

Treating Osteoporosis Wisely

Best practice health care is a continual learning process. Guidelines with treatment recommendations are continually revised as new medical evidence becomes available. Health care professionals change their approach to managing patients according to advances in basic science, results of clinical research studies, and their own experiences treating their patients. This is the case for osteoporosis and well as all other medical conditions.

We have learned a great deal about osteoporosis since the approval of Fosamax in 1995, and this knowledge continues to evolve. It is important for patients (all of us, at one time or another), to receive information about treatment that is accurate and timely. The Internet is particularly unreliable for medical advice, unless you take care to go to reliable websites, such as those of educational institutions and professional societies.

Here are three examples of current concepts for osteoporosis care that have evolved in recent years.

- 1. Osteoporosis is a lifelong disease that needs lifelong attention.** There is no temporary treatment for a lifelong disease. There is a myth that osteoporosis treatments should be stopped after 5 years because they no longer work. This is not true. All medications stop working when they are no longer taken. However, the effects of some medications (the bisphosphonates – Fosamax, Actonel, Boniva, Reclast) may linger for a while after stopping, allowing for the possibility of a “drug holiday” of a year or two in some patients. Sooner or later, treatment must be resumed. Stopping other osteoporosis medications is followed by rapid loss of bone density.
- 2. Treated osteoporosis is still osteoporosis.** If your bone density gets better with treatment, the disease does not disappear. You still have osteoporosis. There is no cure for osteoporosis at this time. It is the same with other diseases, such as hypertension. If treating hypertension gives you normal blood pressure, the disease is not gone. You still have hypertension that is under control with medication.
- 3. The sequence of treatment matters.** Recent studies have shown that some drugs, such as Forteo, Tymlos, and Evenity, are better than others (for example, Fosamax) for patients at very high risk of breaking bones. Also, the order of treatment makes a difference. For high risk patients, it is ideal to begin treatment with an anabolic drug and then switch to one of the others, rather than the other way around.

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NEW MEXICO
Clinical Research &
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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 listed under **Clinical Research**.

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.

Low Testosterone Replacement

This study is for men diagnosed with Low Testosterone and increased risk for cardiovascular disease. You may be eligible to participate if you:

- Are 45 to 80 years old
- Currently not being treated with testosterone in the last 6 months.

Abbvie M16-100

Male Osteoporosis Study

This is a study for male patients not currently being treated for their Osteoporosis or Osteopenia. You may qualify if:

- You are between the age of 40 to 85
- No kidney stones in the last 5 years

Radius BA058-05-019

Female Osteoporosis Study

This is a study for female patients not currently being treated for their Osteoporosis or Osteopenia. You may qualify if:

- You are between the age of 50 to 85
- No kidney stones in the last 5 years

Radius BA058-05-021

Sarcopenia

This is a study for male and female patients who suffer from age-related Sarcopenia. You may qualify if:

- You are greater than or equal to 65
- Report loss of function over the last 6- 12 months.

BIO101-CL03





Nurse Practitioner's Nook
by Sarah

Common Questions

Trabecular bone score (TBS)

What is TBS? TBS is a new measurement technique. We are hopeful that the knowledge gained by TBS will help us optimize your care. Our goal is to provide you with expert, individualized care.

Should TBS be repeated? At this time, repeating TBS may be helpful to assess improvement with anabolic treatment. It is still unclear when to repeat the TBS with Prolia treatment.

Why doesn't insurance pay for this test? TBS is still relatively new, and we are one of the only facilities in Albuquerque to use it.

Dental issues

What do I do if my dentist tells me to stop treatment? Osteoporosis treatment is often misunderstood by dentists. We will gladly talk with your dentist about any concerns they have. The American Dental Association has stated that treatment to reduce fracture risk is more important than the rare side effects that may occur with osteoporosis medication. Please call us before stopping any treatment. We have also developed a letter for your dentist about the importance of reducing the risk of fracture that we are happy to provide.

We welcome your questions, please don't hesitate to ask us about your concerns.

**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

2020 Meetings
(1:30-3:00 PM)

Thursday, March 12, 2020
Sarah Erb, CNP

Thursday, July 9, 2020
TBD

Thursday, November 12, 2020
Janet Popp, PT

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.



To view current and previous newsletters, visit our website at www.nmbonecare.com and look under the News tab.

Ask Dr. Lewiecki about . . . OSTEOPOROSIS

Dear Dr. Lewiecki – I just read a news release that there is a new osteoporosis treatment. Is this something that could help me? My new doctor tells me I’m “complicated.” I broke my hip about 10 years ago and was then treated with Forteo for about 2 years. I have had no treatment since that time. My most recent bone density test showed a very low T-score. On top of that, I was just diagnosed with a new compression fracture in my spine. I am 82 years old. What should I do?

Angela R., Los Alamos, NM.

Dear Angela – Yours is a very timely letter. The new medication is EVENITY, a bone-building drug that works in a different way than Forteo (see front page of this newsletter). It is intended for use in postmenopausal women with osteoporosis who are at high risk for fracture. That certainly describes you!

Looking back on your care in the past, it is unfortunate that you had no treatment after Forteo. Remember that osteoporosis is a lifelong

disease that requires lifelong attention. There is no temporary solution and no “cure,” at least not yet. After finishing Forteo, or any other bone-building drug, it is essential that you follow it up with another medication. If you don’t, you will rapidly lose the benefits of the Forteo.

For you, this is what I suggest at this point . . . You need a thorough evaluation for all things that might contribute to your risk of breaking bones. That includes laboratory tests, an up-to-date bone density test, and assessment of your balance and muscle strength. Any abnormalities in these tests should be addressed. If your risk of falling is high, it may help to see a physical therapist. Finally, it looks like you need to be on a medication to strengthen your bones. You may be a candidate for treatment with EVENITY, but the decision to treat should be individualized according to the balance of expected benefits and possible risks. Talk it over with your doctor to learn more.

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, drop off at the office, or email to Sarah Erb at serb@nmbonecare.com. It is not possible to respond to all questions submitted. Those that are of general interest will be considered for publication.

MEET THE BONE TEAM

At New Mexico Clinical Research & Osteoporosis Center we provide the highest quality skeletal health care. Our aim is to prevent fractures (broken bones), avoid deformities of bones, and optimize quality of life. This requires a multidisciplinary team approach. Our team is directed by **Dr. Lewiecki** who offers consultations for patients with osteoporosis and other bone diseases, such as osteomalacia, osteogenesis imperfecta, hypophosphatemia, Paget’s disease of bone, hypophosphatasia, and fibrous dysplasia. **Dr. Rudolph** also has expertise in bone diseases and provides similar services. They are assisted by **Sarah Erb, CNP** an osteoporosis nurse practitioner, who offers consultations, administers injectable osteoporosis medications, and interprets bone density tests. **Danny Widholm** is the lead technologist for bone density testing. He works with **Jacquelyn Garcia**, our newest technologist. **Monica Tanny** is our osteoporosis treatment coordinator. Many others in the office participate in patient education and interfacing with insurance companies and advocating for you to get the care you need.



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. For more information, go www.ofnm.org or call 505.857.3956.