



Osteoporosis Canada

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COPING

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Remember: You can live well with osteoporosis!

Fall Prevention is Everyone's Responsibility

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Fracture Fact

Among people over 65, 30% fall each year, and the numbers are even higher for people over 80 years.

By Sarah Nixon-Jackle

In spring of 2016 I turned over a new leaf for the benefit of my health.

- I am mindful of healthy eating.
- I joined an exercise program at a fitness facility that has a great program emphasizing strength, endurance and power. Coaching is provided at every session and the trainers are fastidious about posture and balance!
- Yoga once a week provides for a nice time of stretching and renewal after my gym work-outs. This plan has made great improvements to my stamina, flexibility, strength, posture and feeling "good" about me.
- However, my new activity has shown me that at 58, I am not as flexible nor do I have the same balance as the 20- and 30-year-olds in the sessions!

I had more than one near miss trying to do the same as everyone else in the class. Thankfully, I sustained injuries only to my pride. I now know that I need to modify some exercises and how I use some of the equipment to safely achieve the same results. The trainer is there to show me how to modify exercises so that they are safe yet effective.

Falls can happen to anyone. I am including a definition of a fall because many people don't recognize that what happened to them was actually categorized as a fall. The Saskatoon Health Region's fall definition is consistent with the definition used by researchers and other organizations:

"A fall is: An unexpected event where the person comes to rest on the ground, floor or lower level with or without an injury. This includes unwitnessed falls where the person is unable to explain the event and there is evidence to support a fall has occurred. Also included is the event where the person is eased to the floor by staff or a family member." (Being eased to the floor by staff or family member may occur when a person is seen to be losing their balance and would otherwise fall, perhaps injuring themselves. For the source of the definition, go to [https://www.saskatoonhealthregion.ca/locations_services/services/Falls-Prevention/.](https://www.saskatoonhealthregion.ca/locations_services/services/Falls-Prevention/))

Fall prevention is everyone's responsibility. In addition to learning that fall prevention is everyone's responsibility, I have picked up quite a number of practical tips along the way. Here are some of my favourites:

1. **Know your limits and know where to start**, and then **get started!** That is the one lesson I have been learning over and over. I have limits, but with the right support, I can stretch the boundaries a bit.
2. **Challenge/test your limits.** This comes with training. Check with your community recreation or leisure service department or health region for classes designed for people living with osteoporosis. Talk to the class leader about whether they are aware of the safety issues for someone with osteoporosis. Or consult an exercise specialist who has an understanding of what exercises are safe and effective for you. You can then be assured that the coaches/trainers have the knowledge and skills to provide you with safe exercises. Check out Osteoporosis Canada's *Too Fit to Fracture: Managing Osteoporosis through Exercise*.
<http://www.osteoporosis.ca/osteoporosis-and-you/too-fit-to-fracture/>
3. **Determine your motivation.** In other words, why do you want to live life to the fullest? What do you have to do to achieve this? My motivation is my grandchildren. I want to be the fun grandma who can get up off the floor from playing, not from falling down.
4. **Seek advice.** This may mean an appointment with a physical therapist (PT) who can suggest appropriate exercises for you after thoroughly assessing your current abilities. The PT can also help you set reasonable goals, and develop a plan in the event of a setback.
5. **Practise healthy habits.** Good nutrition, including calcium-rich foods and adequate protein, vitamin D supplementation and exercise – all contribute to bone health to reduce your risk of a fall and the fracture that may result. Remove or reduce unhealthy habits from your life, such as too much alcohol or smoking.
6. **Be aware of medication issues.** Speak with your pharmacist if you are taking medications. Ask if any of the prescriptions or over the counter products/supplements/herbal remedies you take can contribute to a risk for a fall. Sleep aids and anti-depressants, for example, may decrease your alertness and make you more likely to fall.
7. **Check your environment.** Do you live, work and play in safe spaces? Check out the Coping article on Indoor and Outdoor Fall Risks that offers excellent advice. See link below.
8. **Be safe.** Don't take unnecessary risks like standing on a kitchen chair to reach the cupboard. Use a step stool designed for getting safely to those high places. Better yet, if climbing a step ladder is no longer safe for you, employ a younger person!
9. **Be not afraid.** Fear is limiting, confidence is liberating. Once you have taken the steps to improve your strength, stamina, posture and balance, adopt the “can do” attitude.
10. **Pat yourself on the back** for successes no matter how big or small. Too many times we look to how we fall short rather than standing tall with every positive achievement.
11. **Nominate a person(s) who has helped you** for a “You make my life better” award. You may have someone

