# **BONE HEALTH**

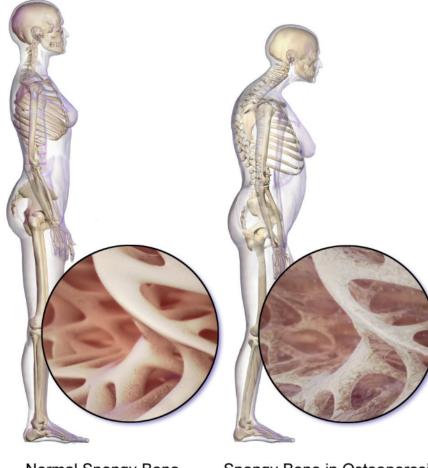
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#### **Effects of Osteoporosis**



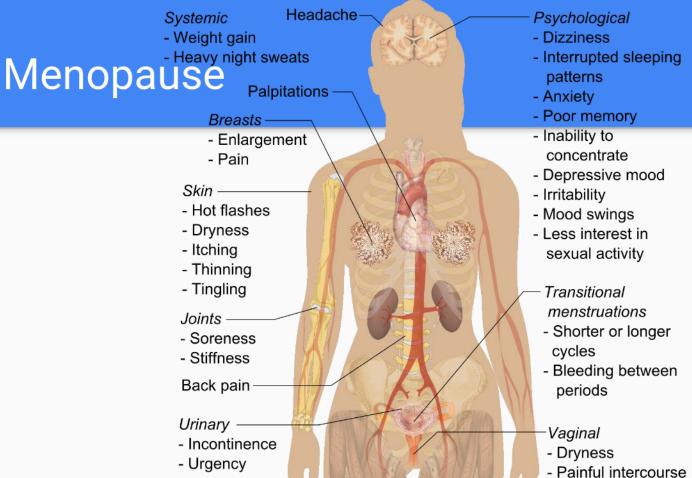
Normal Spongy Bone

Spongy Bone in Osteoporosis

## Menopause

- Defined as cessation of menses for at least one year
- Average age in U.S. is 51
- Vasomotor symptoms
- Vaginal dryness

# Symptoms of **Menopause**



## Osteoporosis

- Porous bone
- Skeletal disorder characterized by low bone mineral density
- Makes people susceptible to fracture (hip and vertebrate most common)
- Silent disease
- Women > men affected (8.2 million vs 2 million, aged >50)
- White/Hispanic race more susceptible
- Low estrogen at menopause greatly contributes to this

#### Evaluation

History and physical exam, must review medical risk factors/medication use

Checking height, because height loss related to vertebral fracture

## Symptoms

- Loss of height-getting shorter by and inch or more
- Change in posture
- Bone fracture
- Lower back pain

### Risk factors

- Medication use such as steroids
- Lifestyle -- the more inactive or sedentary, the greater the risk
- Smoking
- Alcohol use (two or more drinks per day)

## **Testing**

#### Dexa--Dual energy X-ray absorptiometry

- Measures bone mineral density
- Hip and lumbar spine most accurate
- Measure T score--compares bone mass to that of young adult of same gender
- Measure Z score--compares bone mass to that of people their same age/gender/body type (if -2, maybe other things causing low bone mass)
- WHO criteria for diagnosis
- Osteoporosis: T score less than or equat to -2.5 sd
- Low bone mass: T score between -1.0 and -2.5 sd
- Normal bone mass: T score -1 or greater

#### Prevention

- Routine aerobic and weight-bearing exercise
- Free weights, jogging, stepping, jumping rope
- Consuming RDA of Calcium and Vitamin D
- RDA calcium 1000 mg/day age 19-50 and 1200 mg > 50
- RDA Vitamin D 600 iu to age 70 and 800 iu after this
- Above is obtained from diet, no recommendation for supplementation
- Supplementation can lead to kidney stones
- Prevention of falls
- Smoking cessation, limit alcohol, less salt in the diet

### Prevention looked at further

#### Falls

- Install grab bars
- Pick up grandchildren's toys
- Improve lighting
- Wearing shoes that have a good grip

## Dietary changes-foods to limit

- Foods high in salt
- Alcohol
- Beans (have chemicals that prevent calcium absorption)
- Excess Vit A
- Decrease caffeine intake

## Screening

- Routine starts at age 65
- DEXA recommended
- Hip (femoral neck) and lumbar spine most accurate
- Interval between screenings is generally 2 years
- Preferable to do at same place that patient did before

#### Treatment

- HRT or hormone replacement therapy
- Bisphosphonates antiresorbtive drugs
- Biologics injection every 6 months
- Anabolic agents bone building

#### FRAX

- Fracture Risk assessment tool
- Computer based algorithm to estimate 10 yr risk of hip fracture and 10 year probability of major osteoportotic fracture in adults >40 y/o
- Helps asses need for BMD testing in people < 65 y/o</li>
- Helps determine whether to start treatment in people with low bone mass
- A FRAX score >5% for a hip fracture, consider treatment with lifestyle changes

## Treatment of menopausal symptoms

- Hormone replacement therapy
- Progestin
- Testosterone
- Herbal medications

## Take home messages

- Eat a healthy diet, lots of green, leafy vegetables, well-balanced meal
- Exercise regularly
- Decrease use of unnecessary medication
- Decrease alcohol/smoking cessation
- AVOID FALLS, very important, seems so basic
- Keep davening for a long and healthy life to 120!

# Thank you

Question & Answer

### Conclusion

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