



Osteoporosis Canada

Ostéoporose Canada

COPING

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Remember: You can live well with osteoporosis!

Are carbonated sodas bad for your bones?

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Fracture

Fact:

Every day, over 500 Canadian men and women break a bone because of osteoporosis.

Concerns have been raised that consumption of carbonated soft drinks, notably cola drinks, may adversely affect bone health. Although a few observational studies have shown an association between high carbonated beverage consumption and either lower bone mineral density or increased fracture rates in teenagers, there is no convincing evidence that these drinks negatively affect bone health.



It has been suggested that the phosphorus content may have a negative impact on calcium metabolism, but this has not been shown in any experimental studies. Along with calcium, phosphorus is a key component of bone mineral, and there is no evidence that phosphorus intake is bad for bone health or raises osteoporosis risk in healthy people.

Another argument that has been put forward is that cola beverages are acidic and dietary acidic load is detrimental to bone. To counterbalance the acidity in the blood, calcium or magnesium are taken either from the blood or, if not available, the body draws calcium from the bone. However, soda drinks have a moderate acid/alkaline balance and are essentially 'neutral' to the kidney. The acid in cola beverages is phosphoric acid, which is a biologically weak organic acid (as is citric acid, found in fruit juices).

The impact of caffeine

Colas and energy drinks do contain a lot of caffeine and high quantities of caffeine have been known to decrease the amount of calcium your body stores. However, studies in postmenopausal women showed that as long as calcium intake was sufficient (Osteoporosis Canada recommends 1,200 mg per day for those over 50),

caffeine intake had no detrimental effects. If on the other hand calcium intake was low, then the caffeine intake equivalent to about 3 cups of brewed coffee per day was associated with more bone loss. Therefore, ensuring that you have the recommended intake of calcium will help to offset potential calcium losses due to caffeine intake.

Try mineral waters instead of carbonated sodas

Finally, it should be noted that the carbonation is not the culprit. Many commercial mineral waters are carbonated, and some are rich in calcium and other minerals – as well as being free of calories. A study has shown that high calcium mineral waters were beneficial to skeletal metabolism in postmenopausal women with low dietary calcium intake (less than 700 mg/day). Check the labels of the mineral waters available in your supermarket and compare the calcium content – some can provide 150 mg or more of calcium per litre.

The displacement effect

Although there may be no firm evidence that carbonated soft drinks themselves adversely affect bone health, these drinks certainly do 'displace' milk in the diet – resulting in lower calcium intake. This is especially important to remember for children and adolescents. They should be drinking calcium-rich beverages such as milk or fortified soy beverage, with only limited intake of soft drinks. By getting enough calcium when the skeleton is still growing, children can build stronger bones, which will give them a head start in preventing osteoporosis later in life.

Reprinted with permission from Love Your Bones Newsletter, September 2014, a monthly publication of the International Osteoporosis Foundation (IOF).

Osteoporosis Canada Launches New Long-Term Care Guidelines

Osteoporosis Canada recently released the first-ever national guidelines on preventing fractures in long-term care facilities, where fractures are significantly more common than among seniors in the community. The guidelines, entitled *Recommendations for Preventing Fracture in Long-Term Care*, offer healthcare professionals, residents of long-term care facilities and their families guidance to help them take measures to reduce immobility, pain and hospital transfers, and to improve the quality of life for residents in long-term care. Published in *CMAJ (Canadian Medical Association Journal)*, the guidelines were developed with input from residents of long-term care facilities and their families as well as researchers and health professionals.

“One-third of older adults who experience hip fractures, and many others who experience different types of fracture, are residents in long-term care homes. Yet, in many cases, these fractures can be prevented,” said Dr. Papaioannou, lead author and Professor of Medicine, Division of Geriatric Medicine, McMaster University. “These recommendations fill a gap in the current care of residents of long-term care homes, and will help improve the treatment and care for one of Canada’s most at-risk patient populations.” Links to the guidelines and an electronic toolkit are on the OC website at <http://www.osteoporosis.ca/health-care-professionals/long-term-care/> and the PowerPoint presentation is at <http://gerascentre.osteoporosislongtermcare.ca/resource/2015-powerpoint-presentation/>.

