

CLINICAL RESEARCH & OSTEOPOROSIS NEWSLETTER

A Publication of New Mexico Clinical Research & Osteoporosis Center

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Osteoporosis Controversies!

We live in a world of headline news with communications that may come in the form of tweets, instagrams, blogs, emails, voice messages, and Google searches. In keeping with the trend for sensational news, the headline above is intended to grab your attention, so that you might take a few minutes to read more to learn what is behind the headline.

A recent Google search for “osteoporosis controversy” showed 406,000 results in 0.42 seconds. The controversies addressed issues that included calcium supplements causing heart disease, debates over the best blood vitamin D level, osteoporosis medicines causing “brittle bones,” inadequacy of international diagnostic standards, how long to treat, how often to repeat a bone density test, what kind of exercise is best, and much more. Although a great deal of valuable educational information is on the Internet, there is also much that is incorrect, misleading, biased, and potentially harmful. Newspaper articles may be a bit more reliable, yet still are sometimes short on “fact checking” and may present only one point-of-view of complex medical situations.

How can you get good information about osteoporosis and preventing fractures without getting trapped in the swamp of real or perceived “controversies?” Perhaps the best way is to look at the source of information. A study conducted at New Mexico Clinical Research &

Osteoporosis Center found that websites that represent academic institutions (addresses ending with .edu), non-profit organizations (-.org), and government (-.gov) were generally more credible than commercial websites (-.com).

What about print media? If you see a newspaper headline with “Calcium Supplements Cause Heart Attacks”, does it mean you should immediately stop taking calcium? Hopefully not. Newspaper headlines are often written to sell newspapers, not to educate you about complex medical issues. A study published in a medical journal may show a correlation between one thing and another, which is very much different than one thing causing another thing to happen. For example, a correlation between eating ice cream and drowning does not necessarily mean that ice cream causes drowning; it may simply mean that people can drown when they are at the beach in the summer, a time when we enjoy ice cream.

The bottom line is this . . . Think beyond the headline, use common sense, go to a credible source of information, and talk with your doctor. By the way, there is no convincing evidence that calcium supplements cause heart attacks. Studies on this have given inconsistent and conflicting results. Common sense tells us that too much of anything (including water) may not be good, so follow your doctor’s advice – get your calcium from your food and take supplements if needed.

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Clinical Research

Are you interested in participating in a research study?

Our clinical research program is recruiting patients to participate in studies to test new medications and evaluate new uses for currently available drugs. By participating in a study you will have the opportunity to use one of these medications, have free examinations and tests, and receive reimbursement for your time and travel. If this interests you, please take a few minutes to read the major criteria for participation.

If you think you may qualify for a study or are interested in participating in a research study, call a study specialist at (505) 923-3232.

Feel free to pass this newsletter to a friend or relative who may be interested. The drug study information is updated often, since we are continually starting new studies and closing existing studies. Call and give your information to a study specialist for consideration for future studies. If there is nothing for you now, there may be one soon.

By participating in a clinical research study you play a more active role in your healthcare. Please call today to see what studies we have available **505-923-3232**.

Current Available Studies Include

| | | | | |
|----------------|------------------|------------------|------------|--------------------|
| Cardiovascular | GERD | Hypertension | Migraine | Osteoarthritis |
| Constipation | Gout | IBS | Neuropathy | Osteoporosis |
| Diabetes | High Cholesterol | Insomnia | Nocturia | Overactive bladder |
| Fibromyalgia | Hot Flashes | Low Testosterone | Obesity | RLS |

Eczema

This is a clinical trial for patients who have moderate to severe eczema. Compensation may be available for time and travel. You may be eligible to participate if you are:

- 18 years or older
- If you have inadequate response with prescription treatments

REG_1224.Eczema

Fibromyalgia

This is a clinical trial for patients who have pain associated with Fibromyalgia. This study is to evaluate the safety and efficacy. You may be eligible to participate if you are:

- 18 years or older
- If you have experienced the same pain symptoms greater than or equal to 3 months.

DS-E310-FM

Gout with Kidney Impairment

We are conducting a clinical trial to evaluate an investigational medication in patients who suffer with gout and kidney impairment. You may be eligible to participate if you are:

- 18 years or older
- Experienced a gout flare in the last 12 months

FEB-XR 201

Hypoactive Sexual Desire Disorder

This study is for premenopausal with Hypoactive Sexual Desire Disorder (HSDD), to evaluate the safety and efficacy of an investigational medication. You may be eligible to participate if you are:

- Premenopausal
- With or without decreased arousal

Palatin BMT-301

Type 1 Diabetes

This trial is a comparison between an investigational medication and an approved drug. We are actively seeking patients with Type 1 diabetes who are uncontrolled. You may be eligible to qualify for this study if you are:

- 18 years or older
- Currently taking Lantus and Humalog or Novalog, or NovoRapid

EFC12619 T1 DIA

Osteoporosis

This is an observational study for postmenopausal women who are currently taking Alendronate (Fosamax) for their osteoporosis. You may be eligible to participate if you are:

- 65 years old
- Have been on Alendronate (Fosamax) for ≥ 3 years ; who may or may not want to continue treatment.

Edge Study

Woman to Woman

By

Julia Chavez, CNP



Time for a Colonoscopy

If you are over 50 years of age, it is time to have that dreaded colonoscopy. It is a screening procedure to check for polyps that could develop into cancer or other potentially life-threatening diseases.

