

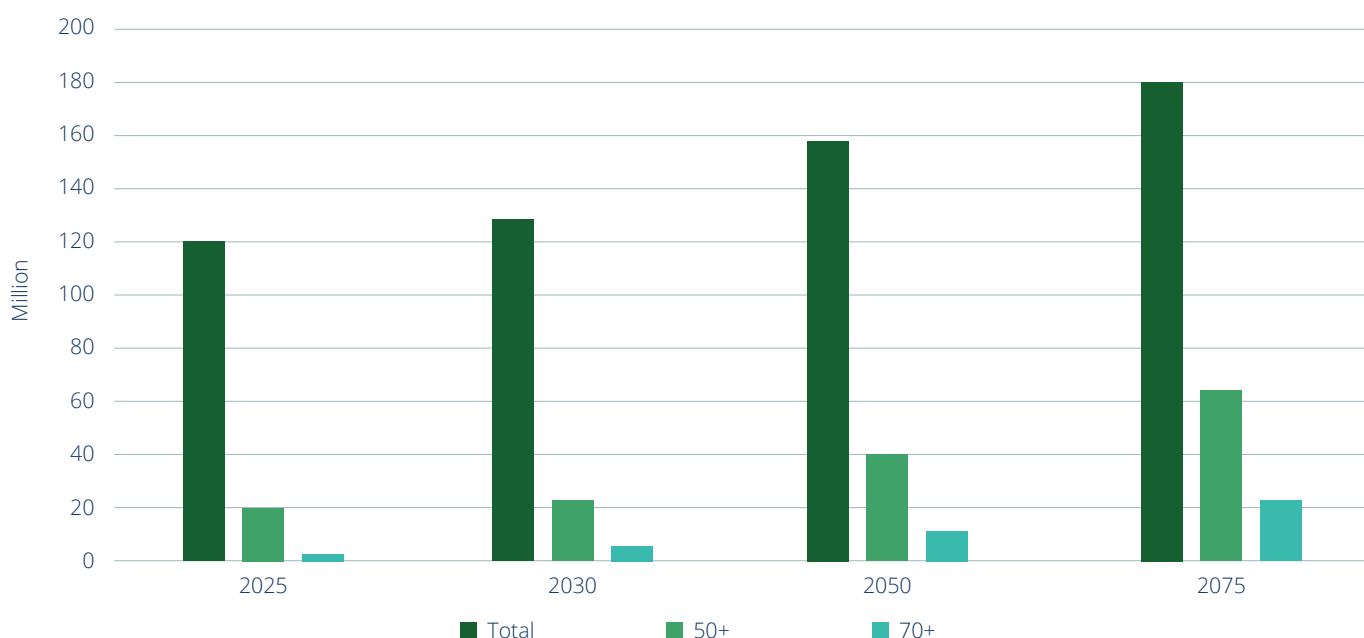
DEMOGRAPHIC TRENDS

The Philippines' population is projected to grow considerably over the coming decades, increasing by 32% from 120.1 million in 2025 to more than 158.1 million by 2050, and by a further 14% to reach 180.3 million by 2075 (*Figure 1*). Filipinos currently have an average life expectancy of 70.9 years, which is expected to rise to 82.7 years by 2075, an increase of 17%.

The proportion of Filipinos aged 50 years or older is set to rise significantly. In 2025, this group of almost 20.2 million people represents 17% of the total population. By 2075, this will increase to 36%, with numbers more than tripling to 65.3 million (*Figure 1*).

The most dramatic demographic shift in the Philippines will be among those aged 70 years or older, whose numbers are projected to surge from 4.1 million in 2025 to 24.3 million in 2075, a 491% increase in absolute terms. Equally striking is their growing share of the total population. In 2025, those aged 70+ accounted for just 3% of the Philippines' 120.1 million people. By 2075, they will make up 13% of a larger 180.3 million population, reflecting a 294% relative increase in their proportion of the total population.

Figure 1. Population projections for the Philippines from 2025 to 2075 ^[1]



CENTRALISED DATABASES FOR FRACTURES AND EPIDEMIOLOGY

A pilot Fragility Hip Fracture Registry project involving 14 public hospitals was initiated in mid-2022. This centralised database is part of an ongoing research initiative led by the Department of Orthopaedics at the University of the Philippines Manila. The project is supported by the Fragility Fracture Network (FFN) Philippines and funded by the Department of Science and Technology of the Philippines.

HEALTHCARE COSTS ASSOCIATED WITH FRAGILITY FRACTURES

Average direct hospital costs for treating osteoporotic hip fractures (USD)	Average indirect hospital costs for treating osteoporotic hip fractures (USD)	Average bed days for hip fractures
2,635 - 3,054 (public) 20,000 - 22,000 (private)	5,000	8 - 14 days

Fragility hip fractures impose an estimated annual economic burden of approximately PhP 1.09 billion (USD 22.6 million) in the Philippines^[2]. This estimate is based on the incidence of hip fractures, the size of the at-risk population, average treatment costs, and productivity losses associated with each case.

