

Orthopaedic Connection

Bone Health Analysis

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Transforming patient information into patient understanding.

I will try to demystify the somewhat confusing subject of periodic bone density testing. It became more confused when the respected medical journal New England Journal of Medicine published an article that was of course picked up by the media (broadcast and print).

It suggested that women 67 and older who had normal or mild bone loss in their T-score could wait 17 years to be retested. It was a generalization, but the implication was that bone density testing was being over done and wasn't that important anymore. At least that is what the general population (and many of my patients) heard.

Screening

Bone density testing is done with special x-ray equipment and the test is called a DXA scan. The scan evaluates the hip and the spine. You don't even need to get undressed to have the test done!

The test generates numbers called a T-score which is a measure of the patient's bone health (density).

I recommend bone density screening for all women over 65 and men over age 70. I also recommend screening for younger men and women based on their risk profile.

Younger Patient Risk Assessment (Male or Female)

I have a close relative with osteoporosis.

I have lost height more than an inch.

I weight less than 125 pounds.

I smoke.

I drink 2 servings of alcohol several times per week.

I avoid the sun.

I don't take Calcium or Vitamin D supplement.

I have a serious medical condition.

I have taken steroids, chemotherapy, immunosuppressive medication.

I do not do weight bearing exercises

I have broken a bone after 45 years old.

Women who went through menopause before 45.

Understand Your Risk

Physicians treating bone density loss (osteopenia, osteoporosis) base their screening and treatment decisions on the World Health Organization FRAX score. This estimates your fracture risk based on your T-score and several other factors in your risk assessment.

Your doctor may decide you are someone who should have bone density testing well before the "magic" age of 65 (women) and 70 (men).

The management of a patient's bone density should be highly individualized.

What You Should Do

1. Have your doctor calculate your risk of fracture using the WHO's FRAX score and undergo an initial bone density test at age 65 (70 for men) or earlier if your risk profile warrants it.
2. Consume at least 1200mg of Calcium a day from low fat dairy products or yogurt. Leafy green vegetables are a great source. Consider taking a supplement such as Citracal.
3. Get at least 2000 i.u. of Vitamin D from salmon, fortified milk or juices and vitamin D supplements.
4. Weight bearing exercises such as walking for 30 minutes 5 days a week.
5. If you smoke, quit.
6. If you drink limit your alcohol consumption to no more than one drink a day for women and two for men.

Conclusion

Get tested.

Patients with normal bone density on a first test should be specifically advised by their doctor when to be retested.

Patients with lower bone density (osteopenia or osteoporosis) should be treated and undergo retesting in 2 years.

Don't do literally what theater people advise before a performance "Break a leg!"

But if you do I will be around to fix it!

Have a great week. See you next time.

My patients put their trust in me and what I do improves the quality of their lives.

Gratiot County Herald Archive and Office Website

I sincerely hope all of our loyal readers will take advantage of an endless amount of musculoskeletal information. It is easy! Log onto www.orthopodsurgeon.com.

It gives access to all Website articles, Your Orthopaedic Connection and every GCH article from most recent to the first. Full text! It covers everything I do in the office and hospital.

Good Health. Good life. All the best to you.

Dr. Haverbush