

Do you have osteosarcopenia?

Yes, this word is a tongue-twister! You have probably never heard of osteosarcopenia before, but it's important. Let's break it down: **osteo** = bone, **sarco** = flesh (muscle), and **penia** = deficiency. The word was first coined in 2017 in a medical journal article and has since been the subject of books, many more articles, and a lot of medical research. It describes people with low bone density (osteopenia or osteoporosis) and reduced muscle mass and strength, and reduced functional capacity (vitality). It could be you - now or at some time in the future.

How do you know if you have osteosarcopenia? Bone density is easy to measure. If you are reading this newsletter, you probably already know whether you have osteopenia or osteoporosis. You may have also noticed that you're not as strong as you used to be and that some physical activities are not as easy to do anymore. You may be slower getting out of a chair, walking, or climbing stairs. Your balance might not be as good as it was. You may tire more easily. If this sounds like you, then you have osteosarcopenia. It is more common with aging, especially after having a fracture. If you think this is just getting old, you are partially right. This is all inevitable if we are fortunate enough to grow old. However, it is a medical problem when it causes falls, injuries, and loss of enjoyment of life. When you recognize that you have osteosarcopenia or are heading in that direction, there are things you can do to prevent it and treat it.

Healthy lifestyle and good nutrition are essential to staying healthy and restoring some of what you have lost. Maintain your cardiovascular fitness with activities such as hiking, jogging, dancing, bicycling, and sports. Resistance exercises are also important. These include using free weights, weight machines, elastic bands, medicine balls, and your own body weight (such as pushups, squats, and jumping). You need to start with what is easy and build up slowly. If you develop muscle injury pain or sore joints, you are doing too much and need to back off. Don't overdo it with exercises. Rest days are important and getting enough sleep is vital as well. Consider visiting with a physical therapist or working with a personal trainer to safely start an exercise program. Don't forget the importance of balance in preventing falls; yoga, Pilates, and Tai Chi may improve your balance.

Nutrition is a critical part of a healthy lifestyle. We all need an adequate intake of calcium and vitamin D for our bone health. Many older adults have an inadequate protein intake that can contribute to poor bone health and loss of muscle mass and strength. Recent research has found that improving dietary calcium and protein intake for older adults in residential care facilities can reduce falls and fractures. See the back page for more on this.

Staff

E. Michael Lewiecki, MD, FACP, CCD

Osteoporosis Director

Lance A. Rudolph, MD, CCD

Research Director

Desiree Sanchez, MCN-CNP-C, CCD

Osteoporosis Nurse Practitioner

Cierra Dorado, CNP

Adult Medicine Nurse Practitioner

Jammie Ross

Practice Administrator

Mary Montano Niles, CCRC

Research Manager/Coordinator

Devona Martinez

Research Assistant Manager

Tanya Salazar MA, CRC

Clinical Research Coordinator

Linda Weakland

Lead Recruitment Specialist

Marisa Santos

Research Assistant/Recruiter

Daniel Widholm, RT(R)(BD), CBDT

Bone Densitometry Technologist

Andrea Salas

Clinical Supervisor/Treatment Coordinator

Felicia Salvador

Medical Assistant

Yazmin Guerrero

Medical Assistant

Dorothy Becenti

Administrative Medical Assistant

Arianna Campos

Patient Account Representative

Christina Wallace

Centralized Scheduling

Samantha Howard

Front Desk Supervisor

Wendy Howard

Billing Supervisor

Rachel Bruch

Medical Records

Brooklyn Maestas

Patient Service Representative

Faith Sandoval

Patient Service Representative



Are you interested in participating in a research trial?

Our clinical research program is recruiting patients to participate in trials to test new medications and evaluate new uses for currently available drugs. By participating in a trial, you will have the opportunity to use one of these medications, have examinations and diagnostic testing at no cost to you. If you qualify for the trial, you may be compensated for your time and travel. Please take a few minutes to read the criteria for each trial listed in our section titled **“Clinical Research News.”**

If you think you may qualify for a trial or have questions about participating in clinical research trials, please call for more information at: (505) 923-3232.

Feel free to pass this newsletter to a friend or relative who may be interested. The research trial information is updated often since we are continually starting new trials and closing existing trials. Call and give your information to our recruitment specialist for consideration for future trials.

Clinical Research News

Eosinophilic Esophagitis

This trial is for men and women diagnosed with Eosinophilic Esophagitis by endoscopy and biopsy. You may be eligible to participate if you:

- Are between 18 to 75 years of age.
- Weigh 88.5 lbs. or more
- Previously diagnosed with Eosinophilic Esophagitis by endoscopy and biopsy.

High Cholesterol

We are looking for Men and Women who have been diagnosed with High cholesterol. You may qualify if you:

- Are 18 years of age or older
- Have at least one: heart attack, stroke, or carotid artery blockage.

Osteogenesis Imperfecta

We are looking for patients with Osteogenesis Imperfecta type I, III, or IV. You may be eligible if you are:

- Are between 5 to 25 years of age
- Experienced at least 1 fracture in the past year or at least 2 fractures in the past 2 years.

*Genetic testing available to those who qualify.

Osteogenesis Imperfecta

We are looking for patients with Osteogenesis Imperfecta Type I or IV. You may be eligible if you are:

- Are between 18 to 65 years of age
- Experienced at least 1 bone fracture in the past 10 years or 2 or more fractures since the age of 18.

*Genetic testing available to those who qualify.