Life After Fracture: So the journey begins

A hip fracture is a significant event for older adults and their families; however, there are a few things that older adults are able to do to help themselves with the recovery process. Dr Maureen Ashe's team [interviewed approximately 19 older adults and/or their family members](#) about the experience, and their “*words of wisdom*” for recovery after hip fracture. When they summarized the findings, three key themes or concepts were noted:

Key theme #1: Move more

Older adults were emphatic about the importance of completing the “physio” exercises; building balance and strength is essential to helping the physical recovery process to prevent future falls and injuries. They also found that trying to *move more* and avoid prolonged sitting (if possible) is also an important part of the recovery process.

Key theme #2: Seek support

Older adults told us that *seeking the support* of their families, friends and community helped their recovery.

Key theme #3: Put things into perspective

Our study participants told us that they needed to remind themselves how far they had come after the hip fracture, and that progress was often a gradual process.

The rich experience garnered from the study participants led to the development of a new educational manual and several videos to enhance the recovery process. The videos are meant to provide a snapshot of the recovery process from the perspective of older adults. They also aimed to provide a summary of key features from a nursing and physiotherapy perspective.

Reprinted with permission from the Centre for Hip Health and Mobility. For more information, and to view the videos, click here: <http://www.hiphealth.ca/blog/life-after-fracture--so-the-journey-begins>.

For more information about pain and practical tips for movement After the Fracture, click here: www.osteoporosis.ca/after-the-fracture/table-of-contents.

If you have questions about this article or any other aspect of osteoporosis, please call toll-free 1-800-463-6842 (416-696-2663 in the Greater Toronto Area) to speak to an information counsellor.

Moved? Changed phone number or e-mail address?

Let us know by calling 1-800-463-6842 or emailing copn@osteoporosis.ca and we'll update your information. This will ensure we keep you up to date!

How well do you know your bones? This issue's COPING Quiz

Please feel free to contact us with any questions or comments by emailing us at copn@osteoporosis.ca or calling toll free 1-800-463-6842.

[Click here to try the quiz](#)

FUNNY BONE:

She was only a whisky maker, but he loved her still.

A Recipe from our Sponsor

Wheat Berry Salad with Dukkah

Course: *Main Dishes*

Preparation Time: *30 mins*

Cooking Time: *1 hr, 5 mins*

Refrigeration Time: *1 hr*

Yields: *4 to 6 servings*

3/4 milk product serving(s) per person

Calcium: 28% DV/ 311 mg

Everyone is cooking with whole grains these days, and wheat berries are all the rage! The berry is the entire wheat kernel – before it is ground into flour. You can buy wheat berries, cook them like any other grain, and turn them into this delicious and unusual summer salad.



Ingredients

1 cup (250 mL) wheat berries
6 oz (180 g) **Canadian Feta**, crumbled
1 cup (250 mL) sliced strawberries
12 large dried dates, coarsely chopped
1/4 cup (60 mL) flat parsley leaves
2 tbsp (30 mL) olive oil
1 tbsp (15 mL) white balsamic vinegar
Canadian Parmesan, shavings

Dukkah:

4 tbsp (60 mL) sesame seeds
2 tsp (10 mL) coriander seeds
2 tsp (10 mL) cumin seeds
1/4 cup (60 mL) hazelnuts
1/4 cup (60 mL) pistachio nuts
Freshly ground salt and pepper

Preparation

Cook wheat berries in a large quantity of boiling water until tender but still slightly al dente, about 55 min. Drain and transfer to a large bowl. Add remaining salad ingredients and mix well. Refrigerate 1 hr.

To prepare dukkah, preheat oven to 350°F (180°C).

In a dry pan, toast sesame seeds until golden. Transfer to a small food processor. In the same pan, toast coriander and cumin seeds until fragrant. Add to the food processor.

Spread hazelnuts and pistachios on a baking sheet and bake in the middle of the oven about 5 min or until nuts are fragrant. Transfer nuts to a clean kitchen towel, fold the towel into a bundle and rub the nuts together to skin them as thoroughly as possible.

Add the skinned nuts to the food processor. Pulse until the mixture is blended and the nuts are in fine pieces.

Serve the salad with the dukkah on the side in a small bowl with a spoon for guests to sprinkle to their taste.

Tips

Dukkah is a blend of nuts and spices used abundantly in Egypt and elsewhere in the Middle East. People sprinkle it on salads, grilled meats and vegetables, and eat it on pita bread dipped in oil.

Keep leftover dukkah refrigerated in a tightly sealed jar.

For more information about this recipe:

<http://www.dairygoodness.ca/getenough/recipes/wheat-berry-salad-with-dukka>

This issue of COPING is sponsored by Dairy Farmers of Canada

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