



Osteoporosis Canada

Ostéoporose Canada

**COPING**

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**Remember: You can live well with osteoporosis!**

# What if you couldn't walk your dog?

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## Fracture

### Fact:

Loss of 2cm (3/4") as measured by one's health-care provider or 6cm (2 1/2") or more in height overall may be an indicator of spinal fracture.

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Betty Donaldson, an accountant with a large national firm, prepared for her retirement as carefully as she had prepared her many clients' tax returns. A widow for nearly three years, Betty created a detailed list of all the activities, clubs and trips she would have time to pursue after she retired, but what she looked forward to the most was the time she could spend with her beloved Golden Retriever, Maxie. Betty carefully covered all the bases to financially afford her all that she dreamed of, but, like so many Canadians, she had taken for granted the health of her bones.

On the verge of retirement, Betty fractured her wrist from a simple fall. Home from the hospital with a cast on her arm Betty was confident that in a few months the fracture would heal and everything would return to normal. She was lucky to have a good friend who was a member of COPN and familiar with Osteoporosis Canada's campaign *Make your FIRST break your LAST*. She encouraged Betty to learn more about her bones and her fracture by signing up for her own free membership to COPN. From Osteoporosis Canada's website, Betty armed herself with information and requested a bone density test and a fracture risk assessment from her family doctor. To both their dismay, Betty was found to be at high risk for another fracture.

Like so many who receive a similar diagnosis, Betty was shocked. What did this mean? Did she have to change her lifestyle, her retirement plans? Would she be able to continue to care for Maxie? Her doctor cautioned her that she might not be able to walk her dog, Maxie, who sometimes pulled and tugged hard on her leash, because osteoporosis can weaken the bones in your spine. In advanced stages, the every-day act of bending forward may result in a spinal fracture. For some people this means that the simple task of filling a pet's water and food bowl may be too risky. And as for walking one's dog, one may not have the strength to manage the animal anymore. A strong tug on a leash may be enough to break one's wrist, arm or vertebra.

At least one in three women and one in five men will suffer from a broken bone from osteoporosis during their lifetime. Like Betty, many are unaware that they have osteoporosis because there are no symptoms. Breaking a bone is often the first sign

of osteoporosis. In fact, in those over fifty, 80% of all broken bones are caused by osteoporosis. Unfortunately, few understand this fact and therefore a huge care gap exists in Canada. Only 2 in 10 patients who have sustained a fracture are assessed for osteoporosis. Eight in 10 are treated for their fracture only and sent home without any treatment for their underlying osteoporosis, which caused the fracture in the first place. The likelihood of sustaining a second fracture within the year is very high. If you have broken a bone after the age of 40, insist on an assessment. You may have attributed your break (fracture) to a fall, a slip or something else when in fact it was due to your porous bones. The only way to know for sure is by having a bone mineral density (BMD) test and a fracture risk assessment.

Fortunately, Betty was not found to have any spine fractures. Her doctor checked Betty's vitamin D levels and prescribed osteoporosis medication and vitamin D supplements.. With help from COPN and advice from Osteoporosis Canada's volunteers, Betty also made sure she ate a well balanced diet that included fresh fruits and vegetables and adequate amounts of protein and calcium. In addition, her doctor referred her to a physiotherapist who created an individualized exercise prescription to strengthen Betty's muscles and bones; and an occupational therapist assessed Betty's home to ensure the risk of falls was as low as possible.

At the time of Betty's diagnosis it was suggested that she make some lifestyle changes, hire someone to walk her dog, buy dog bowls that were elevated to save her from bending over too far and begin taking medication. Betty took her diagnosis seriously. A year later, she was in the best shape of her life, and her osteoporosis medications were doing their job. Happily retired and fracture-free once more, Betty was able to achieve her goals and is walking Maxie again, just as she had planned.

What's more, Betty Donaldson is spreading the word. Bone health is critical to keeping the 'Golden Years' golden. So what can you do? Early diagnosis, including a fracture risk assessment and treatment if necessary, are critical. If you are fifty or older, at your next doctor's appointment, discuss your family's bone health history. If one of your parents suffered a hip fracture, or if you, yourself, had a fracture after the age of 40, ask for a Bone Mineral Density (BMD) test and a fracture risk assessment. Either way, make sure you have a well balanced diet, get regular exercise, and take adequate amounts of vitamin D and if necessary, calcium supplements. Be sure to also visit [www.osteoporosis.ca](http://www.osteoporosis.ca) for Osteoporosis Canada's lifestyle recommendations.

