The Osteoporosis Agenda
England

Improving the lives of people with osteoporosis and fragility fractures
Osteoporosis is the fragile bone disease that can cause painful and debilitating fractures (broken bones), sometimes resulting in premature death. Every year, people in the UK suffer more than 300,000 fragility fractures; often from just a minor bump or fall. Many of these could be prevented with earlier diagnosis and treatment.

1 in 2 women and 1 in 5 men over the age of 50 will break a bone.³

3 million people in the UK are estimated to have osteoporosis.³
Bill’s Story

Bill was in his mid-50s when he fell off his bike onto grass, broke his elbow and injured his hip. In great pain, he was unable to walk without a stick for the next four months.

A few years later Bill severely hurt his back moving some furniture. Several visits to the GP only resulted in recommendations for different painkillers. Over time, Bill’s wife noticed that he was developing a hunched back. Following Bill’s own research into vertebral fractures, he pushed hard to be referred for a privately paid X-ray and DXA scan. These indeed revealed vertebral fractures as a result of osteoporosis.

Bill went on to suffer more vertebral fractures before being referred to an excellent rheumatologist and is now on the right osteoporosis medication for him. If there had been a Fracture Liaison Service in Bill’s area, he could have been identified and assessed after that first fracture and saved the pain of further fractures.

Life with Osteoporosis

Our 2014 Life with Osteoporosis survey asked over 3000 people about day-to-day life with the condition.°

42% of people who had experienced fractures are in long-term pain which they don’t think will ever go away.°

1 in 3 people in long-term pain describe it as severe or unbearable.°

42% of people said their osteoporosis has made them feel socially isolated.°
Cost to the NHS

Older people with one or more long-term conditions such as osteoporosis account for around 70% of all hospital admissions and 70% of total NHS spending.\(^5\)

**Every year hip fractures alone account for:**

- Nearly 69,000 unplanned hospital admissions in England.\(^6\)
- Approximately £1.5 billion in English hospital costs, excluding the high cost of social care.\(^7\)
- 1.3 million bed days in English hospitals.\(^8\)

The Solution

Key recommendations to improve the lives of millions of people in England with osteoporosis and fragility fractures:

1. **Improve local services:** Lead and support local provision of services for people with osteoporosis and fragility fractures

2. **Strengthen national policy:** Encourage development of national policy on osteoporosis and fragility fracture care

3. **Conduct a national audit of all fragility fractures:** Support and funding for a comprehensive audit to help improve services

4. **Raise awareness:** Improve understanding of osteoporosis with resulting fragility fractures as a distressing, prevalent and costly condition
By identifying patients in a consistent, systematic way, it is estimated that up to 25% of hip fractures (about 20,000 a year) in the UK could be prevented through Fracture Liaison Services.

NHS England recognises that a Fracture Liaison Service demonstrates best practice in secondary fracture prevention and yet only 35% of healthcare organisations in England currently have this important service.

An FLS, often run by a nurse specialist, is a proven model for fragility fracture prevention.

**All patients over the age of 50 years who fracture are targeted**

- **Find them**
- **Assess them**
- **Treat if appropriate**
- **Follow-up**

We are focused on the commissioning of Fracture Liaison Services across the country. We are working with NHS England, Public Health England and other key stakeholders to develop robust support for local commissioners and healthcare professionals. Our guidance for FLS defines the core standards every service should meet. These standards need to be adopted to ensure that every patient receives evidence-based best practice care.

At a local level, there is an important role for local decision-makers to play in helping to ensure that osteoporosis services including Fracture Liaison Services are correctly prioritised by local Health and Wellbeing Boards and, in turn, Clinical Commissioning Groups.

Help us ensure that osteoporosis services are prioritised and commissioned locally.
2 Strengthen National Policy

NHS policy has already recognised hip fracture care as a priority area for improvement. This, along with a Best Practice Tariff for hip fracture and the introduction of the National Hip Fracture Database has driven significant improvements in patient care in England.

However, other fragility fractures do not receive the same attention. It is vital that people over the age of 50 who have broken any bone are assessed for osteoporosis via an FLS to prevent them from fracturing again. We already know that 50% of people who have suffered a hip fracture have previously broken a bone.\(^{12,13,14,16}\)

Existing NICE clinical guidance for osteoporosis and related areas needs to be strengthened to include a full NICE clinical guideline on osteoporosis and a Quality Standard in this area.

Help us push for stronger national policy on osteoporosis and fragility fracture care.

3 A National Audit of Fragility Fractures

The NHS needs to collect the right data to understand the extent of fragility fractures in England, drive up standards of care and inform local commissioning.

The National Hip Fracture Database (NHFD) has had a significant effect on hip fracture care across England, Northern Ireland and Wales; today 95% of all hip fracture cases are recorded in the database.\(^{16}\)

Following on from this success, we need to secure an ongoing national audit of people for all fragility fractures, not just hip fractures. This will give us an up-to-date understanding of steps being taken to ensure prevention of further fractures. The results can then be used to measure and drive up standards for all fragility fractures, just as the NHFD is doing for hip fracture patients.

Help us push for support and funding for a comprehensive national audit of all fragility fractures.
Despite having a profound effect on people’s quality of life and placing a burden on both health and social care, there is not enough awareness or understanding of osteoporosis and resulting fractures amongst the public, policymakers and health professionals. The link is not being made between fractures in the over 50s and undetected osteoporosis.

The National Osteoporosis Society is the only charity dedicated to improving the prevention, diagnosis and treatment of osteoporosis and fragility fractures across the UK. We provide information and support both for the public via our Helpline and publications and for health professionals via our training courses, events and clinical guidance.

The next time you hear of an older friend, neighbour or family member falling and fracturing, think of osteoporosis: Signpost people to our website and services, raise any concerns with your GP, support the Charity’s work and spread awareness.

Help us raise awareness of the Charity and improve understanding of the condition.


3 Calculated using mid 2013 population data [i] and osteoporosis incidence from [ii].


7 Calculated using hip fracture costings from [i] updated using the Health Service Cost Index [ii] and Finished Consultant Episodes for hip fracture [iii].


