH)₂D₃ did not increase either.
In all komodo dragons the calcium level remained stable and within the range 3.18 to 4.44 nmol/l.
The present study documents for the first time the levels of three vitamin D₃ metabolites and their regulation by UV-B in Komodo dragons. According to literature low levels of 25-(OH)D₃ have caused bone defects in juvenile Komodo dragons. The current data show a clear effect of UV-B on the 25-(OH)D₃ levels and a concomitant rise in serum 24,25-(OH)₂D₃ levels while 1,25-(OH)₂D₃ levels remained constant. Although we have no data on the bone metabolism in our 3 Komodo dragons it is tempting to speculate in view of the published improvements of bone after UV-B treatment, that 24,25-(OH)₂D₃ is involved in bone metabolism in Komodo dragons. This would be in line with data obtained in chicken and human showing a positive effect on bone.
UV-B measurements of a UV-B radiating lamp shows that the amount of UV-B declines rapidly during time. Also the decay rate differs from lamp to lamp. If “UV-B” lamps are used for synthesising vitamin D₃ through the skin the UV-B radiation should be measured regularly and the lamp should be replaced in time before the UV-B radiation is too low for his synthesising purposes.
This study shows clearly that, although this is a preliminary study, there is a dramatic change in vitamin D metabolites when using feeds with vitamin D versus UV-B light in juvenile komodo dragons.

Introduction
Komodo dragons (Varanus komodoensis) are rare animals, which only inhabit the islands of Komodo, Rintja, and the western half of Flores in Indonesia. Reports of animals on smaller islands nearby, including Padar and Gill Montang are probably based on observations of movement of transient animals by swimming to these islands. Komodo dragons live in the tropics on 8 Degrees Southern latitude which means that the intensity of sunlight is much higher there than in Western Europe for example. In nature Komodo dragons bask in the morning, from 15 minutes to more than 3 hours (Auffenberg 1981). These animals are opportunistic carnivores, at the top of the food chain on these Indonesian islands. It has been suggested that Komodo dragons as alpha predators can survive on these islands because they are ectotherm, which means that they require less food than mammals in other parts of the world at the top of the food chain. As adaptation to survival during long periods of low prey density, a Komodo dragon in one meal can consume up to 80 % of its own body weight. They feed on live prey as well as on carrion. They are capable of taking
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down deer, wild boars and water buffalos. When necessary they do not feed for months at a
time. Young Komodo dragons feed on insects, small birds and mammals and on other reptiles
which may be more readily available throughout the year (Walsh 1999).
Komodo dragons are listed on Cites Appendix 1 by IUCN. The wild population can be
considered as several thousands of animals. The major threats include habitat alteration,
poaching of prey species and perhaps tourism.

The total captive population as of November 1998 was 272 animals which consisted of 65
males, 50 females and 157 of unknown sexes in 49 institutions. In Indonesian zoos live 160
animals, in North America 82, in Europe 14 and in Asia (- Indonesia) and Australia both 8
animals. About a dozen successful breedings have been recorded world wide. Zoos in Europe
which maintain Komodo dragons are Thoiry in France, Chester in United Kingdom, Lisbon in
Portugal, Reptillad on the Canary Islands in Spain, Zoo Berlin in Germany, Pilzen in the
Czech Republic and Rotterdam Zoo in the Netherlands.

In captivity an adult Komodo dragon eats 1.5 – 3.0 kg of rats a week, depending upon the size
of the lizard and the time of the year. In general no vitamins and minerals are supplemented.
A diet of whole animals combined with access to hot spots up to 40º C and natural or artificial
UV-B light are thought to be adequate to promote healthy growth and development for adult
Komodo dragons.

Hatchlings are fed daily for the first eight months and then every third day throughout the
next year. In captivity they live on a diet comprising 20 % of whole mice and 80 % of
chopped beef or lamb to which a vitamin and mineral supplement is added (Walsh 1999).

