What you need to know about osteoporosis

Osteoporosis is a chronic bone disease characterized by low bone mass and deterioration of bone tissue. This leads to increased risk of broken bones, also known as fragility fractures. It is often called a ‘silent disease’ because there are no symptoms or pain until a fracture occurs.

What are the consequences of weak bones?

- Fractures can occur after a fall from standing height, a minor bump or even from bending over to tie a shoelace.
- Osteoporotic fractures commonly occur at the wrist, spine and hip.
- A curved back (‘dowager’s hump’) or height loss of more than 3 cm (just over 1 inch) is a warning sign of vertebral (spine) fractures.

How common is it?

WOMEN OVER 50 WILL EXPERIENCE OSTEOPOROTIC FRACTURES. AS WILL MEN.

Over 200 million women suffer from osteoporosis. Women are particularly susceptible because of the rapid bone loss that occurs at menopause.

In women aged over 45, osteoporosis accounts for more days spent in hospital than diabetes, heart attacks and breast cancer. In men, the risk of an osteoporotic fracture is higher than the risk of developing prostate cancer.

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What is the impact?

Globally, an osteoporotic fracture occurs every 3 seconds.

Hip fractures are associated with chronic pain, reduced mobility, disability and loss of independence: 10-20% of patients require long-term nursing care. Up to 20% of patients die in the first year following a hip fracture.

The socio-economic cost of fractures is enormous and on the increase as the world’s population ages.

In the EU alone the cost of osteoporosis is estimated at €37 billion per year.

What are the risk factors?

- Previous fracture after the age of 50
- Age
- Family history
- Early menopause
- Smoking
- Excessive alcohol intake
- Long-term corticosteroid use
- Low body mass index (BMI)
- Diseases of malabsorption
- among others...

How is it diagnosed?

Early diagnosis is important: if you’re aged over 50 you should discuss bone health with your doctor at your next check-up.

A bone-health check-up will include information about any recent fractures and a fracture risk assessment (such as FRAX®). Depending on your age and risk factors, a bone mineral density test using DXA (dual-energy X-ray absorptiometry) may be recommended.

How can osteoporosis be treated?

Treatment of osteoporosis typically involves lifestyle modification and pharmaceutical treatment as appropriate.

Adequate calcium, protein and vitamin D intake, regular weight-bearing and muscle-strengthening exercise, and falls prevention strategies are essential for anyone with weak bones. For those at high risk, there is a wide range of effective prescription therapies that offer a 30–50% reduction in fracture incidence with 3 years of treatment.

Learn more about osteoporosis and take the IOF One-Minute Osteoporosis Risk Test to learn whether you may be at risk.

References available at www.iofbonehealth.org/facts-statistics