BONE HEALTH AND POSTMENOPAUSAL WOMEN

Preventing bone loss is an important concern for women during menopause and post-menopausal stages. Older women are more at risk for osteoporosis and are more prone to fractures (bone breaks). During the postmenopausal stage bones tend to break down more quickly than they are formed, increasing the risk of fragility fractures in the hip, spine, and wrist, causing:







RESEARCH INDICATES THAT UP TO 20% OF BONE LOSS CAN HAPPEN DURING MENOPAUSE.

Lifestyle choices such as proper diet, exercise, and medications can help to prevent further bone loss and reduce the risk of fractures. Osteoporosis is often called "a silent disease" usually determined with the first fracture (bone break) or by measuring the reduction of bone density.

Common symptoms can include:

- Back pain, if there are small fractures or if vitamin D is extremely low
- Loss of two inches in height
- Kyphosis or a hunchback appearance affecting posture
- Bone fractures (hip, wrist, spine)



Early menopause (before 45), or the removal of your ovaries and chemotherapy treatment can put you at an early risk for developing osteoporosis.

DID YOU KNOW?



1 in 2 postmenopausal women will have osteoporosis and most will suffer a fracture during their lifetime.



The overall cost to the US for the care of osteoporosis is close to **15 billion** dollars. Mostly relating to nearly **400,000** hip fractures in the US.



1 in 2 who experience hip fractures will not return to their previous lifestyle and 20% will die as a consequence of their fracture.

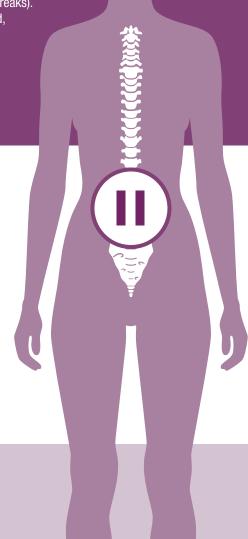


Spine fractures are associated with significant back pain, poor quality of life, and greater mortality.

Visit **hormone.org** for more information.

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All women over the age of 65 should receive a bone density screening as a preventive measure.



Calcium is an important mineral for strong healthy bones and your body needs vitamin D in order to absorb calcium.

LIFESTYLE CHANGES TO IMPROVE BONE HEALTH

- Resistance, balance, and weight-bearing exercises.
 Choose safe movements that don't increase the risk of falling
- Eat a balanced diet that include: calcium rich foods, dairy products fortified with vitamin D, and fish if possible
- Sunshine is important to keep vitamin D levels adequate
- · Preventing obesity will help keep bones strong
- Avoid smoking
- · Limit alcohol consumption





HORMONE AND DRUG THERAPIES TO IMPROVE BONE HEALTH

- Romosozumab: An "sclerostin blocker" injected monthly in the doctor's office for 12 months. It's recommended for post-menopausal women at very high risk for fractures.
- Bisphosphonates: IV and oral medication used to slow bone loss while increasing bone mass
- Denosumab: SQ (injectable) or IV medication that lowers the risk of fractures (bone breaks) and blocks bone loss
- Tibolone: hormone therapy that helps to relive menopause symptoms and prevent osteoporosis (not available in the US or Canada)
- Calcitonin: nasal spray used to regulate calcium levels in the body
- Calcium and Vitamin D Supplement: enhance bone formation and prevent fractures
- Estrogen: hormone therapy prevents osteoporosis by reducing the breakdown of bone (what is called bone resorption)
- Abaloparatide or Teriparatide: parathyroid hormone which increases bone mass by stimulating bone formation and bone turn over



It is never too late to be treated for osteoporosis! Current treatments are very effective and lower the risk of further harm. Treatments should be a shared decision with you and your healthcare team.

QUESTIONS TO ASK YOUR HEALTHCARE TEAM

- How low is my bone density?
- Am I considered high risk for fractures?
- Do I need treatment, or can I wait?
- What are the side effects of the treatment you are recommending?
- Should I take any supplements, like calcium and vitamin D?
- Should I see an endocrinologist or any other specialist?

Patients have questions. We have answers.

The Hormone Health Network is your trusted source for endocrine patient education. Our free, online resources are available at hormone.org.

Developed for patients based on *Pharmacological Management of Osteoporosis* in *Postmenopausal Women: An Endocrine Society Clinical Practice Guideline*