Bone problems in (juvenile) Komodo dragons

It was reported by Allen et al. (1994) that nine of the twelve hatched Komodo dragons in
Washington Zoo had long bone fractures which were discovered at about two months of age.
It was discovered that the 25-dihydroxvitamin D (25-(OH)D3) level, which is one of the
intermediaries metabolics in the Vitamin D3 synthesis, was low. After exposing the animals
during two months to UV-B the 25-(OH)D3 level increased significantly. It was presumed that
rapid growing animals have increased requirements for calcium (Ca), phosphorus (P), and
vitamin D3 and that non-reproductively active adults may be more tolerant to low levels of
Ca, P and/or vitamin D3, or low exposure to UV-B.

In October 1995 Rotterdam Zoo obtained three juvenile Komodo dragons which were born in
the National Zoo in Washington D.C. (USA). From Washington it was known that the
juveniles received UV-B light in order to synthesize vitamin D3 and to prevent bone
problems. At first it was decided that the young Komodo dragons did not receive UV-B or
extra vitamin D at all. At a later stage it was decided to add vitamin D3 to their diet and
months later to expose them to an UV-B emitting lamp. One of the juvenile dragons was sent
to Gran Canaria in Spain in June 1999.

Vitamin D3 metabolism
Rachitis is a deficiency disease of vitamin D, which appears to have been a problem recorded
in ancient times; evidence shows that rickets occurred in the Neanderthal man about 50,000
BC. (Machlin, 1990). The major effects of vitamin D are to increase the active absorption of
Calcium-ion from the proximal intestine and to increase the mineralisation of bones. Vitamin
D represents a group of closely related compounds that possess anti rachitic activity. (Machlin
1990).

A diagram depicting the synthesis and initial step of metabolism via 24-hydroxylase activity
is shown in Figure 1. There are two sources from which vitamin D3 (cholecalciferol) is
normally provided: it is produced in the skin and it is taken up via the diet.
In the skin 7-dehydrocholesterol is photo chemically converted by UV-B to provitamin D₃ that then isomerizes to vitamin D₃. Vitamin D₃ from the intestines and from the skin vitamin D₃ is bound to vitamin D binding protein and moves to the liver where it is hydroxylated at the carbon 25 position by the enzyme 25-hydroxylase to form 25-hydroxyvitamin D₃ (25-(OH)D₃). Finally, in the proximal tubules of the kidney the biologically most active vitamin D₃ metabolite, 1,25-dihydroxyvitamin D₃ (1,25-(OH)₂D₃), is formed. A second metabolite of vitamin D₃ is produced in the kidney, namely 24,25(OH)₂D₃. Generally, 24,25-(OH)₂D₃ has been considered to be the first step in the degradation pathway of 1,25-(OH)₂D₃ and 25-(OH)D₃. However, several human and animal studies demonstrated a positive contribution of 24,25-(OH)₂D₃ either alone or in combination with other hormones to bone metabolism (van Leeuwen et al., 2001) Recent studies in chickens suggest that 24,25-(OH)₂D₃ together with 1,25-(OH)₂D₃ treatment improves fracture healing and that 24,25-(OH)₂D₃ serum levels are correlated to fracture healing (Kato 1998, Seo 1997). The synthesis of 1,25-(OH)₂D₃ is tightly controlled in order to maintain the calcium homeostasis. The major stimulators of 1,25-(OH)₂D₃ formation are low serum calcium, parathyroid hormone and low serum phosphate levels. Increased serum calcium levels (hypercalcemia) inhibits formation of 1,25-(OH)₂D₃. Most interestingly, 1,25-(OH)₂D₃ itself inhibits its own formation but stimulates 24-hydroxylase activity and the formation of 24,25-(OH)₂D₃ and 1,24,25-(OH)₃D₃. Thus the metabolic clearance of 1,25-(OH)₂D₃ is enhanced. By these regulatory mechanisms toxic effects of hypercalcemia (too much calcium) in the blood is prevented. Figure 1: Diagram of the vitamin D₃ synthesis. Details are described in the text above.