who selflessly, just out of the goodness of their heart, has made a difference to make your life better. To nominate someone, go to <http://www.osteoporosis.ca/wp-content/uploads/2015-04-21-Call-For-Submission-Form-FINAL.pdf>.

Resources are available in previous issues of *Coping*. Click here for excellent information from experts on preventing falls <http://www.osteoporosis.ca/osteoporosis-and-you/copn/coping-archives/>. See especially the following:

- Feb 14, 2014: What Causes Falls?
- Feb 26, 2014: Reducing Personal Health Fall Risks
- March 14, 2014: Reducing Indoor and Outdoor Fall Risks
- March 26, 2014: Exercises that Help Improve Balance and Reduce Fall Risk
- Dec 17, 2014: Fall Prevention over the Holiday Season
- June 3 and 17, 2015: Mobility and Assistive Devices to Reduce the Risk of Falls and Fractures

Exercise videos. Regular exercise is a great way to keep your muscles and bones strong and help prevent falls. In November 2015, as part of Osteoporosis Month, Osteoporosis Canada posted a series of 21 videos to provide ideas for safe and effective exercises and physical activity. These videos are now available to download; go to <http://www.osteoporosis.ca/osteoporosis-and-you/too-fit-to-fracture/video-series-on-exercise-and-osteoporosis/>

Bone Matters virtual forum. The Serious Side of Gravity: Prevention of Falls and Fractures presented June 8, 2016 by Fabio Feldman PhD, Manager Seniors Fall and Injury Prevention, Fraser Health Authority, BC. <http://www.osteoporosis.ca/osteoporosis-and-you/copn/virtual-forum/>

Other agencies that provide great information on fall prevention:

Finding Balance Alberta <http://findingbalancealberta.ca/seniors.html>. This site also provides links to fall prevention sites in BC and the eastern provinces.

Finding Balance Ontario <http://www.findingbalanceontario.ca/>

Public Health Agency of Canada Injury Prevention <http://www.phac-aspc.gc.ca/seniors-aines/publications/public/index-eng.php#ip>

Saskatoon Health Region https://www.saskatoonhealthregion.ca/locations_services/services/Falls-Prevention/

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.

Calcium and Cardiovascular Disease

The National Osteoporosis Foundation and the American Society for Preventive Cardiology formed an expert panel and completed a detailed review of all published research evaluating the effects of calcium intake from food sources and/or supplements with or without vitamin D on the risk of heart attacks, strokes and death.

The results of that review were published in the Annals of Internal Medicine by Kopecky* and colleagues on October 25, 2016. The review confirms that there does not appear to be any harmful or beneficial effects of calcium and/or vitamin D on the risk of heart disease or stroke or on the likelihood of death in healthy adults. The expert panel recommended that calcium intake from food and/or supplements be not greater than 2,000 mg or 2,500 mg on a daily basis.

This position taken by the National Osteoporosis Foundation and the American Society for Preventive Cardiology supports the position of Osteoporosis Canada, which advises Canadians to take in 1,000 mg to 1,200 mg of calcium daily from food sources. If this is not possible, then Osteoporosis Canada advises that calcium supplements may be used to meet the daily calcium requirements. Osteoporosis Canada recommends discussing the need for additional calcium or vitamin D supplements with your physician as both nutrients are essential for achieving and maintaining optimal bone health.

