

Disturbing News About Hip Fractures

A study of hip fracture rates in the US, just published in the medical journal *Osteoporosis International*, reported hip fracture rates higher than projected for 3 recent consecutive years (2013-2015).

This is a disturbing finding because of the serious nature of hip fractures. A hip fracture can be a devastating life-changing event. Surgery is usually required. It may be followed by long-term disability and sometimes death. Worst of all, for many of us, is loss of independence and inability to return to normal daily activities of life.

E. Michael Lewiecki, MD, lead author of this study, stated, "This amounts to over 11,000 more people with hip fractures than expected, additional healthcare expenses of about \$459 million, and more than 2000 fracture-related deaths that might have been prevented."

This important study, first presented in 2016 at a meeting of the American Society of Bone and Mineral Research, was followed by an international call to action to reduce the osteoporosis treatment gap. It is well known that most high risk patients who could benefit from treatment to prevent fractures are not receiving it. Another study, published in the *Journal of Bone and Mineral Research*, found that almost 80% of patients who have had a hip fracture are not given treatment for osteoporosis, even though current guidelines recommend that all should be treated.

There are many possible causes for the large osteoporosis treatment gap. There are now fewer office-based bone density testing facilities, limiting access to vital diagnostic services. This is partly due to Medicare reimbursement cuts to levels far less than the cost of providing the service, as well as a shift in physicians from practicing independently to being employed by hospitals and health care delivery systems. Other causes include declining awareness of osteoporosis due to lack of public health campaigns, in part due to brand name osteoporosis medications losing their patents and becoming generic. Also, physicians are under time restraints with every office visit and may not be devoting attention to osteoporosis. Some patients are reluctant to take osteoporosis medications due to lack of appreciation of the serious consequences of fractures and poor understanding of the balance of expected benefits and possible risks with treatment.

Plans are underway to reduce the osteoporosis treatment gap. Better education of physicians and the public is an important part of it. The University of New Mexico, in collaboration with the Osteoporosis Foundation of New Mexico, has been at the forefront of using teleconferencing technology to educate healthcare professionals across the country on best practice osteoporosis care. This is called Bone Health TeleECHO. Learn more about ECHO in future issues.

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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 you qualify. 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 have questions about participating in research. Please call a study specialist for more information 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.

Osteoarthritis of the Knee

This is a study for patients who have osteoarthritis of the knee. Who have experienced osteoarthritis pain, at least 14 days each month. You may qualify if you:

- Patients 50 years or older; Women must be postmenopausal for at least 1 yr.
- OA pain for at least 14 days out of each month for at least 3 months

Axsome AXS02_K301

Crohn's Disease

This study is for patients who have Moderate to Severe Active Crohn's disease. You may be eligible if you have been diagnosed for at least 4 months:

- Are 18 to 80 years old
- And sometimes have flares

BI 695501

Diabetic Kidney Disease

This is a study for patients with diabetic kidney disease. If you have high diabetic urine protein with a history of a cardiovascular event, or have very high diabetic urine protein you may be eligible to participate if you:

- Are 18 years of age or older
- Have a history of Type 2 diabetes and are taking hypertension medication

Bayer 17530_16244 DKD

Gout

This study is for patients who have Gout and Moderate Kidney impairment. If you are taking a urate lowering therapy you may be eligible if you:

- Are 18 years of age or older
- Taking at least 200 mg of Allopurinol or minimum dose of Febuxostat

RDEA594-401

Osteogenesis Imperfecta

This study is a genetic disorder that causes brittle bones. If you have been diagnosed with or have a history of fractures you may be eligible to participate, if you:

- Are 18 years of age or older
- Have experienced one or more fracture in the past 24 months

MBPS205

Osteoporosis Drug Holiday

This study is a drug holiday for postmenopausal women or men who are taking Alendronate (Fosamax) or Risedronate (Actonel) for 5 or more years. You may be eligible to qualify for this study if you are:

- > 50 years, Men or Postmenopausal Women, diagnosed with osteoporosis
- Taken Alendronate or Risedronate for 5 or more years

NBHADHI

Type 2 Diabetes

This is a study for patients who have been diagnosed with Type 2 Diabetes Mellitus and are on Metformin. You may be eligible if you:

- Are 18 years or older
- On Metformin alone, for Type 2 Diabetes

EFC14838

A word from our provider:



Julia R. Chavez, CNP

COLD OR ALLERGIES?

Colds and allergies may share some of the same symptoms, but they are very different diseases. Colds are caused by viruses and allergies are an immune system response caused by exposure to something you're allergic to such as pollen or pet dander. You can't "catch" an allergy from someone who has an allergy but cold viruses are easily spread from one person to another.