- insert figure 1 here-

UV and UV-B meter
The spectrum of irradiance of wavelengths that reach the earthly atmosphere from the sun is approximately from 100 to 3200 nanometer (nm). Molecules in the atmosphere absorb certain wavelengths, so that the solar spectrum is attenuated when the radiation reaches the surface of earth. Some of the solar radiation is partly absorbed by ozone, oxygen, carbon dioxide and water. It means that life on earth is in principal exposed to Ultra Violet (UV), Visible Light and Near Infra Red. The wavelength of Near Infra Red is longer than 700 nm. The Visible Light has a wavelength from 400 to 700 nm. UV can be divided into UV-C with a range from 100-280 nm, UV-B with a range from 280-315 nm and UV-A with a length of 315-400 nm. As mentioned before UV-B plays a major role in converting 7-dehydrocholesterol into provitamin D₃ in the skin with a maximum conversion at 297 plus or minus 3 nanometer. (Bernard, 1995)

Depending on the degrees latitude and the time of the year in some places it is not possible for humans to produce provitamin D₃ by natural light. In locations on 52 degrees North latitude, for example Edmonton, in Canada no provitamin D₃ will be produced from October until the beginning of April (Hollick 1997). Berlin, Warschau and Rotterdam in Europe are also situated on the same latitude. Tests in Boston (42 degrees North), have confirmed that no provitamin D₃ was produced from November until February. The European cities of Barcelona and Rome lie on 42 degrees North. Tests have demonstrated that at the latitude of Los Angeles (34 degrees North) enough provitamin D₃ is produced throughout the year. 34 degrees North is the same latitude as places in Morocco and Northern Syria in the old world! The data described tests related to humans but probably similar considerations can be made on the effect of provitamin D₃ synthesis in reptiles, for example Komodo dragons. Tests have also proven that through normal windows UV-B coming from outside is absorbed. If Komodo dragons rely on the availability of UV-B for their synthesis, it can be questionable if
especially juvenile Komodo dragons receive enough UV-B light. In order to measure the intensity of UV-B a special meter was designed. The aim of the current study was to assess the vitamin D₃ status in Komodo dragons held in captivity in the Rotterdam Zoo (i.e. at 52 degrees North). In addition, the effect of interference with UV-B on the serum levels of vitamin D₃ metabolites and on the serum calcium concentration was investigated.

Methods

The Komodo dragons
In Rotterdam Zoo the three Komodo dragons were housed according to the suggestions made by the taxon manager (Walsh 1999). All three were housed separately in a cage with a surface area of 10 square m². All the Komodo dragons were fed once a week. The diet consisted of whole rats and small rabbits. They were fed ad libitum. After 20 months K1 weighed 2.1 kg, K2 2.5 kg and K3 1.5 kg. The weight at 20 months for juveniles should be according figures of the National Zoo between 1.5 kg and 3.1 kg.

As mentioned above, in October 1995 the Komodo dragons arrived in Rotterdam Zoo.

Unfortunately it was not possible to take always blood samples from all the three Komodo dragons at the same time. Also it happened that not enough blood could be obtained for analyses.

In May 1996 (month 1) the first blood samples were taken from the tail vein using heparin tubes and immediately stored at minus 68 °C until analysing. In February 1997 (month 9) Carmix®, a vitamin and mineral supplement, was added to the diet which means 450 IU vitamin D₃ per kg food. Two months later blood samples were taken again.

Two Komodo dragons received UV-B by exposing them to the Osram Ultra-Vitalux®. The wattage of the lamp - according the manufacturer is 300 W and it has a service time of 1000 hours. The Osram Ultra-Vitalux® consists of a quartz burner and a tungsten filament which are blended in such a way that, in combination with the special glass bulb and its interior reflector, a certain radiation is emitted. The effect of this radiation is practically the same as the radiation of the natural sunlight occurring the Osram Ultra-Vitalux® manual (2001).

In month 13 K1 was exposed to UV-B and in month 21 K2 was exposed to UV-B. All lamps were hung between 60-80 cm above the ground surface in the cages in a way that the Komodo dragons had free access to the radiation of the lamps.

In month 25 K3 went to Gran Canaria, situated 28 degrees North, where it received an outdoor facility and was exposed to natural sunlight. In month 33 a blood sample of that dragon was obtained and analysed on the medical laboratory in Rotterdam.

Figure 2: Electric schedule of the UV intensity meter

- Insert acrobat figure 2 here

Vitamin D analyses
The 25-(OH)D₃ analyses were performed according the description of DiaSorin (Minnesota, USA). The assay consists of a two step procedure. The first procedure involves a rapid extraction of 25-(OH)D₃ and other hydroxylated metabolites from the serum. Following extraction, the treated sample is then assayed using an equilibrium radio immunoassay (RIA) procedure which is based on an antibody with specificity to 25-(OH)D₃. The sensitivity of this assay has shown rates to be at or below 1.5 ng/ml.
The amount of 1,25-(OH)₂D₃ was analysed by the IDS Gamma-B kit by immunoextraction followed by quantitation by ¹²⁵I radio immunoassay. The assay has a calculated sensitivity of 2.1 pg/ml.