Your bones have to last you a lifetime. By being proactive and taking care of your bone health, regardless of your fracture risk, your body and your dog will thank you every day.

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.

## FUNNY BONE:

Is there another word for synonym?

## OSTEOPOROSIS CANADA'S ANNUAL GENERAL MEETING 2015

Osteoporosis Canada is hosting its annual general meeting (AGM) in Toronto over the weekend of September 18-20. The AGM will be held at the Holiday Inn Toronto International Airport, 970 Dixon Road, Toronto on Saturday, September 19, 2015 at 9:00 a.m. Here's a short explanation of what happens at these meetings and why they are important:

**Who attends?** The Chair of Osteoporosis Canada's Board of Directors hosts this annual meeting. The other members of the Board also attend, as do the President and CEO of Osteoporosis Canada, members of OC's senior management team, the COPN Executive Committee and OC's Operations Advisory Committee. All OC members in good standing are eligible to vote on motions. They will receive an AGM information package in the mail beforehand and they can either vote in person at the meeting or submit their proxy to Corona Steele, [csteele@osteoporosis.ca](mailto:csteele@osteoporosis.ca). The AGM is also open to the public.

**What's on the agenda?** Both the Chair of the Board and OC's President and CEO will reflect on the accomplishments and challenges of the past year and present their vision of future priorities and directions for Osteoporosis Canada. Members will vote to accept the audited financial statements for 2014-2015. Osteoporosis Canada's Annual Report will be presented at the meeting and made available afterwards to all as a downloadable file on Osteoporosis Canada's website at [www.osteoporosis.ca](http://www.osteoporosis.ca).

**Why is this important?** The Annual General Meeting provides the organization the opportunity to confirm with its members that Osteoporosis Canada (and all of its components including COPN) is on the right track in meeting its mandate and serving its clients. An upcoming issue of COPING will report on the outcome of the AGM and the other events like OC's annual awards presentations that take place around it.

### Moved? Changed phone number or e-mail address?

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

## A Recipe from our Sponsor

### Golden Caprese salad

Course: *Hors D'œuvres & Appetizers*

Preparation Time: *10 mins*

Yields: *4 to 6 servings*

*3/4 milk product serving(s) per person*

**Calcium:** 3% DV/ 33 mg



Peaches and tomatoes? This mouthwatering variation on everyone's favourite Italian salad also tastes great with grilled pork or chicken.

**For more information about this recipe:**

<http://www.dairygoodness.ca/getenough/recipes/golden-caprese-salad>

## Ingredients

### Salad:

3 large red tomatoes, sliced  
1 **Canadian Fresh Mozzarella**, sliced  
2 peaches or nectarines, pitted and sliced  
3 tbsp (45 mL) homemade Thai basil pesto or any other store-bought pesto  
2 tbsp (30 mL) water

### Thai basil Pesto:

2 tbsp (30 mL) silvered almonds  
1 clove garlic  
2 cups (500 mL) fresh Thai basil leaves  
2 tbsp (30 mL) **Canadian Parmesan**, grated  
1/4 cup (60 mL) olive oil  
Salt

## Tips

Thai basil Pesto: Pesto can be frozen in ice cube trays and used to add flavour to many different dishes such as soup, pasta and vegetables.

### Cheese alternatives for Fresh Mozzarella:

Canadian Fior di Latte, Bocconcini.

## Preparation

### Salad:

- On a serving plate, arrange tomatoes, Mozzarella and peaches or nectarines.
- Mix pesto with water, drizzle over salad or serve separately.
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- Mix pesto with water, drizzle over salad or serve separately.

### Thai basil Pesto:

- Place almonds in a skillet and toast on medium heat, stirring frequently. Let cool.
- With a food processor, chop garlic with almonds.
- Add basil and Parmesan. Process until everything is finely chopped.
- With the machine running, gradually add oil through the top.
- Season to taste and transfer to a jar. Cover and store in the refrigerator for up to a week. Makes approx. ½ cup (125 mL) of pesto.

**This issue of COPING is sponsored by Dairy Farmers of Canada**

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