

SPOT THE SIGNS OF A BREAKING SPINE



DON'T LOSE TO OSTEOPOROSIS

www.worldosteoporosisday.org

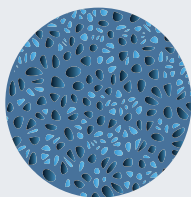


WorldOsteoporosisDay
October20

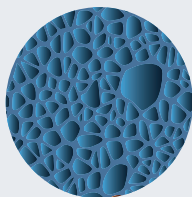


DON'T LEAVE YOUR BONE HEALTH TO CHANCE

Osteoporosis is a disease that causes bones to become weak and more likely to break.



Normal bone



Osteoporotic bone



Broken bone

MOST PEOPLE DON'T KNOW THEY HAVE OSTEOPOROSIS UNTIL A BONE BREAKS.

1/3
WOMEN



1/5
MEN



Worldwide, broken bones due to osteoporosis (known as fragility fractures) affect **one in three women** and **one in five men** aged **over 50 years**.

Fragility fractures are a major cause of pain, disability, loss of physical independence, and premature death in millions of people worldwide.

Spine (vertebral) fractures are the most common type of fragility fracture.

Even a single vertebral fracture can lead to severe and chronic back pain, loss of height, stooped back (curvature of the spine, known as kyphosis) and reduced mobility.

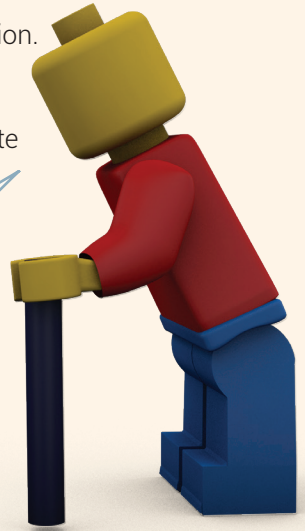


UNDER-DIAGNOSIS AND UNDER-TREATMENT OF SPINE FRACTURES IS A GLOBAL PROBLEM

Vertebral fractures often don't come to a doctor's attention. There are many reasons for this, including the fact that not all spine fractures are painful, or doctors simply prescribe medication for 'back pain' and don't investigate further.

IT NEVER OCCURRED TO ME THAT MY BACK PAIN WAS DUE TO OSTEOPOROSIS.

Radiologists may miss the sign of collapsed vertebrae and fail to report it – in fact, **only about 40% of older women**, and fewer than **20% of older men**, who have X-rays with visible spine fractures are referred for assessment for osteoporosis.



TEST YOUR KNOWLEDGE!

Spine fractures often result in kyphosis...which is

A: inability to walk

B: curvature of the spine

C: intense pain

D: type of X-ray

Worldwide, how many people aged 50 +, will break a bone due to osteoporosis?

A: 1 in 5 women, 1 in 3 men

B: 1 in 100 women, 1 in 80 men

C: 1 in 3 women, 1 in 5 men

D: 1 in 30 women, 1 in 50 men

FIND THE SOLUTIONS AT THE END OF THE BROCHURE!

OSTEOPOROSIS DOES NOT PLAY FAIR

Spine fractures due to osteoporosis are almost twice as common as other osteoporotic fractures and occur in 30 to 50% of people over the age of 50.

The serious, long-lasting effects of vertebral fractures can cheat you of your future - drastically reducing your quality of life and physical independence.

This may include:

- > **Severe deformity** (kyphosis, i.e. stooped back)
- > Acute and chronic **back pain**
- > **Difficulty in bending** and rising
- > **Difficulty in daily activities** such as dressing or climbing stairs
- > **Depression**
- > Increased number of **bed days**
- > **Breathing difficulties**
- > **Problems with digestion**



"The spinal damage caused me to lose 3.5 inches in height"

 Salima, Canada

 Peter, Ireland

"I went through severe pain, and was not able to walk, shower, eat or dress without assistance"

 Jintana, Thailand

"It was impossible for me to continue working"

 Carmen, Peru

"It never occurred to me that my back pain was due to osteoporosis"

COULD YOUR SPINE BE AS FRAGILE AS A HOUSE OF CARDS?

