

The Medical Minute: What is osteoporosis? Why now? Why me?

July 29 2009, By Edward J. Fox

Osteoporosis comes from a Latin term which means "holes in the bone." In reality it is a skeletal disease characterized by low bone mineral density and structural deterioration of bone, leading to bone weakness and increased risk of fracture. Untreated, osteoporosis can lead to fragility fractures, which are broken bones that occur from falls at a standing height. These most commonly occur at the wrist, hip, or spine.

Women are more at risk for [osteoporosis](#) than men since women lose the protective effect of estrogen once menopause is reached. Other risk factors include Asian and Caucasian descent, small skeletal frame and low body weight, tobacco and alcohol use, sedentary lifestyle, poor lifelong [calcium intake](#), certain medications, diabetes, transplants, gastric bypass/gastrectomy, anorexia/bulimia, [celiac disease](#), and neuromuscular disorders.

Starting at age 30, bone is lost at 0.2 percent per year, and jumps to 2 percent per year after menopause. Current guidelines recommend at least 1,500mg of calcium and 800IU of Vitamin D per day. This can usually be accomplished by consuming at least three cups of milk (low-fat or fat-free are OK) plus calcium-rich foods like broccoli, almonds, yogurt, and cheese.

However, calcium and Vitamin D are not enough by themselves to stop osteoporosis. Special prescription medications called anti-reabsorptive agents (which can be taken as little as once a year) can halt the loss of bone over time. Exercise has been also shown to improve bone strength,

and can improve balance, thus preventing falls and fractures that may result.

Is it too early (or late) to start osteoporosis prevention?

No. Good [bone density](#) at an early age translates to a lower risk of fracture later on in life. This can be accomplished by making sure you get enough calcium, Vitamin D, and exercise. On the other hand, post-menopausal women may ask, “is it too late to start osteoporosis intervention?” Again, the answer is no. It is never too late to stop bone loss once you have been diagnosed with osteoporosis. Even a 1 percent improvement in [bone](#) density translates to a decreased risk of fracture. And that’s still true for someone even in their 90s or beyond.

Who should I see to be diagnosed and treated for osteoporosis?

The easiest way to start is by contacting your primary care provider and asking to be evaluated for osteoporosis. However, there are other specialists who also manage osteoporosis, such as gynecologists, endocrinologists, rheumatologists, and orthopaedists.

Source: Penn State, by Edward J. Fox

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