Cold symptoms can develop at any time and usually last from two to fourteen days. Seasonal allergy symptoms start at the same time every year and can last several months.

Treatment of a cold includes rest, pain relievers and over-the-counter cold remedies such as decongestants. Treatment of seasonal allergies may include over-the-counter or prescription antihistamines nasal steroid sprays and possibly, decongestants.

To help prevent allergy symptoms, avoid exposure to known allergens. To help prevent colds, wash your hands often or use antibacterial hand gels.

Colds usually have cough, sneezing, sore throat, runny nose and stuffy nose. Colds rarely have itchy eyes or fever. Allergies never have fevers or generalized aches and pains. They sometime have cough, fatigue and sore throat. They usually have itchy eyes, sneezing and runny nose.

If you need help with colds or allergies see your medical provider.

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

Osteoporosis Foundation of New Mexico (OFNM)

Educational Presentations

**Coronado Villa Resort Lifestyle
Retirement Community
6900 San Vicente Ave. NE
Albuquerque, NM 87109**

**(This is two streets north of San
Antonio west from Louisiana)**

RSVP to 505-.857-3956

2018 Meetings

(All are 1:30-3:00 PM)

Thursday, February 8, 2018
E. Michael Lewiecki, MD
"Osteoporosis Update"

Thursday, May 10, 2018
To be announced

Thursday, August 9, 2018
Janet Popp, PT
*"Fall Prevention and Physical
Therapy"*

Thursday, November 8, 2018
Liz Quintana, PHD, RD, CDE
*"Nutrition and Calcium for Bone
Health"*

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 857-3956 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.

Directions to facility:
From San Antonio, go north on Louisiana. Turn west on the second street. Coronado Villa is behind Grace Church.



Ask Dr. Lewiecki about OSTEOPOROSIS

Dear Dr. Lewiecki – I have been diagnosed with osteoporosis. My doctor told me I must be very careful to not fall down, to avoid bending or twisting, and to not lift anything more than 10 pounds. I am now frightened about doing all the things I enjoy in life. I am healthy and active. I do yoga, play golf, and like to ski. I am only 58 years old. What should I do?
Caroline P., Farmington, NM.

Dear Caroline – There are many opinions and differing recommendations on physical activities in patients with osteoporosis. I will give you my opinions based on what I know of the medical evidence and my experience with many patients having osteoporosis.

I believe you can live a full and active life with confidence and joy. Just don't be reckless. The worst thing you can do is to be a couch potato. The physical activities you enjoy, done with appropriate care, are probably fine. Let me explain.

Your doctor's advice to not fall down is good for all of us. The best way to avoid falls is to have good balance and good

muscle strength. How do you achieve that? Tai chi, yoga, and pilates, done correctly, can be very helpful for balance and core strength. However, when done incorrectly, these can be harmful. For example, some people have fractured bones in the spine doing yoga positions with extreme spine flexion (bending forward). I suggest you be in a yoga class with a teacher who is knowledgeable about osteoporosis and with others in the class who are similar to you. For some patients, I recommend a visit to a physical therapist or working with a good trainer at a gym to learn more about good lifting technique and how much bending and twisting is safe.

With regard to skiing, if you are a good skier and it is important for your quality of life, do it. Of course, anyone who skis must recognize there is a risk of being injured and breaking bones. Take care to ski when the conditions are good and ski conservatively. Quit when you are tired. And have fun.

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. It is not possible to respond to all questions submitted. Those that are of general interest will be considered for publication.

HOW LONG TO TREAT

Many patients with osteoporosis ask how long treatment is needed. This question seems to be unique to osteoporosis. After all, most people don't ask how long other chronic silent diseases, such as hypertension or diabetes, need to be treated. With osteoporosis, the idea that treatment can be stopped comes from the idea that medications don't work, or may be dangerous, after a certain number of years. What are the facts?

Osteoporosis is a lifelong disease that requires lifelong treatment. Only two osteoporosis medications have a time limit - the bone building drugs, teriparatide (Forteo) and abaloparatide (Tymlos). These daily injections are limited to 24 months lifetime use. When treatment is completed, it must be followed by another drug to maintain or enhance its beneficial effects.

Bisphosphonates, such as alendronate (Fosamax) may have long lasting effects after many years of treatment, raising the possibility of temporary discontinuation of taking pills, called a drug "holiday."

There is no "holiday" with denosumab (Prolia), as the effects are rapidly lost when treatment is stopped.



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 4600 B Montgomery Blvd NE, Suite B-200, Albuquerque, NM 87109. For more information, go www.ofnm.org or call 505-857-3956.