

COPING

‘A Newsletter from COPN’
October 30th, 2009

Remember: You can live well with osteoporosis!

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1. Thought for Today:

Learn from the mistakes of others. You can't live long enough to make them all yourself.

2. Bone Density Testing

This is the first in a series of articles, used with permission from the Dartmouth Osteoporosis Multidisciplinary Education Program, Dartmouth, Nova Scotia.

The most accurate test used to diagnose osteoporosis is the bone mineral density test. This test is often referred to as **bone densitometry or BMD test**. It measures the amount of mineral found in your bones. The results of this test tell your doctor if you are developing or have developed **osteoporosis**. To determine this, your bones were compared to the bones of an average young adult between the ages of 30 and 35. Based on that comparison a T-score was given to your bones.

3. Fracture Risk Calculator for Women

This is based on recommendations from Osteoporosis Canada. It applies to women over 50 who have had a bone density test done.

My Age: _____

My Lowest T-Score: _____. You may need some help in finding this. Your health care provider will look for the lowest of the spine or the hip.

A Fragility Fracture is a broken bone from a simple fall or a minor bump after the age of 40, or you have a broken or crushed bone in your back.

Did this happen to you? _____ Yes _____ No

I am on Prednisone: _____ Yes _____ No

STEPS:

1. Identify the row in the table below that is closest to your age.
2. Determine your 10 year risk of fracture by using the lowest T-score.
3. Go over one level of risk if you have had a previous fragility fracture.
4. Go over one level of risk if you are taking Prednisone.

4. Ten-year Fracture Risk for Women

AGE (years)	LOW RISK Less than 10%	MODERATE RISK 10% - 20%	HIGH RISK More than 20%
50	more than -2.3	-2.3 to -3.9	less than -3.9
55	more than -1.9	-1.9 to -3.4	less than -3.4
60	more than -1.4	-1.4 to -3.0	less than -3.0
65	more than -1.0	-1.0 to -2.6	less than -2.6
70	more than -0.8	-0.8 to -2.2	less than -2.2
75	more than -0.7	-0.7 to -2.1	less than -2.1
80	more than -0.6	-0.6 to -2.0	less than -2.0
85	more than -0.7	-0.7 to -2.2	less than -2.2

My 10 year risk of a fracture is: _____

5. Fracture Risk Calculator for Men

This is based on recommendations from Osteoporosis Canada. It applies to men over 50 who have had a bone density test done.

My Age: _____

My Lowest T-Score: _____. You may need some help in finding this. Your health care provider should look for the lowest of the spine or the hip.

A **Fragility Fracture:** is a broken bone from a simple fall or a minor bump after the age of 40, or you have a broken or crushed bone in your back.

Did this happen to you? _____ Yes _____ No

I am on Prednisone: _____ Yes _____ No

STEPS:

1. Identify the row in the table below that is closest to your age.
2. Determine your 10 year risk of fracture by using the lowest T-score.
3. Go over one level of risk if you have had a previous fragility fracture.
4. Go over one level of risk if you are taking Prednisone.

6. Ten-Year Fracture Risk for Men

AGE (years)	LOW RISK	MODERATE	HIGH RISK
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	Less than 10%	RISK 10%-20%	More than 20%
50	more than -3.4	≤ -3.4	---
55	more than -3.1	≤ -3.1	---
60	more than -3.0	≤ -3.0	---
65	more than -2.7	≤ -2.7	---
70	more than -2.1	-2.1 to -3.9	less than -3.9
75	more than -1.5	-1.5 to -3.2	less than -3.2
80	more than -1.2	-1.2 to -3.0	less than -3.0
85	more than -1.3	-1.3 to -3.3	less than -3.3

My 10 year risk of a fracture is: _____

(Note: For women and men, if you have both fractured and are on prednisone, you will be considered at high risk regardless of your BMD results)

7. What does my fracture risk mean?

You have calculated your risk of having a fracture in the next 10 years.

