

Nation's hip fracture rate could drop 25 percent with aggressive osteoporosis prevention

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Aggressively managing patients at risk for osteoporosis could reduce the hip fracture rate in the United States by 25 percent, according to a Kaiser Permanente study published in the November issue of the *Journal of Bone & Joint Surgery*. The first step must be a more active role by orthopedic surgeons in osteoporosis disease management, researchers say.

This study, the largest to look at osteoporosis management in men and women over 50 years old, followed 650,000 men and women in Kaiser Permanente's osteoporosis management program and found hip fractures dropped by 38 percent, preventing 970 hip fractures in 2007.

The prospective observational study examined the effectiveness of the Kaiser Permanente Southern California's Healthy Bones Program from 2002 to 2007. Kaiser Permanente HealthConnect, the world's largest civilian electronic health record database, was used to collect data on patients that included anti-osteoporosis medication usage, bone density scans and fragility fractures.

A recent report showed that Kaiser Permanente in Southern California leads the nation for effective osteoporosis disease management. The National Committee on Quality Assurance, a private, non-profit organization dedicated to improving health care quality, recently released the results in its Quality Compass study of reporting health



plans for 2008. Of the 10 million Americans who have osteoporosis, 80 percent are women.

"Currently in the United States, the rate of treatment after a fragility fracture is only 20 percent. Treatment after a fragility fracture at Kaiser Permanente in Southern California is now 68 percent. Health care would be drastically improved if this model of osteoporosis care were adapted for the rest of America," said the study's lead author Richard M. Dell, MD, an orthopedic surgeon at Kaiser Permanente in Downey, California.

The Healthy Bones Program aggressively targets people at risk for hip fractures by identifying them through KP HealthConnect to ensure they get the bone density screenings and medications they need. The multidisciplinary team includes orthopedic surgeons and providers from endocrinology, family practice, internal medicine, rheumatology, gynecology, physical therapy, disease/care management, radiology, and nursing education.

In this study, researchers found that annual bone density screening rates increased by 263 percent from 2002 to 2007. In 2002 there were 21,557 scans a year. In 2007, there were 78,262 scans. The number of people on anti-osteoporosis medications increased by 153 percent from 33,208 in 2002 to 84,155 a year in 2007.

"The most important thing an orthopedic surgeon should know about osteoporosis/fracture prevention is that we can take action that helps to prevent hip and other fragility fractures," Dell said. "Simple steps like suggesting calcium and vitamin D for all your patients and bone mineral density testing in patients at higher risk for osteoporosis should be considered part of your daily practice."

More than 300,000 hip fractures are reported annually in the United States. Twenty-four percent of people who experience a hip fracture end



up in a nursing home, 50 percent never reach their functional capacity, and 25 percent of patients over 65 years of age with a <u>hip fracture</u> die in the first year after the incident.

"After a fracture, you need treatment, and in America, most people are not getting the treatment they need," Dell said. "The lesson here is if you are over 50 years old and have a fragility fracture, ask your doctor about getting a <u>bone density</u> scan, and if needed, osteoporosis treatment."

Dr. Dell further states that understanding the pathophysiology of osteoporosis and fragility fractures helps to develop a treatment strategy for your patients. The medical management of <u>osteoporosis</u> is not always complex and can be done by most practicing orthopedic surgeons.

Source: Kaiser Permanente (<u>news</u> : <u>web</u>)

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