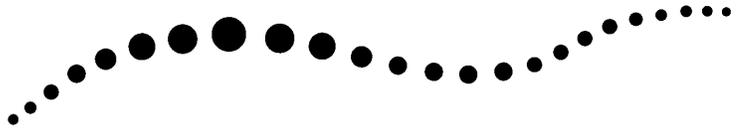


Osteoporosis  
Society  
of Canada

La Société  
de l'Ostéoporose  
du Canada



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***COPING***  
**The E-newsletter of the  
Canadian Osteoporosis Patient Network (COPN)  
May 2005**

***COPN – Dedicated to representing people with osteoporosis on all issues related to the disease.***

Our newsletter has a name! Thanks to all of you who submitted suggestions. We decided to go with *COPING* – because that's what this network, and this newsletter, is all about, helping you and others *cope* with a difficult disease. In this issue, we bring you two personal stories of people who are *coping*. Send us yours.

**My Story**

**Osteoporosis: Men Are at Risk Too**

Have you heard of osteopenia? Neither had I until I was diagnosed with it.

Osteoporosis, as you may already know, is thinning of the bones that causes them to become fragile and brittle. Osteopenia, on the other hand, is perhaps best described as *at significant risk of osteoporosis*. It means that you have already lost between 10 and 25 percent of bone. Can you imagine my shock at discovering I had low bone density and was at risk? I am a healthy man in his early forties. How did this happen?

When I joined the staff of the Osteoporosis Society of Canada, I announced that I would take a bone mineral density test. I did this as a bit of a stunt to show my commitment to the mission of the Society. A couple of weeks after my bone density test – which is a quick and painless procedure– my physician called and booked me an appointment right away to discuss my low bone density. For those in the know, my T-score was –1.76, which places me at moderate to high risk for osteoporosis.

There is good news out of all this. With diet and exercise I can stall the process of bone loss. And the changes to my diet and exercise regimen are not onerous or esoteric. More milk and dairy, such as yogurt and cheese, and more walking, along with some calcium and vitamin D supplements – that's my current prescription.

I don't want osteoporosis taking over my life. I have learned all about its pain and disfigurement – the humped back, the crushed vertebrae, difficult respiration as a result of the body collapsing in on itself, and the surprising and unnecessary fractures. The

Society is here to help with awareness, education about prevention, and advocating for better therapy.

That's my story. **Charles Hain**, Director, Resource Development, Osteoporosis Society of Canada

### **Osteoporosis in Men: Risk Factors**

The following risk factors are associated with osteoporosis in men:

- Prolonged exposure to certain medications, for example glucocorticoids such as prednisone
- Low levels of the sex hormone testosterone
- Lifestyle habits:
  - Smoking
  - Excess alcohol use
  - Low calcium intake
  - Inadequate physical exercise
- Low bone mineral density (BMD)
- Heredity

### **What Men Can Do to Prevent and Manage Osteoporosis**

- Talk with your doctor about your risk factors for osteoporosis, especially if you are 50 or more years old. If you have one or more major risk factor, or two or more minor risk factors, ask your doctor to refer you for a bone mineral density test.
- Decide what physical activity you are able to do, and like to do, and do it.
- Maintain a high level of foods rich in calcium. If you are between 19 and 50, you require 1,000 mgs of calcium per day. Over 50, you need 1,500 mgs. If your diet does not provide sufficient calcium, consider a supplement.
- Make sure you are getting enough vitamin D. If you are 19 – 50, you need 400 IUs; over 50, 800 IUs.
- Consider a medical examination with a focus on osteoporosis identification.
- Be aware of the risk factors in relation to your lifestyle and take the steps you need to take to prevent this devastating disease from happening to you.

### **My Story**

#### **Struggling with the Pain of Osteoporosis**

I am a 72-year-old woman and I've suffered with osteoporosis and fractures for about 10 years. When my sister was diagnosed with osteoporosis, she encouraged me to get a bone density test, which I did. While waiting for the results, I fractured my wrist one morning getting out of bed. Needless to say, I knew that the results of the test would not be favourable, and I was right.

My doctor put me on HRT (hormone replacement therapy) and calcium, and I began walking, hoping to get my risk of fracture down from “high risk.”

I’ve had a few falls over the years, resulting in vertebral fractures. Two falls happened in and around water, like the one when I was teaching my dog to swim. While lifting him out of the water, I fractured three vertebrae. During a vacation in Cuba, I was knocked down by a wave and fractured two more vertebrae. In another fall, on land this time, I fractured three more vertebrae. A few years after my first bone mineral density test, I had experienced a 23 percent decrease in my bone density.