The spinal column is made up of **24 individual bones**, called vertebrae, that are stacked on top of one another. Spine fractures result when one of the **bones in the spinal column collapses**, or fractures.

Such fractures usually **occur after a fall**, but can also result from a sudden movement, a sneeze or cough, or simply from bending to tie a shoelace.



SPOT THE SIGNS OF A BREAKING SPINE!

Signs of vertebral fractures, particularly in people over 50 years of age, may include:



Spine fractures most commonly occur near the waistline, or slightly above it (mid-chest) or below it (lower back). The pain is usually there all the time, but often gets worse with movement, particularly when changing positions.

If you suspect you could have vertebral fractures, be proactive in seeking help. Don't just assume that your sudden back pain is due to arthritis, muscle strain or other causes – **ask for a spine X-ray and get checked for osteoporosis.**

ALREADY FRACTURED? STOP AT ONE!

All patients aged 50 years or over who have a newly reported spine fracture are at high risk of experiencing another fracture and should be referred for osteoporosis assessment and treatment. This should happen within three months of the vertebral fracture being diagnosed.

That's because, in the year following a spine fracture, the risk of a new vertebral or another type of fracture increases sharply. **Without treatment, about 20% of women will have a new vertebral fracture within the year.**

01.

ASK YOUR DOCTOR FOR A BONE HEALTH ASSESSMENT

that includes imaging tests

02.

IF A BROKEN BONE FROM OSTEOPOROSIS IS CONFIRMED

ask for appropriate osteoporosis medication

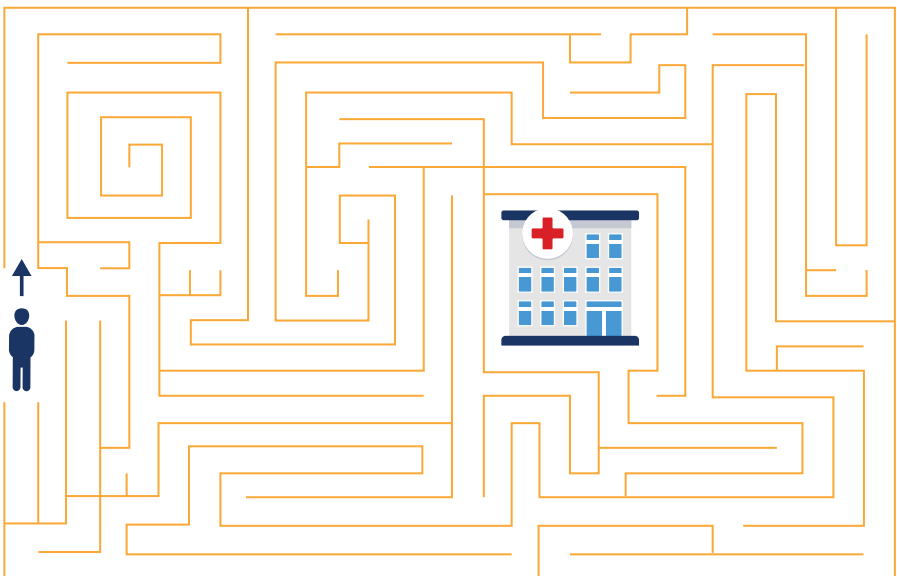
03.

ENSURE YOU STAY ON PRESCRIBED MEDICATION

and discuss any concerns with your doctor

Imaging tests will provide important information about your fracture and will help your doctor determine if your injury is new (acute) or older (chronic). X-rays are the most common way to diagnose a vertebral fracture. Dual energy X-ray Absorptiometry (DXA) scan with Vertebral Fracture Assessment is also used for diagnosis.

Can you find the way to the hospital?

