





Bone Health Explained

Bone health is an important part of general health. Poor bone health can lead to osteoporosis. When the structure of bone is compromised and becomes weaker and less dense the bone has an increased risk of breaking. This is osteoporosis. Any bone can be affected by osteoporosis. However osteoporosis tends to affect particular sites within the skeleton, not the whole skeleton. Research has shown the common sites where broken bones occur are the hip, wrist and spine. Other sites include the ankle, leg, forearm, upper arm and ribs. These fractures typically occur from a minor trip, fall or similar incident.

It is important to note broken bones can occur in patients with either osteoporosis or osteopenia (low bone density). Once a fracture occurs the person is considered to be at much higher risk of another fracture. Early diagnosis and treatment aims to prevent any initial fracture occurring or stop further fractures occurring. If a fracture does occur the main aim of treatment is to reduce the likelihood of more fractures.

Common Risk Factors

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)	Overactive thyroid or parathyroid	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	Diabetes	

If you have any risk factors for osteoporosis your doctor will refer you for a bone density test. This simple scan is widely available in Australia, and the results will indicate if you have low bone density (osteopenia) or osteoporosis.

If osteoporosis is diagnosed your doctor will take action to protect your bone health and this will typically include medication. If low bone density if found your bone health will be monitored and lifestyle changes will be recommended to support your bone health.







Calcium and Bone Health

Why is Calcium Important?

Calcium is essential for building and maintaining healthy bones throughout life. Calcium combines with other minerals to form hard crystals giving bones strength and structure. Almost 99% of the body's calcium is found in the bones. If there is not enough calcium in your diet the body will take what is needed from your bones for use in other parts of the body. If this happens your bone density (bone strength) will gradually decline and you may be at risk of developing osteoporosis.

How Much Calcium is Recommended?

Australian dietary calcium recommendations vary according to age.

Adults • 19 years +	1,000 mg per day	Adequate calcium intake maintains bone strength
Older Adults • Women over 50 years • Men over 70 years	1,300 mg per day 1,300 mg per day	Daily recommendation increases as calcium is less effectively absorbed from the intestine and more can be lost through the kidneys

[·] Excessive calcium intake is not recommended

Calcium and Food

The best way to achieve recommended calcium intake is to eat a diet rich in calcium. Calcium content in food varies so it is important to consume 'calcium rich' foods. Half of all Australian adults do not achieve their daily recommended intake of calcium. It is easy to add calcium to your diet by focusing on food groups which contain higher levels of calcium.

Food Type	Examples	Calcium Range (mg per serve)
Dairy	Milk, cheese, yogurt	150 – 305 mg per serve
Seafood	Trout, snapper, mussels, oysters, prawns, canned sardines or salmon	35 – 300 mg per serve
Vegetables	Cucumber, kale, silverbeat, chinese cabbage, broccoli, rocket, watercress, bok choy, leeks	59 – 250 mg per serve
Nuts and seeds	Almonds, brazil nuts, hazelnuts, walnuts, sesame seeds, tahini paste 28 – 75 mg per serve	
Fruits	Orange, strawberries, figs, kiwi fruit, dates	16 - 95 mg per serve
Other	Eggs, calcium-set tofu, canned chickpeas or soybeans	21 – 105 mg per serve
Meat	Pork chop, chicken	21 – 105 mg per serve

Do We Absorb All the Calcium We Eat?

The simple answer is no, not all the calcium we consume is absorbed. A small amount of calcium will be lost and excreted from the body which is normal. This is factored into the recommended intake for your age. Other factors can also impact calcium absorption and should be discussed with your doctor, for example: low vitamin D levels, excessive caffeine and alcohol intake and certain medical conditions (for example coeliac disease, kidney disease).

Calcium Supplements

It is recommended calcium is obtained from your diet. However when adequate calcium intake is not possible a supplement may be required as directed by your doctor or pharmacist. Healthy Bones Australia recommends supplement doses in the range of 500-600 mg daily when required. This is considered safe and effective. Take supplements as directed and talk to your doctor or pharmacist if you have any queries.

