Osteopenia and Bone Health

What is Osteopenia?

Osteopenia simply describes low bone density following a bone density scan (also known as a bone density test). Osteopenia is based on the result from this scan and is in the range between normal and osteoporosis.

Common action taken when osteopenia is reported

If osteopenia exists any recommendations from your doctor will vary depending on your:

• age

- · level of bone density (the lower the result the more likely action will be recommended)
- specific risk factors for osteoporosis

If you have osteopenia your doctor will generally monitor your bone health to ensure your bone density remains stable. You will be encouraged to have adequate calcium, vitamin D and exercise to help support your bone health. The approach will be different if a fracture is present.

Osteopenia in adults 50 years and over with specific risk factors

Half of all fractures occur in people over 50 years with osteopenia. Therefore your doctor will consider treatment to protect your bone health if:

- you have low bone density and have sustained a fracture due to a minor incident and/or
- you have been diagnosed with a condition that can impact bone health and is a risk factor for osteoporosis and/or
- · you are taking medication which is directly impacting your bone health

Osteopenia and younger populations

If bone density is investigated in a younger adult this is only done as a result of the adult having a known risk factor for osteoporosis. For example women on breast cancer treatment, early menopause, diagnosed anorexia nervosa and coeliac disease. Treatment in younger populations is uncommon but may occur when required to protect bone health. Younger patients are typically managed by a specialist.

Summary

Bone Density Scan T-score	Result	What does this mean?	Action required
-1 to -2.5	Osteopenia	This means you have lower than normal bone density. Action may be taken to protect your bone health depending on age, the level of low bone density and any risk factors for osteoporosis. Osteopenia can lead to osteoporosis and fracture risk in people 50 years and older.	Your doctor will aim to reduce further bone loss, monitor your bone health with a follow up bone density scan (from 1–5 years) and ensure adequate calcium, vitamin D and exercise. Your doctor will review any health conditions or medications which may be having an impact on your bone health. If a fracture has occurred your doctor will commonly take additional action and commence treatment to reduce the risk of further fractures.

Main take away message: a broken bone (due to a minor incident) will require serious attention.

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Support

If you have low bone density and no fracture your bone health is generally monitored.

Osteopenia and Bone Health cont.

Other Common Risk Factors

Review other common risk factors for osteoporosis. If any risk factors apply to you – discuss these with your doctor.

Personal History	Medical Conditions	Medications	
Previous fracture (from minor bump or fall)	Coeliac disease	Certain treatment for breast cancer	
Family history of osteoporosis (parent/sibling)	Diabetes	Certain treatment for prostate cancer	
Loss of height (3 cm or more)	Rheumatoid arthritis	Glucocorticoids (steroids)	
Smoking/Excessive alcohol	Early menopause/Low testosterone	Anti-epilepsy treatment	
Inadequate calcium, vitamin D or lack of exercise	Chronic kidney disease or liver disease		
Age 70 years and over	Overactive thyroid or parathyroid		

Calcium. Vitamin D. Exercise

Take simple steps to help support your bone health.

Focus On	Recommended	
Calcium	 1,000 mg per day from the diet Increasing to 1,300 mg for women over 50 years and men over 70 years If dietary intake is low a supplement may be required 	
Vitamin D	 Limited sun exposure – in summer a few minutes per day, in winter slightly longer Avoid UV index above 3 If vitamin D deficiency is confirmed by your doctor a supplement may be required 	
Exercise	Specific mix of weight bearing, resistance training and balance exercises	