Calcium analyses were performed using a colorimetric calcium assay (Sigma Diagnostics) All analyses were performed by the laboratories of the Department of Internal Medicine of the Erasmus MC in Rotterdam, except the analysis of 24,25-(OH)₂D₃ which was performed on the Department of Clinical Sciences of Companion Animal Medicine of the Utrecht University. 24,25-(OH)₂D₃ was quantitatively determined by a modified radio immunoassay (RIA) (DiaSorin, Stillwater, Minnesota, USA). Before processing, labeled standards 24R,25-dihydroxy[26,27-methyl-¹H]cholecalciferol (specific activity 15.4 GBq/mg, Amersham Pharmacia Biotech, UK) was added to plasma samples and to the standards of the RIA to determine individual sample recovery. Samples were extracted twice with ethylacetate:cyclohexane (1:1, v/v) and once with methanol:ethylacetate:cyclohexane (4:5:5, v/v) (Bosch 1983) and 24,25(OH)₂D₃ was separated by solid phase extraction using NH₂ cartridges (Bakerbond spe Amino Disposable Extraction Columns, J.T. Baker, Phillipsburg, USA) according to the described method of McGraw and Hug (1990). The standard curve of the stable vitamin D₃ metabolite showed good parallel dilution to the standard curve of the RIA. The intra- and inter-assay coefficient for 24,25-(OH)₂D₃ were 10.1% and 8.5%, respectively.

Design of the UV-B meter
The intensity or UV-B meter was designed and constructed by the Optic Research Group of the Technical University of Delft in the Netherlands. The UV-B meter is sensitive to a narrow wavelength band (10.17 nm at Full Weith on Half Measure) around 302.01 nm. The intensity meter consists of a photo diode, placed directly behind an interference filter to ensure that only the desired wavelengths impinge the sensor, and an LCD read out screen. For situations where it is not possible to read out this built in display, a connector is provided to connect a simple multi-meter to the UV-B meter. This enables the measurement of UV-B radiation to take place at larger distances and under otherwise impossible angles.

The photo detector from Centronic (code OSD 5.8-Q) was selected for its relatively high sensitivity for UV-B radiation. The interference filter was obtained from Oriel and was tested by the Optic Research Group on transmission besides the desired wavelength range. No leakage was observed, which means that no wavelength other than the desired ones could penetrate the filter. The peak transmission (17.25 %) of the filter was at 302.01 nm. The photons impinging on the photo detector result in a small voltage. This voltage is shown, after amplification, on the small liquid crystal display.

Up to now the UV-B meter is not calibrated absolutely and therefore it can only be used for relative measurements. It can be used to monitor UV-B radiation with time and the spatial distribution measurement of the UV-B radiation coming from a single lamp or a number of lamps. The UV-B meter can be used to check when lamps, have to be changed, and to get an impression where the UV-B rich spots are in certain areas. It can only be used to detect the light intensity differences between different animal facilities. The UV-B meter can easily be manufactured by properly educated technical staff. The costs of this meter is limited was approximately 700 Euro.

The readout in the display of the UV-B meter is in milliVolts: which means with the used photo diode that every point read out is equal to about 5nW light falling on the surface of the sensor (1 cm²). The meter was calibrated in such a way that the read out value on a distance of 1 meter is 150. The numeric value of the UV-B meter is 0.218 V/microW. It means the amount of microW/cm² is the read out value divided by 218.
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In cage no 1 (K2) the UV-B lamp was hung 80 cm above the ground and in cage 2 (K1) for practical reasons, 60 cm above the ground perpendicular under the lamp. The measurements are the average of two times measuring during the same day. The UV-B measurements were taken from the ground. Both Komodo dragons had free access to sunbathe under the lamps. The lamps were connected to a timer which means that they were on for two hours in the morning and two hours in the afternoon, every day. Every six months the lamps were changed.

