

Targeted preventive measures for hip fracture are needed for persons with Alzheimer's disease

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The hip fracture risk factors are generally similar among those with and without Alzheimer's disease, according to a recent study from the University of Eastern Finland. However, the incidence of hip fracture is higher among those with Alzheimer's disease, regardless of other characteristics. Alzheimer's disease itself appears to be such a significant risk factor for hip fracture that the relative impact of other risk factors is considerably smaller among those with Alzheimer's disease.

Older persons, men, and those with mental and behavioural disorders or using antipsychotics or antidepressants had a higher [hip fracture](#) risk both among persons with and without Alzheimer's disease, but the relative risk increase was higher among persons without Alzheimer's disease. Stroke, diabetes, active cancer treatment, and the use of [proton pump inhibitors](#), antiepileptics or opioids were associated with a higher hip fracture risk only in those without Alzheimer's disease.

The findings are based on the MEDALZ study, including all community-dwellers of Finland who received a clinically verified diagnosis of Alzheimer's disease in 2005-2011 and had no history of previous hip fracture (N=67,072) and a matched cohort of persons without Alzheimer's disease.

Previously, many risk factors for hip fracture, including [dementia](#), had been identified. It was not known whether the same factors predict hip

fracture risk in persons with and without Alzheimer's disease, which is the most common form of dementia. However, it is known that the consequences of hip fracture are even more devastating for a person with dementia.

The new findings underline the importance of developing and implementing preventive interventions that are suitable for persons with dementia. Different preventive interventions such as exercise, medications, home safety assessment and modification interventions, as well as medication reviews have already been proposed but few studies have explored the applicability of these measures to persons with dementia. Regular assessments of medication are one feasible approach, as an association was found between various medications and hip fracture risk.

More information: Anna-Maija Tolppanen et al. Comparison of predictors of hip fracture and mortality after hip fracture in community-dwellers with and without Alzheimer's disease – exposure-matched cohort study, *BMC Geriatrics* (2016). [DOI: 10.1186/s12877-016-0383-2](https://doi.org/10.1186/s12877-016-0383-2)

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