Symptomatic Osteoporotic Vertebral Fractures

We are looking for men and women with a recent non-traumatic spinal fracture to complete a onetime questionnaire. You may be eligible if you are:

- Are 50 years of age and older
- Experienced a spinal fracture within the last 36 weeks.

Insurance Coverage for Bone Density Scans

For men being referred to NMCROC for a bone density scan:

- Please be aware that while your primary care provider may be referring you for a bone density scan, the scan may not be covered by your insurance. All insurance companies require a diagnosis that meets “medical necessity” in order for insurance to pay. We may not know until after the scan is performed whether you have a diagnosis that meets the medical necessity criteria. If your diagnosis does not meet the medical necessity criteria, you will be charged \$100.00 plus tax after your claim has been processed.

All patients:

- If you have a diagnosis of osteoporosis and are on treatment for osteoporosis, you are eligible for an annual bone density scan. The scan is performed every year to monitor the efficacy of treatment.
- If you have a diagnosis of osteoporosis but *not* on treatment, you may have a bone density scan covered every 2 years.
- Most commercial insurance plans will cover a “screening” bone density scan, performed every 2 years, if you do not have a diagnosis of osteoporosis.
- Medicare and Medicare Advantage plans do not cover a “screening” bone density scan.

For any questions or concerns regarding bone density scans, please contact NMCROC’s billing department at 505-855-5525 x 218.

-Wendy Howard

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

Osteoporosis Foundation of New Mexico (OFNM)

Invites you to attend virtual educational presentations and participate in interactive discussions. This is an ongoing activity of the OFNM Osteoporosis Support Group. Ask all the questions you want. Learn from experts and friends.

**1:30 PM – 2:30 PM Mountain Time
on the following dates**

March 9, 2023

July 6, 2023

November 9, 2023

If you missed participating in previous Support Group meetings, you can view select recordings by visiting our website at www.ofnm.org.

These meetings are open to the public. It is a great opportunity to talk to osteoporosis experts for as long as you want. Until further notice, the Osteoporosis Support Group meetings will be held virtually on the Zoom platform.

To register for the meeting, please email Carly Dobbins at cdobbins@pmplanners.net. Once registered an email confirmation will be sent along with instructions to join the meeting.

If you wish to donate to the Osteoporosis Foundation of New Mexico, please visit our website at www.ofnm.org and click on the blue donate button on the top right of the page.



Ask Dr. Lewiecki about . . . OSTEOPOROSIS

Dear Dr. Lewiecki – I have osteoporosis. I am nervous about taking a medication to treat. I will do it if I have to, but in the meantime, I want to do everything possible with natural therapy. I live alone in an apartment at a facility for senior citizens. Meals are provided in the dining hall, but I am not sure I am getting all that I need. Can you help?

Dorothy J., Albuquerque, NM.

Dear Dorothy – I chose your question from the many we receive every month because it fits nicely with the theme of this issue of our newsletter. It is about nutrition and osteoporosis. A healthy diet and exercise are not enough to treat everyone with osteoporosis, but these are steps in the right direction.

I would like to highlight for you a report out of Australia, recently published in the British Medical Journal. A study was conducted with 7195 permanent nursing home residents, mostly female, with an average age of 86 years. One-half of these people continued with their usual diet, while the other half received additional milk, yogurt, and cheese that provided more calcium and protein than the usual diet.

Two years after the start of this study, it was found that the residents receiving the extra dairy products had 46% fewer hip fractures and 11% fewer falls. This represented an excellent response to what seemed to be a small intervention.

The benefits of extra dairy products observed in this study may not apply to younger people or to those who already have a good intake of dietary calcium and protein. However, it does suggest that for older nursing residents eating institutional foods, small dietary changes might make a big difference in preventing broken bones. Read the column to the right to get an idea of how much protein you are now getting, then decide if you need 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 it off at the office, or email to jross@nmbonecare.com. It is not possible to respond to all questions submitted. Those that are of general interest will be considered for publication.

PROTEIN FOR OSTEOPOROSIS

Healthy lifestyle and good nutrition are standard recommendations for all of us, including those with osteoporosis. Calcium and vitamin D get most of the attention for nutrition with osteoporosis. However, there is more to the story. Did you know that one-half the volume of our bones is made of protein? And that many of us, especially older adults, do not get enough dietary protein?

Protein deficiency can be trouble for bones, cause loss of muscle mass and strength, and increase risk of falls.

How much protein do you need? Experts do not always agree on the exact amount, but a good rule of thumb is to get about 1 gram of protein per kilogram body weight per day. Translated, this means 45 grams of protein per day if you weigh 100 pounds, and 68 grams per day if you weigh 150 pounds.

Next, you might ask, "How do I do that?" Here is the approximate protein content of some common foods:

A serving of meat, poultry, or fish (about the size of the palm of your hand) is about 25 grams of protein.

2 eggs contain about 15 grams of protein.

A half cup of cottage cheese has about 12 grams of protein.

2 slices of hard cheese have about 10 grams.

8 ounces of Greek yogurt contain about 15 grams.

A half cup of cooked lentils or black beans is about 9 grams.

There are many useful websites with more detailed information. If you Google "protein content of common foods" you will get many matches. Or consult with a registered dietician to get personalized advice.



Support osteoporosis awareness and education in New Mexico. Help to reduce the burden of osteoporotic fractures. The Osteoporosis Foundation of New Mexico is a local non-profit 501(c)(3) foundation. Consider a tax-deductible donation or bequest. Donations may be conveniently submitted by credit card online at www.ofnm.org or by check mailed to Osteoporosis Foundation of New Mexico at 300 Oak St NE, Albuquerque, NM 87106. For more information, call 505.857.3956.