Your risk is <i>low</i> (less than 10%)	Your risk is <i>moderate</i> (between 10 and 20%)	Your risk is <i>high</i> (more than 20%)
At this time you generally don't need a prescription medication to prevent osteoporosis. You need to continue a healthy lifestyle for your bones with good nutrition (dairy products or calcium supplements and vitamin D) and exercise. Quit smoking. Despite your low risk now, your risk will gradually increase over the years. Check with your doctor to see when you should have your bone density test repeated (usually in about 5 - 10 years unless there is a change in your health).	Most people at this risk level do not need osteoporosis medications but should be monitored by their doctor. Your doctor will look at your other risk factors in deciding if you need a prescription medication for osteoporosis or not. You will need to continue a healthy lifestyle with lots of calcium and vitamin D and exercise. Quit smoking. You will need to have a repeat bone density test in 1 - 5 years.	A prescription medication for osteoporosis is likely needed to help decrease your risk of fracture. You need to ensure that you have enough calcium and vitamin D. You may be at high risk for getting a broken bone in your back. Posture is very important. Some exercises may not be safe for you, especially if these exercises are new to you. A physiotherapist can guide you. Protect yourself from falls. Quit smoking. Your doctor will repeat the bone density test in 1 to 2 years to see if the medications are helping.

Used with permission from DOME (Dartmouth Osteoporosis Multidisciplinary Education Program), Dartmouth, Nova Scotia.

8. Canada's Research-Based Pharmaceutical Companies R&D Les compagnies de recherche pharmaceutique du Canada

La version française suit

The Rx&D International Report on Access to Medicines, 2008-09

***The Access to Medicines Report is in
How Does Canada Compare?***

On behalf of *Canada's Research-Based Pharmaceutical Companies (Rx&D)*, I am pleased to invite you to an interactive information session to discover the findings of the Rx&D International Report on Access to Medicines (IRAM) 2008-09.

This report, undertaken by **Wyatt Health Management**, raises questions about the quality of Canada's health care systems demonstrating that – despite advances made recently - Canada still ranks near the bottom of developed countries in terms of access to the new innovative medicines.

Come and hear the results of the comprehensive report and join in an open discussion on the impact of the findings and potential solutions to improve our health care system in terms of access to new medicines.

Together, we can do much better !

OTTAWA	TORONTO	HALIFAX	EDMONTON	MONTREAL	VANCOUVER
<i>Mon. Nov. 2 8:00 – 9:30 am</i>	<i>Mon. Nov. 2 1:30 – 3:00 pm</i>	<i>Mon. Nov. 2 3:00 – 4:30 pm</i>	<i>Thurs. Nov. 5 Noon</i>	<i>Thurs. Nov. 5 Noon</i>	<i>Fri. Nov. 6 Noon</i>
Joliette Room Crowne Plaza Hotel 101 Lyon Street Ottawa	Admiral Ballroom Radisson Admiral Hotel 249 Queen's Quay West Toronto	Windsor Room 1 Prince George Hotel 1725 Market Street Halifax	Queen Elizabeth Suite Delta Centre 10222 – 102 Street Edmonton	Hochelaga 5 Fairmont Queen Elizabeth 900, René-Lévesque West Montreal	Georgia A Hyatt Regency 655 Burrard Street Vancouver

We look forward to having you join us and ask that you confirm your attendance at IRAM@national.ca or by telephone to Melissa Wood at 613-237-3575.

Yours sincerely,

Russell Williams
President, Rx&D

9. Funny Bone:

What happens when a ghost gets lost in the fog?He is mist!

In what room of the house would you never find a ghost?The living room.

How do you fix a jack-o-lantern?With a pumpkin patch.

Why wasn't the vampire working?He was on his coffin break.

Why did the witch's mail rattle?It was a chain letter.

Remember: It is important for you to eat a **healthy diet**, get some appropriate **exercise**, take your **calcium and vitamin D** and if your doctor has prescribed a **medication** don't forget to take it as directed.

COPING will come to you every second Friday. We hope you enjoy it and find the information useful. Don't forget to log on to www.osteoporosis.ca for up to date information.

The material contained in this newsletter is provided for general information only. It should not be relied on to suggest a course of treatment for a particular individual or as a substitute for consultation with qualified health professionals who are familiar with your individual medical needs. Should you have any health care related questions or concerns, you should contact your physician. You should never disregard medical advice or delay in seeking it because of something you have read in this or any newsletter.