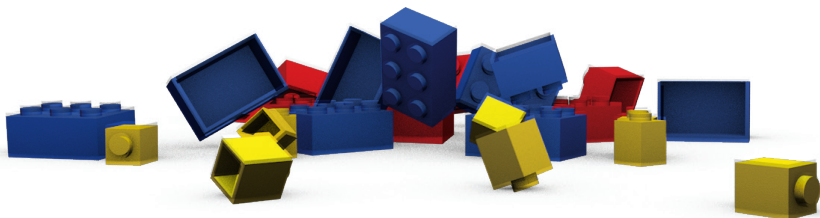


FIND THE SOLUTIONS AT THE END OF THE BROCHURE!

MANAGING SPINE FRACTURES

If you have suffered a spine fracture, your doctor may recommend the following to help relieve pain and aid bone healing:

- Pain relief with **anti-inflammatory and pain medications**
- **Short-term bed rest in cases of severe pain** (patients should begin moving around as soon as possible within the limits of their pain)
- **A back brace during the few weeks of healing**
- **Physiotherapy** – exercises to improve posture, muscle strengthening
- **A falls prevention program**
- **Hydrotherapy**
- For patients who suffer severe pain that does not respond to nonsurgical treatment, procedures that strengthen the vertebrae such as kyphoplasty and vertebroplasty may be considered.



TREAT OSTEOPOROSIS - THE UNDERLYING CAUSE OF BROKEN BONES

There are many safe and effective treatment options that can substantially reduce the risk of additional or 'secondary' fractures. **A bone health assessment will help your doctor determine the status of your bone health** and an appropriate treatment strategy to address bone density loss. Normally, medication, together with diet, exercise and lifestyle changes, should begin as soon as possible.

Effective therapy can reduce the risk of vertebral fractures within 6-12 months by 50-80%.

FIND KEY WORDS RELATED TO SPINE FRACTURES

- Osteoporosis
- Vertebra
- Fracture
- Kyphosis
- Pain
- Immobility
- Medication
- Physiotherapy
- Risk
- Spine

N	S	I	Q	H	W	O	X	E	G	P	A	N	M	R	U	R	Y	S	F	Y	X	Q
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FIND THE SOLUTIONS AT THE END OF THE BROCHURE!

SET YOUR GAME PLAN FOR LIFELONG BONE HEALTH

Don't wait until you have broken a bone to take action against osteoporosis!

1 LEAD A BONE-HEALTHY LIFESTYLE

A bone-healthy lifestyle contributes to stronger bones and helps to lower fracture risk. Make sure you take regular weight-bearing and muscle-strengthening exercise and maintain a healthy, balanced diet that includes enough calcium, vitamin D and protein. Avoid smoking and excessive alcohol intake.

2 BE AWARE OF YOUR PERSONAL RISK FACTORS

The IOF One-Minute Osteoporosis Risk Test will help alert you to possible personal risk factors. Or, ask your doctor to complete the FRAX risk assessment tool, a simple online questionnaire that calculates your 10-year risk of fracture.

3 ASK YOUR DOCTOR FOR A BONE HEALTH ASSESSMENT

For women, menopause is a good time to ask for a bone health assessment. At any age, if you have risk factors for osteoporosis, don't hesitate to ask your doctor for more information and testing if required.

4 TAKE MEDICATION TO STRENGTHEN YOUR BONES

If you have had a fracture due to osteoporosis, or your doctor finds that you are at high risk for other reasons, it is likely that you will be prescribed an appropriate medication to reduce the risk of future broken bones. Make sure you take the medication as prescribed and, if you're concerned about any side effects, speak to your doctor. By continuing with treatment, you can protect your bones against more damaging and potentially life-threatening fractures.

5 PREVENT FALLS

If you have weak bones, you need to take extra steps to prevent falls, including doing exercises to improve your strength and balance, having your eyes checked, and making your home safer.

Take the IOF One-Minute Osteoporosis Risk Test to find out whether you have risk factors for osteoporosis. Available at www.iofbonehealth.org









Our vision is a world without fragility fractures
in which healthy mobility is a reality for all.

IOF Global Patient Charter

Show your support for fracture prevention and improved care of osteoporosis patients worldwide. Sign the IOF Global Patient Charter at <https://www.iofbonehealth.org/iof-global-patient-charter>

For further information about osteoporosis, consult your local osteoporosis patient or medical society. A list is available at www.iofbonehealth.org

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