



Bone Mineralization and Calcium Phosphorus Metabolism

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Message from the Guest Editors

The accretion of an adequate mineral content is essential for normal bone mineralization. Mineral homeostasis requires a specific balance of parathyroid hormone, calcitonin, FGF23, and vitamin D activity on target organs (kidney, intestine, and bone). Dietary deficiencies, particularly during pediatric growth stages, and some diseases can increase the risk of mineral imbalance and the development of metabolic bone disease.

The objectives of this Special Issue of *Nutrients* are as follows:

To explore the relationship between bone mineralization and nutritional status in children and to identify the best biomarkers for mild alterations.

The majority of bone formation and mineralization occurs late in gestation. The accretion of adequate minerals is often interrupted in preterm birth. Thus, we aim to address how to improve the nutritional intake of minerals in premature infants.

To discuss how alterations in calcium phosphorus metabolism can be identified, prevented, and treated.





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