* <http://annals.org/aim/article/2571714/lack-evidence-linking-calcium-without-vitamin-d-supplementation-cardiovascular-disease>

BONE MATTERS

Take charge of your bone health

Did you miss Dr. Sandra Kim's presentation on osteoporosis medications on October 12th? **Bone Matters: Medication Matters** is now archived and available for you to watch at <http://webcast.otn.ca/mywebcast?id=59317799>.

Coming soon: Bone Matters – Diabetes & Bone Health: A Forgotten Complication

Presented by: Dr. Julie Gilmour, MBChB, FRCPC, MSc (HQ)

Endocrinologist, St. Michael's Hospital

Tuesday, November 29, 2016

12:30 – 1:30PM EST

[Click here to register](#)

November is Osteoporosis Month and Diabetes Awareness Month. Join Dr. Gilmour as she explores the connection between the two.

- Both men and women with diabetes are at increased risk of broken bones from osteoporosis
- Reduced sensation in the feet and episodes of low blood sugar from diabetes can cause falls, resulting in fracture
- Certain drugs used to treat type 2 diabetes can increase the risk of fracture

FUNNY BONE:

A consultant is someone you pay a hundred dollars an hour to give you the same advice you ignore from your assistant. – Robert Orben

A Recipe from our Sponsor

Scottish Oat & Leek Pilaf with Salmon

Course: *Main Dishes*

Preparation Time: *15 mins*

Cooking Time: *45 mins*

Yields: *4 servings*

1/2 milk product serving(s) per person

Calcium: 21% DV/ 226 mg

Oats move to the savoury side in this skillet supper. It's truly a one-pan meal with all four good groups. Cooking the oats in milk makes them creamy and tender and infuses the good nutrition right in. The salmon steams on top of the oats, and the asparagus, dill and lemon add a fresh punch.



For more information about this recipe:

<http://www.dairygoodness.ca/getenough/recipes/scottish-oat-leek-pilaf-with-salmon>

Ingredients

1 tbsp (15 mL) **butter**
2 leeks (white and light green part only), chopped
1/2 tsp (2 mL) salt
Pepper
1 cup (250 mL) steel-cut oats, rinsed
3/4 cup (175 mL) low-sodium vegetable or chicken broth
2 cups (500 mL) **milk**
1/2 lemon
2 cups (500 mL) chopped asparagus or green beans
2 tbsp (30 mL) chopped fresh dill or 1 tsp (5 mL) dried dill
4 piece (125 g) skinless salmon fillet, about 1/2 inch (1 cm) thick
Additional chopped fresh dill (optional)

Preparation

In a large, deep skillet, melt butter over medium heat. Sauté chopped leeks, salt and 1/4 tsp (1 mL) pepper for 2 minutes. Cover, reduce heat to medium-low and cook, stirring occasionally, for about 8 minutes or until leeks are soft and starting to turn golden. Stir in oats.

Stir in broth and milk and bring to a simmer over medium-high heat, stirring occasionally. Reduce heat to low, cover and simmer, stirring once, for 15 minutes, or until oats are slightly tender.

Meanwhile, finely grate zest from lemon; cut lemon into four wedges.

Stir lemon zest, asparagus and dill into oats. Nestle salmon

salmon fillets in oats, spacing evenly around the pan. Season with pepper. Cover and simmer for about 10 minutes, or until white juices are released from salmon and it is just opaque. Remove from heat and let stand, covered, for 5 minutes. Spoon portions onto plates and serve with lemon wedges to squeeze over top. Sprinkle with additional dill, if desired.

Tips

This recipe works best with salmon fillets that are about 1/2 inch (1 cm) thick. If you can only find thicker fillets, broil them on a baking sheet for 5 minutes before adding to the skillet with the oats to be sure they cook through in the same time as the oats and vegetables.

A gentle simmer, with small bubbles breaking the surface of the liquid, is important to keep the pilaf from sticking to the pan. If you have a smaller or “simmer” burner on your stove top, be sure to use that one to cook this recipe. If the pan seems to be boiling when cooking the oats, set the lid very slightly ajar to slow down the cooking. Be sure to put the lid on tight after adding the salmon to make sure it steams properly.

This issue of COPING is sponsored by Dairy Farmers of Canada

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