Results

25-(OH)D₃, 1,25(OH)₂D₃ and 24,25-(OH)₂D₃
In table 1 and figures 3, 4 and 5 all data on changes of the amount of 25-(OH)D₃, 1,25(OH)₂D₃ and 24,25-(OH)₂D in the blood serum of K1, K2 and K3 can be found.

The Komodo dragons did not get any UV-B or orally vitamin D₃ supplement besides vitamin D from their normal diet (rabbits and rats) during their arrival from Washington in October 1995 until Mai 1997. Although they all got sufficient UV-B in Washington (Allen, personal communication) to maintain the normal level of 25-(OH)D₃ (150 – 200 nmol/ml (Gillespie 2000) the amount of 25-(OH)D₃ dropped in 18 months after arrival in Rotterdam for K1, K2 and K3. In the tables and figures these data can be found as data in month 1. It was then decided to add vitamin D to the diet: In month 9 after arrival 450 IU vitamin D₃ was supplemented per kg food to the diet of each dragon. Analyses of the amounts of 25-(OH)D₃ in month 11 showed no significant changes.

In month 13 UV-B emitting lambs (Osram Ultra-Vitalux®) were installed in the cage of K1. The amount of 25-(OH)D₃ improved as can be seen in table 1 and figure 3. K2 was exposed to UV-B in month 21 which also resulted in an increase of 25-(OH)D₃ (table 1, figure 4). After K3 has been sent to Gran Canaria in month 25 blood analyses showed an increase of 25-(OH)D₃ (table 1; figure 5).

In the same samples used for 25-(OH)D₃ also the 1,25-(OH)₂D₃ levels were determined. As can be seen in table 1 and the figures 3, 4, and 5, neither the 450 IU vitamin D supplemented food nor the UV-B treatment resulted in a clear change in 1,25-(OH)₂D₃ levels.

Another important vitamin D₃ metabolite is 24,25-(OH)₂D₃. Because of the limited amount of heparin plasma available only the 24,25-(OH)₂D₃ levels of K2 could be measured. Data were obtained before month 11 and after months 26 and 35. As shown in table 1 and figure 4, 24,25-(OH)₂D₃ rose dramatically after exposure to adequate levels of UV-B.
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Table 1: Levels of 25-(OH)D₃, 1,25-(OH)₂D₃ and 24,25-(OH)₂D₃ in the blood of the Komodo dragons.

<table>
<thead>
<tr>
<th>Month</th>
<th>Komodo dragon (K1)</th>
<th>Komodo dragon (K2)</th>
<th>Komodo dragon (K3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>18</td>
<td>235,3</td>
<td>31</td>
</tr>
<tr>
<td>11</td>
<td>26</td>
<td>159,9</td>
<td>37</td>
</tr>
<tr>
<td>18</td>
<td>131</td>
<td>132,8</td>
<td>29</td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>195</td>
<td>177,9</td>
<td>201</td>
</tr>
<tr>
<td>33</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>35</td>
<td></td>
<td>291</td>
<td>158,2</td>
</tr>
</tbody>
</table>

- Insert figures 3, 4 and 5 here-

Calcium

Figure 6 shows, that for all 3 dragons throughout the UV-B treatment or the move to Gran Canaria; serum calcium levels remained stable. The absolute serum calcium values are shown in Table 2.

Table 2: Calcium levels in the blood of Komodo dragons (mmol/l)

<table>
<thead>
<tr>
<th>Month</th>
<th>Komodo dragon 1 (K1)</th>
<th>Komodo dragon 2 (K1)</th>
<th>Komodo dragon 3 (K3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>4.16</td>
<td>3.84</td>
<td>4.48</td>
</tr>
<tr>
<td>18</td>
<td>3.18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td>3.8</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>3.7</td>
<td>4.44</td>
<td>3.98</td>
</tr>
<tr>
<td>33</td>
<td></td>
<td></td>
<td>3.86</td>
</tr>
<tr>
<td>35</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Lamp radiation

Table 3 shows the result of the declining of the amount UV-B of the used lamps in the komodo dragon facilities. The UV-B lamp from cage no 2 was after replacing used for other reptiles. Half a year later the amount of microwatts UVB/cm² was reduced to 0.16. After replacing every six month similar values were found again (personal communication, van de Koore).

