

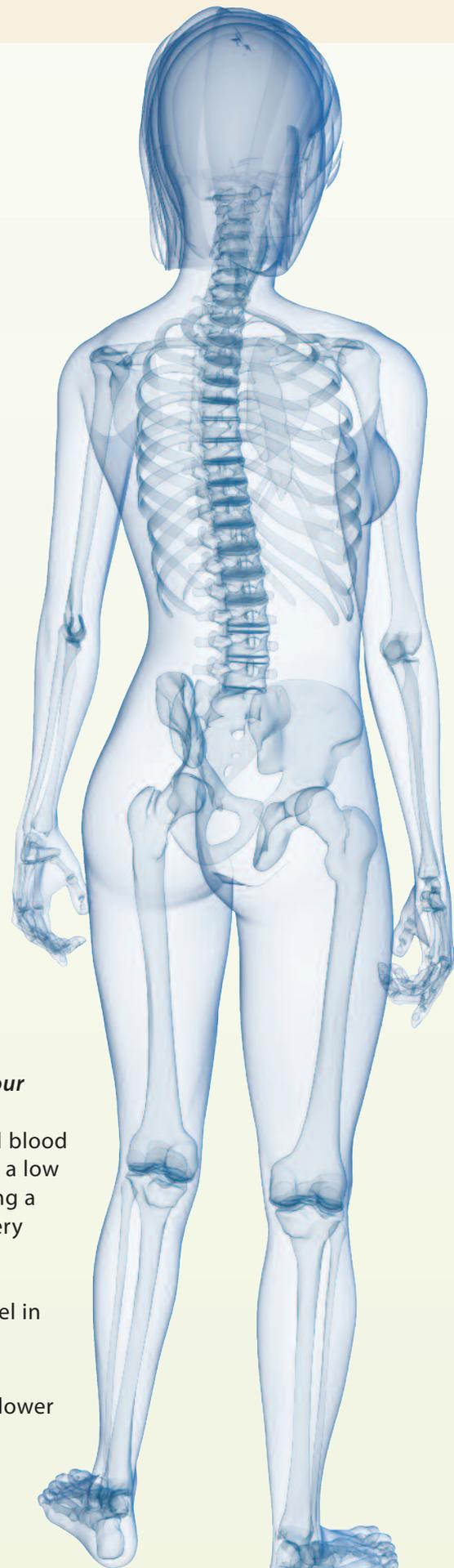
Healthy bones for women*



osteoporosis is a disease known for slow, silent loss of bone. (In this case, the word “silent” means that you won’t feel anything as the disease starts or worsens.) Bones become thinner and weaker, so they are more likely to fracture—that is, to break. Women are more likely than men to get osteoporosis. Your risk is also higher if someone in your family has had osteoporosis or if at least one of your parents has had a broken hip. More than 1.5 million fractures each year are related, at least in part, to osteoporosis.

Your healthcare professional (HCP) can help you assess your bone health at routine visits by...

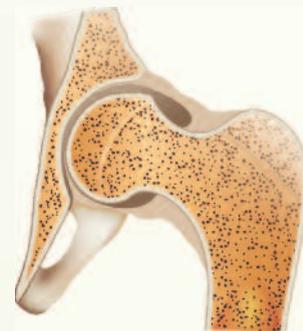
- **Measuring your height.**
A loss in height may mean that you have had silent spine fractures. Any loss in height from year to year should be checked further.
- **Using your height and weight measures together to compute your body mass index (BMI).**
A low BMI or a weight less than 127 pounds (thinner women) is a risk factor for osteoporosis.
- **Reviewing all the medicines you are taking, including prescription and over-the-counter medicines and supplements.**
Medicines such as prednisone, some antidepressants, some heartburn/ulcer drugs, and others may increase bone loss.
- **Discussing whether you should have a blood test to measure your vitamin D level.**
Vitamin D is needed to absorb calcium in your bones. A normal blood level of vitamin D is 30 ng/mL or higher. Risk factors for having a low vitamin D level include being older than 60, being obese, having a disease of the kidney or bowel, getting too little sun, having very dark skin, having had gastric bypass surgery, and using certain medicines. If your vitamin D level is too low, your HCP will prescribe vitamin D supplements and retest your vitamin D level in a few months.
- **Discussing whether you should have a bone density test.**
A bone density test measures bone mass in places such as the lower spine, hip, and forearm. The most common bone density test done is a DXA (dual energy x-ray absorptiometry) scan. You should have this test if you are 65 or older, if you are older than 50 and have risk factors for osteoporosis, if you broke a bone after age 50, or if you are past menopause and are



stopping the use of estrogen. Depending on your test results and your risk factors, and whether you've had any osteoporosis treatment, you may need another DXA scan every 2 or more years.

- **Using a tool called FRAX to see whether you should have a bone density test (if you are past menopause but not yet 65).**

Your HCP may also use FRAX if your bone density test shows low bone mass (but not osteoporosis) to see if you need to be on an osteoporosis prevention medicine. FRAX shows your risk of having a bone fracture in the next 10 years by looking at your risk factors and, if done, your bone density test scores.



You can maintain or improve your bone health by...

- **Eating the right foods and taking supplements if needed.**

You need calcium to make and keep your bones strong. Adult women up to age 50 need 1,000 mg/day and women older than 50 need 1,200 mg/day. Good food sources of calcium are low-fat dairy products, calcium-fortified foods (e.g., cereals, orange juice), kale, bok choy, halibut, and sardines with bones. Know your usual dietary intake of calcium to decide how much supplement is needed to meet daily requirements. If you take a supplement, it's best to divide your dose so you take no more than 500 mg of calcium at one time. Calcium carbonate costs the least and is taken with meals to work best. Calcium citrate need not be taken with meals.

You need vitamin D for calcium to be absorbed by your bones. Women younger than 50 need 400-800 IU/day and women older than 50 need 800-1,000 IU/day. Most women do not stay out in the sun long enough for their bodies to make vitamin D. Good food sources of vitamin D are wild salmon, halibut, trout, sardines, and vitamin D-fortified foods (e.g., milk, yogurt, cereals, orange juice). Know your usual dietary intake of vitamin D to decide how much supplement is needed to meet daily requirements.



- **Limiting your intake of sodium, which reduces calcium absorption.**

Look for sodium content on food labels. Avoid processed and canned foods and salted snack foods and nuts. Eat fresh or frozen fruits and vegetables and fresh lean meats, poultry, and fish.

- **Getting regular exercise, which helps make your bones strong.**

Plan to get at least 30 minutes of moderate weight-bearing exercise on most days of the week. Weight-bearing exercises include brisk walking, running/jogging, dancing, stair climbing, tennis, and use of exercise equipment such as elliptical training and stair-step machines and treadmills. Plan to do muscle strengthening exercises 2 or 3 days each week. You can lift weights, use weight machines, or use elastic exercise bands. Yoga and Pilates can improve strength, flexibility, and balance.

- **Not smoking.**

Smoking decreases calcium absorption and speeds up bone breakdown.

- **Drinking alcohol in moderation.**

For women, this is no more than 2 drinks each day. One drink = 10 ounces of beer, 4 ounces of wine, or 1 ounce of liquor. Drinking heavily can lead to bone loss. ●

Resources for more information

National Osteoporosis Foundation

4BoneHealth

FRAX calculator

*Readers are invited to photocopy Patient education pages in the journal and distribute them to their patients.