For the last while, my husband has been sidelined with gout in his foot. The extra housework and his care have been difficult. We had been sharing the housework, as standing was difficult for me. His help was great, but now I have his jobs and my jobs. I think that I now have arthritis at my fracture sites, and it is quite painful. When I happen to see myself unexpectedly in a window in a mall, I am distressed at the way that I look. I look so old.

My medications have changed a lot as well. I am now taking weekly *Fosamax*®. Also, since I first started to write this article, I began to experience a lot of pain in my back. My doctor sent me for x-rays. I have fractured two more vertebrae – they are crushed. My doctor has now added *Miacalcin*®, the nasal spray, to my osteoporosis drugs. She says that it will help with the pain as well as to build bone. I certainly hope that I am finally on the right track. **Shirley Maw, Barrie, Ontario**

### **Tell Us Your Story of Living with Osteoporosis, Stories that Might Help Others**

Here are some topics that you may wish to consider. Email us at [COPN@osteoporosis.ca](mailto:COPN@osteoporosis.ca). Please note that stories you submit may be published in subsequent newsletters or on the COPN web site.

- How you have managed to increase your bone mineral density.
- How you are working (or not) with weight-bearing exercises.
- How you are managing to get enough calcium, especially if you are intolerant to dairy products.
- How you deal with the pain of osteoporotic fractures.
- What are your family’s experiences with osteoporosis; how are you managing? How has your family been affected by osteoporosis?
- How are you helping your children to be aware of the osteoporosis in your family?
- Your struggle to be diagnosed with osteoporosis.
- Your surprise at the diagnosis of osteoporosis/osteopenia: what was your immediate reaction?
- Did you have problems getting an effective osteoporosis drug? What happened?
- Being a caregiver to someone with osteoporosis.
- Any other aspect of being a person with osteoporosis – tell us your story.

## What's Happening in Your Area?

COPN would like to know what is going on in your area that would be of interest to people living with osteoporosis. E-mail us at [COPN@osteoporosis.ca](mailto:COPN@osteoporosis.ca) with your report. Here is news from the Regina Chapter:

- There are still cases of osteoporosis in southern Saskatchewan that are not being diagnosed until there are fractured bones. The situation is improving as both the medical profession and the general public are becoming better informed.
- The Regina Chapter is working to improve this situation by holding a Bone China Tea as well as two or three educational forums each year. We also attend several health fairs, where we distribute information to the public.
- In January 2005 the chapter ran a successful Health Knowledge Training session. There were excellent speakers and some very capable participants. There are plans to send these participants out to various centres in southern Saskatchewan to further educate the public about osteoporosis.
- There is only one bone mineral density machine in southern Saskatchewan. It is about a 14- to 15-month wait for a bone mineral density test at present. Urgent cases are moved up the list. The machine scans the spine, bilateral hip and the forearm.
- Didrocal is the only drug covered under Saskatchewan's Drug Plan. If it is not satisfactory for the patient, then Special Status may be granted for another drug.
- The Regina Chapter has held an MLA Breakfast and an MLA Luncheon to raise the government's awareness of osteoporosis concerns. A group of board members and doctors, along with Maureen McTeer, met with the Minister of Health to further discuss concerns. In the recent budget there was a 50 percent increase in funding for osteoporosis testing in Saskatchewan. The chapter hopes to continue with this advocacy.

Report by **Evelyn Campbell**, Regina Chapter

## Volunteer with COPN

Is your life in any way affected by osteoporosis?

Are you interested in representing people with osteoporosis?

COPN is a virtual network of people whose mandate is to provide the patient perspective wherever possible. We are a dynamic, growing network and we have many opportunities for you to join us:

- Steering committee members to provide leadership
- Publicists to spread the word
- Writers/editors to help put out the e-newsletter *COPING*
- Web-savvy people to work on our web site

Join our team. E-mail us at [copn@osteoporosis.ca](mailto:copn@osteoporosis.ca).

**Newsletter disclaimer:** We invite you to contribute to this newsletter. Selection of material is at the discretion of the editor. Opinions expressed in material published in the COPN newsletter do not necessarily reflect the position of the Osteoporosis Society of Canada. Individuals contributing material are solely responsible for the content, accuracy and originality of the material. To contribute to the next edition of the COPN newsletter, contact us at [COPN@osteoporosis.ca](mailto:COPN@osteoporosis.ca).