CLINICAL SPECIALTY RESPONSIBLE FOR MANAGEMENT OF OSTEOPOROSIS

Osteoporosis is not primarily managed by primary care physicians. Instead, it is under the care of rheumatologists and endocrinologists. Osteoporosis is recognised as a standalone medical specialty and is currently a formal component of specialty medical training, particularly for rheumatologists, endocrinologists, gynaecologists, orthopaedic surgeons, family medicine doctors, and rehabilitation medicine physicians.

PATIENT SUPPORT ORGANISATIONS

Replace with The Osteoporosis Society of the Philippines Foundation, Inc. (OSPFI) supports patients primarily through educational initiatives, including online webinars and virtual seminars.

FRACTURE LIAISON SERVICES (FLS) REIMBURSEMENT AND AVAILABILITY

% of hospitals with an FLS		Other fracture types identified by or referred to an FLS
1 - 9%		< 5%
Hip fractures identified by or referred to an FLS		Reimbursement mechanism to support FLS activities
< 10%		National health service and Private funding
Vertebral fractures identified by or referred to an FLS		% of patients recommended for treatment who actually receive treatment
< 5%		< 20%

AVAILABILITY AND REIMBURSEMENT OF MEDICATION

As shown in *Table 1*, a range of osteoporosis treatments are available in the Philippines. The bisphosphonate alendronate is designated as first-line treatment. Reimbursement is limited to hospitalisations; there is no reimbursement provided for anti-osteoporosis medications.

Table 1. Availability and reimbursement of osteoporosis treatments in the Philippines

Treatment	Available
Risedronate	X
Alendronate	X
Ibandronate	X
Zoledronic acid	X
Clodronate	
Pamidronate	
Raloxifene	X
Bazedoxifene	
Denosumab	X
Strontium Ranelate	
Teriparatide	X
PTH (1-84)	
Abaloparatide	
Romosozumab	X
Vitamin D/Calcium supplements	X
Calcitonin	
Hormone Replacement Therapy	X
Testosterone	
Alfacalcidol	X
Calcidiol	
Calcitriol	X
Tibolone	X

WAITING TIME FOR HIP SURGERY

Average waiting time for hip surgery after hip fracture	> 3 days
% of hip fractures surgically managed	51 - 75%

OSTEOPOROSIS AS A DOCUMENTED NATIONAL HEALTH PRIORITY (NHP)

Osteoporosis is not documented as a National Health Priority (NHP) in the Philippines.

GUIDELINES FOR OSTEOPOROSIS MANAGEMENT

The *Osteoporosis Society of the Philippines Foundation, Inc.*, as the lead organisation, has submitted the 2023 Philippine Clinical Practice Guidelines (CPG) on the screening, diagnosis, management, and prevention of primary osteoporosis and fragility fractures among postmenopausal women and elderly men ^[3] to the *Health Technology Assessment Council* (HTAC) of the Department of Health (DOH). These guidelines have been favourably approved by the Health Technology Assessment Council (HTAC) and the DOH published on its website - www.doh.gov.ph/dpcb/doh-approved-cpg.

The scope of the guidelines focuses on two key populations: postmenopausal women and elderly men. The guidelines support a population-based approach to screening and incorporate data from the *Philippine Health Examination Survey 2023*. Screening is recommended for all postmenopausal women, men aged 50 years or older, and adults with clinical risk factors for osteoporosis.

In terms of fracture risk assessment, the guidelines emphasise the importance of evaluating prior fracture history, age, bone mineral density, FRAX[®] scores, and relevant comorbidities. However, while these assessment tools are well-validated, they are currently not aligned with any existing reimbursement policies in the Philippines, as there is no formal reimbursement structure in place for osteoporosis assessment.

The guidelines also outline criteria for initiating treatment, including prior fractures, advanced age, low BMD, high FRAX[®] risk, comorbidities, and the use of medications known to increase fracture risk. These recommendations are not compatible with reimbursement policies because, currently, there is no reimbursement framework for osteoporosis treatment. However, all senior citizens in the Philippines are entitled to a 20% discount on hospitalisation, medications, meals, and certain other related expenses.

Patients were actively involved in the development of the clinical practice guidelines. An individual living with osteoporosis participated in the technical review process, and patients were also consulted during the formulation of clinical questions and throughout panel discussions. Additional details on the development of these guidelines are included in *Table 2*.

Table 2. Development of clinical guidelines for the management of osteoporosis in the Philippines	
Systematic literature review undertaken	Yes
Recommendations	Yes: Strong versus Weak
Stakeholder involvement	Yes: All physician organisations from different specialties including patients
External review	Yes
Procedure for update defined	Every 3 years or when there are new updates
Economic analysis	Yes
Editorial independence	Yes

FRACTURE RISK ASSESSMENT TOOLS

The Philippines uses both FRAX[®]^[4] and FRAXplus[®] for assessing fracture risk, with FRAX[®] being widely adopted across the country. In clinical practice, the determination of whether treatment is warranted using FRAX[®] follows several approaches. These include the use of fixed probability thresholds, age-dependent probability thresholds, and combined thresholds involving both FRAX[®] scores and bone mineral density measurements. These methods are applied consistently for both men and women.