The procedure is done under sedation and therefore not uncomfortable. The cleansing of the bowel can be a bit uncomfortable mostly due to the need to be close to the toilet for good evacuation of the colon.

If no polyps are detected, you will not need a repeat procedure for 10 years. If polyps are found and removed, you will need to follow up in 3 to 5 years depending on the type of polyps. Some polyps will not be dangerous and some may be pre-cancerous.

The purpose of the colonoscopy is simply a screening meant to keep you as healthy as possible.

Osteoporosis Foundation of New Mexico Educational Presentations

Manzano Mesa
Multigenerational Center
501 Elizabeth SE
Albuquerque, NM 87123
(505) 275-8731

1:30-3:00 PM

2015 Meetings

February 26, 2015
Felipe Mares, PT, ATC
Topic: "Physical Therapy for
Osteoporosis"

May 14, 2015
Gloria Dryer
"Yoga for Osteoporosis"

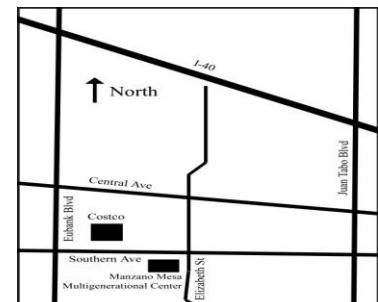
August 13, 2015
E. Michael Lewiecki, MD
"Updates for Osteoporosis"

November 12, 2015
Charla Simpson
"The Use of Osteogenic Loading
for Treatment and Prevention of
Osteoporosis"

These meetings are open to the public. It is a great opportunity to talk to osteoporosis experts for as long as you want. There is limited space, so please sign up by calling 275-8731 in order to attend. A \$1 contribution is requested in order to cover the cost of educational material. You may donate more if you wish.

Consider attending if:

- ❖ You have osteoporosis,
- ❖ You have a loved one with osteoporosis, or
- ❖ You are interested in learning more about osteoporosis.



www.ofnm.org

If you enjoyed this newsletter and would like to be placed on an electronic mailing list, email ybrusuelas@nmbonecare.com.

Ask Dr. Mike Lewiecki about . . . OSTEOPOROSIS

Dear Dr. Lewiecki – I keep hearing that exercise is good for my osteoporosis, but I don’t know where to start. I don’t like going to a gym. I don’t like to sweat with other people around. And I am afraid of falling. Does it really make any difference anyway? What should I do? My sister has the same concerns. Please help.

Lisa C., Edgewood, NM.

Dear Lisa – This is a common question that comes up almost every day in talking to patients about osteoporosis. I think some of the confusion is due to word “exercise”, which means different things to different people. I prefer to call it “physical activity”, which puts a whole different spin on it. It is good for all of us to be physically active. It is especially good for those with osteoporosis, since this can improve our strength and balance, reducing the risk of falls and fractures.

You do not have to go to a gym to be physically active. In fact, you don’t even have to sweat. Generally anything you do on your feet is good. This includes standing, walking,

jumping, gardening, shopping, and chasing after your grandchildren. The stress applied to your bones with these sorts of weight-bearing activities helps to strengthen your bones and your muscles. It may also help you to respond in the best possible way to medication for osteoporosis.

Balance is also extremely important, especially as we get older and falls become a greater concern. Walking is good for balance. You can make a game of improving your balance by standing on one foot when brushing your teeth, cleaning the dishes, or watching television. Practice walking on top of a straight line. This does not take any time out of your busy day and does not even involve going out in public.

Remember, anything you do is better than nothing, and almost anything you do on your feet is good for your bones. The rule is to be active, have fun, do the things you enjoy, and don’t fall down!

Mike Lewiecki

From the editor: If you have a question for Dr. Lewiecki, please send it by mail to the address on the front page of this newsletter or by email to mlewiecki@nmbonecare.com. It is not possible to respond to all questions submitted, but those that are of general interest will be considered for publication with an answer in future issues of this newsletter.

EXERCISE AND BONES

Exercise, or physical activity as described in the letter on this page, is good for all of us for many reasons. Its improves our cardiovascular fitness and muscle tone, makes us more energetic, treats depression, helps with weight loss, and lowers cholesterol and blood sugar. But does it increase your bone density and prevent fractures?

There have been many studies looking at the effect of exercise on bones, but many of them have been small and of poor quality. A highly respected organization called the Cochrane Collaboration conducted a systematic review of 27 of the best of these studies and reported the results several years ago. All of the studies were randomized controlled trials, which is considered to be the best type of study design. It was concluded that exercise (aerobics, weight-bearing, resistance, walking) in postmenopausal women improved bone density slightly and reduced fracture risk slightly. While the effect was small, it is good news for anyone with osteoporosis. Exercise does help. However, there are caveats. Read on . . .

Exercise and an active healthy lifestyle with good nutrition are important in managing osteoporosis, but may not be enough. Medication may still be needed to do a better job of reducing fractures. Also note that the small increases of bone density were statistically significant in groups of women, but may not be measurable with individual patients.



Support osteoporosis education in New Mexico. Help to reduce the burden of osteoporotic fractures. Osteoporosis Foundation of New Mexico is a local non-profit 501(c)(3) foundation. Consider a tax-deductible donation or bequest. Donations may be mailed to Osteoporosis Foundation of New Mexico at 300 Oak St. NE, Albuquerque, NM 87106. www.ofnm.org For more information, call Yvonne Brusuelas at 505-855-5627.