

We “D.O.” Care About Osteoporosis

What is Osteoporosis?

Osteoporosis is a disease that thins bones, making them more fragile. This means the bone breaks (fractures) more easily, often with minor trauma. Any bone can break, but fractures of the hip, spine, and wrist are more frequently seen with osteoporosis.

Who is at Risk for Osteoporosis?

Women, especially Asian and Caucasian, are at more risk for Osteoporosis than men, because of their smaller size bones. In addition, the hormone changes that occur after menopause in women speed up bone loss, which increases the likelihood of osteoporosis. Osteoporosis is extremely rare in children and is usually self-limiting. If it does occur, it is usually from age 8 to 14. The condition spontaneously resolves itself within two to four years or by puberty. Other factors leading to frequent fractures in children are certain metabolic disorders such as, osteogenic imperfecta, malignancies, thyroid problems, and Cushing's Disease.

How Can I Tell if I have Osteoporosis?

Osteoporosis is a silent disease because bone loss occurs without symptoms. Only when people have a sudden strain or minor fall and fracture occurs do symptoms appear. Loss of height and stooped posture are often signs of vertebral fractures from osteoporosis. The test currently used to diagnose osteoporosis is a dexa-scan or bone density test. The bone density test compares your bone density to that of an average, healthy young adult. The test result, known as a T-score, tells whether you have normal bone density, low bone density (osteopenia) or osteoporosis.

Is There Prevention for Osteoporosis?

Yes! A diet rich in calcium and Vitamin D in your teenage and young adult years can prevent osteoporosis when you are older. A regular exercise program will also build strong bones. Strengthening and balance exercises can help prevent falls. People over 50 should get 1,200 mg of calcium per day through diet and/or supplements. Look for foods such as milk, yogurt and cheese and calcium-fortified orange juice. Broccoli and almonds are also high in calcium. If you do not get enough calcium in your diet, calcium supplements such as calcium carbonate and calcium citrate can be used. Vitamin D helps your body absorb calcium and can be obtained by exposure to 30 minutes of sunlight daily or in supplements such as milk.

What if I Already Have Osteoporosis?

Currently there is no cure for osteoporosis but it can be treated. A diet rich in calcium and Vitamin D as well as regular exercise and fall prevention is important. A class of medications called Bisphosphonates can help slow bone loss, reduce fracture risk and, in some cases, increase bone density. Alendronate (Fosamax), risedronate (Actonel) and ibandronate (Boniva) are in this class. Teriparahid (Forteo) is a daily injection, which has been shown to reduce the risk of spine and other fractures. It is recommended only for people who are at high risk of fracture. Estrogen therapy can also be considered but due to other risk factors, should only be used in women at significant risk for fractures. **(Talk to your primary doctor to see if any of these medications are right for you).**

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