ACCESS TO DXA AND/OR ULTRASOUND AND REIMBURSEMENT

DXA is available in the Philippines.

	Waiting time (d)	0
	Cost (USD)	50 - 300
	Is it reimbursed?	No
	Is reimbursement a barrier to accessing treatment?	Yes

No data was provided on access to ultrasound in the Philippines.

QUALITY INDICATORS

Level	Title	Topics covered	Frequency of reporting
National	2023 Clinical Practice Guidelines on Osteoporosis	Screening, prevention, diagnosis, management on PMW and elderly men	Don't know



OVERVIEW OF OSTEOPOROSIS IN THE PHILIPPINES

Osteoporosis remains a significant but under-recognised public health concern in the Philippines. Despite its growing burden, it is still not officially designated a national health priority, and fragility fractures, particularly hip fractures, are often managed without adequate urgency or emphasis on secondary prevention. The condition continues to be perceived as a silent disease and frequently misattributed as an inevitable part of ageing, rather than a preventable and treatable medical issue.

As of mid-2025, the national prevalence and incidence of osteoporosis in the Philippines has not been recently updated. However, estimates from the 2003 *National Nutrition and Health Survey* projected that the number of Filipinos at risk of osteoporosis would increase from 4 million in 2020 to over 10.2 million by 2050. Additionally, a high prevalence of suboptimal vitamin D levels has been observed nationwide, with 48.7% of the population affected by either deficiency or insufficiency. The highest rates were found in the National Capital Region (54.1%), while the lowest were recorded in Davao del Sur in Mindanao (28.9%).

The country celebrates Osteoporosis Awareness Week during the second week of October, as established by Proclamation No. 19s.1998, and Bone and Joint Awareness Week during the third week of October, under Proclamation No. 658. These activities play a key role in promoting public education and engagement on bone health.

Notably, the *Osteoporosis Society of the Philippines Foundation, Inc.* led the publication of the 2023 *Clinical Practice Guidelines on Screening, Diagnosis, Management, and Prevention of Primary Osteoporosis and Fragility Fractures Among Postmenopausal Women and Elderly Men* ^[2]. The guideline can be accessed on the DOH website - www.doh.gov.ph/dpcb/doh-approved-cpg. It has been submitted to *Journal of Asean Federation of Endocrine Society* for publication consideration. This update marks a major milestone in advancing evidence-based care and guidance for clinicians across the country.



In terms of service delivery, the *University of the Philippines-Philippine General Hospital (UP-PGH)* launched the country's first *Orthogeriatric Multidisciplinary Fracture Management Model* and FLS, which received bronze-level recognition from the International Osteoporosis Foundation's *Capture the Fracture®* programme in 2020. Similarly, the *National University Hospital's Orthogeriatric-FLS unit* has served as a model for other institutions, demonstrating how hospitals in low- to middle-income settings can enhance care for fragility hip fracture patients.

These initiatives led by the *Osteoporosis Society of the Philippines Foundation*, the *Fragility Fracture Network Philippines*, and leading institutions represent important steps toward improving osteoporosis care and fragility fracture prevention in the Philippines, but continued multisector collaboration and government prioritisation are needed to fully address the growing burden of this disease.

REFERENCES

1. US Census Bureau International Database (IDB) Website. 2025. https://www.census.gov/data-tools/demo/idb/#/dashboard?dashboard_page=country&COUNTRY_YR_ANIM=2025. Accessed 22 May 2025.
2. Cortez KA, Lai JGL, Tabu IA. Economic burden and the effects of early versus delayed hospitalization on the treatment cost of patients with acute fragility hip fractures under the UPM-PGH Orthogeriatric Multidisciplinary Fracture Management Model and Fracture Liaison Service. *Osteoporos Sarcopenia*. 2021 Jun;7(2):63-68. doi: 10.1016/j.afos.2021.05.004. Epub 2021 Jun 10. PMID: 34278001; PMCID: PMC8261723.
3. Osteoporosis Society of the Philippines Foundation, Inc., Philippine College of Endocrinology Diabetes and Metabolism, Philippine Rheumatology Association, Philippine Academy of Family Physicians, Philippine Obstetrical and Gynecological Society, & Philippine Orthopaedic Association. 2023 Philippine Clinical Practice Guidelines on Screening, Diagnosis, Management, and Prevention of Primary Osteoporosis and Fragility Fractures Among Postmenopausal Women and Older Men. 2023. <https://www.rheumatologyph.org/cpg>. Accessed 11 August 2025.
4. Li-Yu J, Lekamwasam S. Intervention thresholds to identify postmenopausal women with high fracture risk: A single center study based on the Philippines FRAX model. *Osteoporos Sarcopenia*. 2021 Sep;7(3):98-102. doi: 10.1016/j.afos.2021.09.003. Epub 2021 Sep 20. PMID: 34632112; PMCID: PMC8486623.

This document highlights the key findings for the Philippines, published in “The Asia Pacific Regional Audit: Epidemiology, costs and burden of osteoporosis in 2025”. View the complete report at: <https://www.osteoporosis.foundation/asia-pacific-audit-2025>

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