Table 3: Decline in lamp radiation (Watts UV-B/cm²) of two lamps hanging in two cages.

<table>
<thead>
<tr>
<th>Month</th>
<th>Cage 1</th>
<th>Cage 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>0.72</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>0.43</td>
<td>0.8</td>
</tr>
<tr>
<td>24</td>
<td>0.34</td>
<td>0.3</td>
</tr>
<tr>
<td>25</td>
<td>0.23</td>
<td>0.34</td>
</tr>
</tbody>
</table>
Discussion
No systematic blood data could be obtained and therefore the analysed data represents a trend in the changes of the vitamin D metabolites under different circumstances. Comparing to the first levels of 25-\(\text{OH}\)D\(_3\) in month 1 to normal levels in Komodo dragons (150-200 nmol/L) when exposed to UV-B shows that these levels were very low and certainly would have caused bone problems. Similar levels were found in case of clinical lameness and poor density on radiographs, with fractures in several long bones (Gillespie 2000). Applying 450 IU vitamin D\(_3\) extra per kg food for two month did not improve the 25-\(\text{OH}\)D\(_3\) levels which suggests that juvenile Komodo dragons cannot rely on these amounts of vitamin D\(_3\) when orally supplied to satisfy their vitamin D synthesis. Exposing Komodo dragons to artificial or natural light improves the amount of 25-\(\text{OH}\)D\(_3\) within 5 months to their normal value which is 150-200 nmol/l.

No reference data were available on the amounts of 1,25-(\(\text{OH}\))\(_2\)D\(_3\). The observed data varied from 121.6 to 235.3 pmol/l. The average of the 13 blood samples from 3 komodo dragons is 163.9 pmol/l. No correlation is found after supplying extra vitamin D\(_3\) or exposing the Komodo dragons to UV-B.

Calcium levels varied from 3.18 to 4.48 mmol/l with a mean of 3.93 mmol/l in 6 samples from 3 animals. In the article of Gillespie (2000) the mean values for 48 Komodo dragons were 3.62 mmol/l with an observed range for measured values of 2.94 to 4.30. It means that the levels found for calcium in Rotterdam fall within the mean range and variation. Although normal values of 24,25-(\(\text{OH}\))\(_2\)D\(_3\) are not known it is clear that when Komodo dragons exposed to UV-B the amount of 24,25-(\(\text{OH}\))\(_2\)D\(_3\) improves significantly. Due to limited availability of serum the effect of supplying orally vitamin D\(_3\) on 24,25-(\(\text{OH}\))\(_2\)D\(_3\) levels could not be determined in this research project.

The limited data of the current study shows the effect of UV-B on the 25-(\(\text{OH}\))D\(_3\) levels in Komodo dragons. Although we have no data on the bone density of the dragons in our study, combining our observations with those in the Washington Zoo on increasing serum 25-(\(\text{OH}\))D\(_3\) and the reduction in bone problems and other clinical symptoms it is conceivable to suggest that adequate UV-B availability is important for the well being of the Komodo dragons. The current study reports for the first time 1,25-(\(\text{OH}\))\(_2\)D\(_3\) levels in Komodo dragons. An interesting observation is that throughout the treatment period the levels of the biologically most active vitamin D compound, 1,25-(\(\text{OH}\))\(_2\)D\(_3\), and of serum calcium remained stable. This is logical from a physiological point of view as calcium is a very important ion whose level needs to be controlled very tightly, because both hypocalcaemia and hypocalcaemia can be life threatening. As 1,25-(\(\text{OH}\))\(_2\)D\(_3\) is the most important regulator of serum calcium it is important that the level of this hormone is also strictly regulated. If the dramatic increase in 25-(\(\text{OH}\))\(_3\) levels after UV-B treatment would have been followed by a comparable increase in 1,25-(\(\text{OH}\))\(_2\)D\(_3\) then the animals would have become hypercalcemic. Putting Gillespie's data and the current data together it is intriguing that despite a similar 1,25-(\(\text{OH}\))\(_2\)D\(_3\) level in case of low and high 25-(\(\text{OH}\))D\(_3\) level, there seem to be clinical problems for the Komodo dragons in case of low 25-(\(\text{OH}\))D\(_3\) (Gillespie et al. 2000).

