

Osteoporosis



Help the Aged Policy Statement 2007

Overview

This briefing outlines the prevalence of bone fracture among older people, osteoporosis and the impact of the condition in later life, and the importance of maintaining good bone health in older age.

Osteoporosis is closely linked with falls prevention (see *Preventing Falls Briefing*) as the risk of fracture after a fall increases with age. Avoiding falls and broken bones is essential if older people are to remain active and independent.

Background

- One in two women and one in five men can expect to break a bone after the age of 50 due to osteoporosis¹
- For women, the 1 in 6 lifetime risk of sustaining a hip fracture is greater than the 1 in 9 risk of developing breast cancer²
- 80 per cent of older women would rather die than experience the reduced quality of life that follows a serious hip fracture and subsequent admission to a nursing home³
- The total cost of all fractures each year in the UK is the same as the original predicted cost of London hosting the 2012 Olympics⁴
- The health benefits of exercise have been demonstrated in both sexes up to the age of 90 years. For optimal protection, activity should be maintained throughout life. For post-menopausal women the most effective form of exercise to strengthen bones is impact exercise, including walking⁵
- 1 in 3 people living in care homes are vitamin D-deficient.⁶

Osteoporosis has important implications for the older population and healthy ageing.

Highlighted in the Department of Health's National Service Framework (NSF) for Older People Standard Six: Falls, osteoporosis is an integral part

of falls prevention with integrated falls and bone health services due to be established in England by April 2005.

The All Party Parliamentary Osteoporosis Group (APPOG) monitored progress on the implementation of osteoporosis treatments in falls prevention services within the NSF and produced a report in 2004⁷ that highlighted strong concerns over a lack of take-up. Fewer than half of the primary care trusts (PCTs) surveyed expected that they would meet the April 2005 target. The National Audit of the Organisation of Services for Falls and Bone Health for Older People (Royal College of Physicians 2006) confirmed these predictions by finding that instead of joint integrated falls and bone health services existing in PCTs, the bone health services lagged significantly behind falls prevention services. This confirmed that healthcare systems are not providing older people with high-quality services in England.

Help the Aged is keen that osteoporosis checks and treatments should not be limited to those who are already have the condition or who are above a certain age. Millions of pounds can be saved by identifying osteoporosis early on in its development and promoting good bone health to all age groups. The early prevention of the disease can help many older people remain independent as they age. In terms of the Charity's key objectives, this would contribute to the prevention of future deprivation.

The National Institute for Health and Clinical Excellence (NICE) issued draft guidance on the assessment and treatment of osteoporosis in primary and secondary prevention in October 2006. The draft guidance restricted some pharmacological treatment for osteoporosis in post-menopausal women. Help the Aged works with the National Osteoporosis Society (NOS) to challenge policy changes that will compromise the independence and well-being of many older people in later life as well as placing greater financial strain on the NHS in the future. The two charities hope that this contribution to the consultation will bring changes to the final guidance, due later in 2007.

1 NOS, Osteoporosis Facts and Figures V1.1.

2 NOS, Osteoporosis Facts and Figures V1.1.

3 NOS, Osteoporosis Facts and Figures V1.1.

4 NOS, Osteoporosis Facts and Figures V1.1.

5 NOS, Osteoporosis Facts and Figures V1.1.

6 NOS, Osteoporosis Facts and Figures V1.1.

7 *Falling Short: delivering integrated falls and osteoporosis services in England. A report on the implementation of Standard Six of the National Service Framework for Older People.* All Party Parliamentary Osteoporosis Group (APPOG) December 2004.

The Department of Health's document *A New Ambition for Old Age*⁸ outlined plans to increase capacity in osteoporosis services in DXA scanning for bone density as a guide to treatment by spending £20 million by 2007/8. Help the Aged supports the NOS in ensuring that this capacity provision is forthcoming given that approximately 13,300 DXA scans are required per million of the population.⁹ Providing DXA scans for the older prevention will identify those at risk of developing osteoporosis and will save future treatment, discomfort and deprivation.

We are also working with the NOS and other organisations to press for osteoporosis and falls to be included in the General Medical Services (GMS) contract via the Quality Outcomes Framework (QOF). This would award GPs incentives for identifying people with osteoporosis, leading to better prevention among those at risk.

Summary

Help the Aged is keen to ensure that osteoporosis remains a national health priority. Increased awareness of the condition among health professionals and the public, better assessment and treatment of osteoporosis and more DXA scanners to screen those at risk of the condition are all important to ensure a healthier older age and ensure that future generations will have better expectations of ageing healthily.

8 *A New Ambition for Old Age: next steps in implementing the National Service Framework for Older People*, a report from Professor Ian Philp, National Director for Older People, Department of Health, London, April 2006.

9 NOS, Osteoporosis Facts and Figures V1.1.

The Help the Aged position

Help the Aged believes that preventing osteoporosis in later life can help prevent future deprivation by giving older people the best chance to age healthily and independently.

Specifically, Help the Aged is calling for:

- bone health and falls to be included in the Quality Outcomes Framework to increase the number of older people assessed by GPs for being at risk of developing osteoporosis and falls and for appropriate treatment to be available;
- the inclusion of bone health within all integrated falls and bone health services, with services offering an osteoporosis check as part of their falls risk assessment;
- an increased provision of DXA scanners in the UK to identify older people in need of managing the disease, offering early prevention of fractures;
- adequate assessment and treatment of osteoporosis in mid-life as a way of preventing the disadvantage of impaired mobility in older age;
- preventive treatments to be available to all older people on the basis of clinical effectiveness and need rather than of age;
- wider promotion of the healthy ageing agenda, detailing the importance of prevention for health and well-being in later life.

Practical resources from Help the Aged

- *Healthy Bones*: a free advice leaflet on osteoporosis for older people and their carers.

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WE WILL fight to free disadvantaged older people in the UK and overseas from **POVERTY, ISOLATION** and **NEGLECT**

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