

Quality Standards for Osteoporosis and Prevention of Fragility Fractures

Introduction

This information sheet is written for patients and the public. It provides you with a simple, plain language summary of the Quality Standards written by the National Osteoporosis Society (NOS). It tells you how the Standards affect you, what they say, and who uses them.

What is Osteoporosis?

Osteoporosis is a long-term condition in which bones lose their strength, and are more likely to break when we have a minor bump or fall. A break like this is called a fragility fracture.

As we get older, from around 40 onwards, our bones gradually get weaker as part of the natural ageing process. For both women and men there is a steady decline in bone strength, and in women there is a bigger drop after the menopause due to hormonal changes. There are also other medical conditions and drug treatments that may affect our bones. This loss in strength is a combination of changes in the density (quantity) and the structure (quality) of our bone tissue; it varies from one person to another for many reasons.

The effects of osteoporosis vary considerably from no symptoms at all, through fracture-and-recovery, to life-changing mobility issues and chronic pain due to fractures.

Why has NOS written these Quality Standards?

Quality Standards are written by health specialists, using their knowledge and experience. They are a set of measures and advice for use by all health professionals who are working with a specific condition. They ensure consistent, high-quality patient care.

These Standards cover osteoporosis and fragility fractures, in terms of prevention, diagnosis and treatment (together known as the fracture prevention pathway). They are consistent with other guidelines and standards in the UK, while providing additional information for checking the performance of the services in this pathway.

How do these Standards affect me?

More than 3 million people in the UK are estimated to have osteoporosis, and 1 in 2 women and 1 in 5 men over the age of 50 will break a bone. There are an estimated 500,000 new fragility fractures each year. This means there are a lot of health professionals working in this area.

These Standards are relevant for adult men and women in the UK who have an increased risk of fragility fractures. This could be because of existing fractures, a history of falls, or other related health conditions.

The Standards help all health professionals and their managers to be clear about the care that should be provided. They help you to understand the experiences of care you should expect.

What do these Standards say?

The Standards contain a lot of detail about the medical procedures and measures for identifying, assessing, treating and managing fragility fracture risk as well as helping with pain and symptoms after fractures have occurred. The most important points for patients and their families and carers are:

- you are identified as having increased risk of fragility fractures **if**:
 - or you are over 65 and have fallen twice or more in a year
 - or you have fractured a vertebra (broken a bone in your spine)
 - or you have other medical conditions or take medications that can weaken bones
 - or you are over 65 and have fallen twice or more in a year
- then your bone health is assessed by:
 - gathering information about you
 - and often doing a DXA scan (similar to an x-ray) within 12 weeks
 - and perhaps other scans or tests if required
- and if relevant you are invited to meet health professionals who are able to assess your risk of falling in the future
- a DXA report is ready within 3 weeks, and your assessment results are shared and discussed with you, so that you:
 - feel informed and supported, with information in the format that best suits you
 - have an opportunity to ask questions, discuss options and participate in decisions about your care
 - understand about your bone health and what you can do to keep your bones strong
 - understand how you can stay strong, steady and independent if you have fallen twice or more in the last year
 - receive contact information for your osteoporosis service and/or regional and national charities, including the National Osteoporosis Society, who can give you more information and support after you have returned home
- where the bone health assessment indicates you are at high risk of fragility fractures, you are offered appropriate drug treatment within 5 weeks, and the health professionals ensure that you understand:
 - the benefits and side effects of drug treatment
 - the instructions for taking your treatment and the reasons these are important
 - the importance of speaking to your GP or pharmacist if you have any difficulties or concerns
 - when and where you will have your next dose if you have been recommended an injectable osteoporosis treatment
- drug treatment is usually a long-term commitment, and you are:
 - asked how you are getting on with your drug treatment after 16 weeks and then every year after that
 - invited back for your next dose if your drug treatment is given by injection
 - reassessed for fracture risk after 5 years to check that your treatment is still right for you

(or after 3 years if on injections)

- if you have a fragility fracture (including a spinal fracture caused by osteoporosis), health professionals help you with your pain management and mobility so that you are:
 - given help to manage pain and symptoms resulting from your fracture
 - supported to recover to your previous levels of ability as far as possible
 - offered physiotherapy or occupational therapy if appropriate
- the different fracture prevention services are efficient, coordinated and consistent with minimal regional variation, so that you:
 - receive good quality care that meets current guidance and reflects up-to-date practice from all the health professionals you see
 - receive care from motivated staff with the right knowledge and skills for their role
 - are able to make informed decisions about your care.

What can I do to help myself and others?

These important actions by you can reduce the risk of having a fragility fracture:

- a healthy diet, with supplements of calcium and vitamin D if necessary
- stopping smoking and avoiding excessive alcohol
- taking regular exercise that is suitable for you to help maintain your bone strength, and to improve muscle strength and balance to minimise the chances of falling.

If you are taking a drug treatment for osteoporosis, follow the instructions and take it regularly.

It can help if you know something about the condition, and if you can talk to others about it. One way to do this is to join a relevant charity and get involved in supporting it.

Who supports these Standards?

In addition to the ten specialists who advised on and wrote the Standards, the following organisations are supporting it: Bone Research Society, British Geriatrics Society, British Society for Rheumatology, International Osteoporosis Foundation, Royal College of Physicians, Royal College of Physicians and Surgeons of Glasgow, Royal Pharmaceutical Society, Society for Endocrinology.

For osteoporosis information and support contact our Helpline:

 **0808 800 0035**

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