Therefore, it is tempting to speculate that an additional vitamin D\(_3\) metabolite might be important to restore the bone defects. A possible candidate is 24,25-(\(\text{OH}\))\(_2\)D\(_3\) (van Leeuwen et al., 2001), which we show here to increase in parallel to 25-(\(\text{OH}\))D\(_3\). This is not unique for Komodo dragons, as also observed in humans an increase in serum calcium or 1,25-(\(\text{OH}\))\(_2\)D\(_3\) is followed by an increase in 24-hydroxylase activity in order to prevent further formation of 1,25-(\(\text{OH}\))\(_2\)D\(_3\) and stimulated inactivation of 1,25-(\(\text{OH}\))\(_2\)D\(_3\) by forming 1,24,25-(\(\text{OH}\))\(_3\)D\(_3\). A possible role for 24,25-(\(\text{OH}\))\(_2\)D\(_3\) in this respect is supported by data in humans showing a beneficial effect on bone when 24,25-(\(\text{OH}\))\(_2\)D\(_3\) was added to the treatment with 1α-(\(\text{OH}\))-
vitamin D₃ (i.e. a precursor of 1,25-(OH)₂D₃, see figure 1) (Birkenhager-Frenkel et al., 1995). Moreover, a positive effect of 24,25-(OH)₂D₃ on fracture healing has been reported (Seo et al, 1997; Kato et al, 1998).

It is clearly shown that the amount of UV-B of, so-called, UV-B lamp declines rapidly. Not every Osram Ultra-Vitalux® has the same amount of UV-B radiation. The decay rate of UV-B radiation also differs for each lamp. The UV-B radiation in the middle of the lamp is the highest. When the sensor of the UV-B meter is moved from the centre of the lamp, the radiation declines very fast. Also if the lamp is placed higher the radiation declines rapidly (unpublished data Nijboer 2000). No UV-B radiation values were measured from other “UV-B” lamps but it could be supposed that similar values will be found. It means that when UV-B lamps are used for synthesising vitamin D₃ through the skin the amount of UV-B radiation should be measured not only when the lamps are installed but also during the burning-life of the lamp to measure the declining of UV-B in order to replace them on time.

More research is needed to estimate the minimal UV-B radiation for Komodo dragons to keep the vitamin D₃ metabolic synthesis in the normal range.
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Conclusions
1. Supplying vitamin D₃ orally to juvenile Komodo dragons does not improve serum levels of 25-(OH)D₃ and 1,25-(OH)₂D₃.
2. Exposing juvenile Komodo dragons to UV-B radiation increases the 25-(OH)D₃ and 24,25-(OH)₂D₃ levels but not the amount of 1,25-(OH)₂D₃.
3. Exposing juvenile Komodo dragons to UV-B does not change the amount of calcium in the blood.
4. Measuring UV-B radiation of lamps is necessary to get a reliable indication of the used UV-B lamps.
5. Adequate UV-B radiation is important for the vitamin D synthesis and well being of Komodo dragons.

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Acknowledgment:

CJ. Buurma, Dep. Of Internal Medicine, Erasmus Medical Center Rotterdam for technical laboratory support

Products mentioned in the text:
Carmix®: vitamin mineral supplement, manufactured by Hope Farms, Hoge Rijndijk 14, 3440 AB Woerden, The Netherlands
Osram Ultra-Vitalux®: Solar lamp, Osram, Germany

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Fig 3: Blood values found in komodo dragon no 1 (K1)

- 25-(OH)D3 nmol/L
- 1,25-(OH)2D3 pmol/L

Fig 4: Blood values found in komodo dragon no 2 (K2)

- 25-(OH)D3 nmol/L
- 1,25-(OH)2D3 pmol/L
- 24,25-(OH)2D3 ng/ml
Figure 5: Blood values found in Komodo dragon no 3 (K3)

- Blood values

Month
1 9 11 13 18 20 21 25 26 33 35

25-(OH)D3 nmol/l
1,25-(OH)2D3 pmol/l

dir. 450 IU vit DC

to Gran Canaria

Figure 6: Calcium levels in Komodo dragons

- Calcium levels

Month
1 9 11 13 18 20 21 25 26 33 35

K1 K2 K3