Diagnosed Osteoporosis and Calcium

Calcium is essential for supporting your bone health. However for people with diagnosed osteoporosis medication is generally required, as prescribed by your doctor. It is common practice for doctors to prescribe calcium supplementation to accompany osteoporosis medication. Adequate calcium intake throughout life supports bone health but may not prevent osteoporosis as other risk factors can negatively impact your bone health.

[·] If calcium supplementation is used it should only form part of daily requirements





Vitamin D and Bone Health

Vitamin D is needed to absorb calcium from the intestine to support healthy bones. Vitamin D also plays a role in supporting growth and maintenance of the skeleton and regulating calcium levels in the blood.

Sunshine and Vitamin D

For Australians the main source of vitamin D is from exposure to sunlight. Vitamin D is produced when our skin is exposed to ultraviolet B (UVB) light from the sun. Limited sun exposure is needed to produce adequate levels of vitamin D. Exposure times vary based on the season and location within Australia. Skin type and the amount of skin exposed also affects the amount of sun needed for healthy bones.

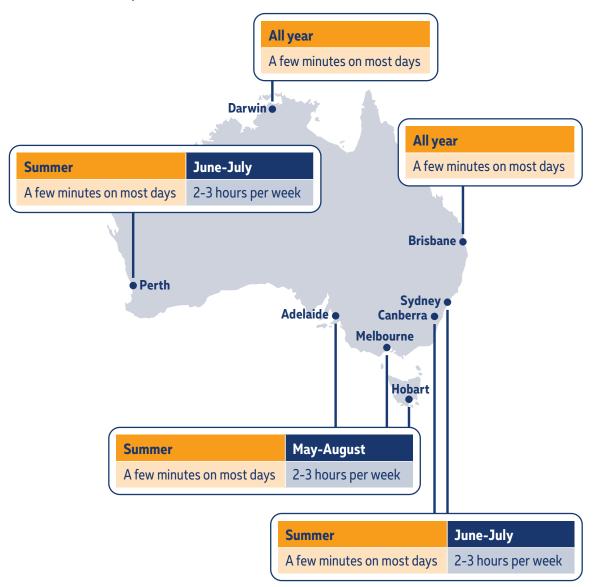
It is important to balance the need for limited sun exposure for vitamin D, while avoiding the risk of any sun damage. In line with Cancer Council Australia's recommendations when outdoors for more than a few minutes and the UV Index is 3 or above, sun protection is required.

Seasonal Changes

In summer a few minutes mid-morning or mid-afternoon (outside UV Index 3 or above) is generally adequate for vitamin D and in winter longer exposure times are needed. Refer to the Sunshine Map below as a general guide and check the UV index (via the SunSmart app, myuv.com.au or Australian Bureau of Meterology website).

Sunshine Map

Recommended sun exposure for vitamin D based on location within Australia.







Vitamin D Levels

Vitamin D levels change throughout the year. Your levels are highest in late summer and lowest at the end of winter. Healthy Bones Australia recommends a vitamin D level of at least 50 nmol/L at the end of winter and during summer higher levels are common in the range of 60-70 nmol/L.

Your doctor will only test your vitamin D level (with a blood test) if you are at risk of vitamin D deficiency. People at risk include:

- · Adults mainly indoors due to health or work
- Naturally dark skinned (darker skin reduces the penetration of UV light)
- · Sun avoiders due to skin protection or medical advice
- Covering body for cultural or religious reasons
- Medical conditions which can impact the ability to absorb / process vitamin D
- · Pregnant or breastfeeding women
- · Elderly, housebound or in residential care

Vitamin D Deficiency

In Australia over 30% of adults have a mild, moderate or severe deficiency of vitamin D. Vitamin D deficiency can:

- · Lead to osteoporosis
- · Result in bone and joint pain
- · Increase the risk of falls and related fracture in older people

In addition it can impact an unborn child in a vitamin D deficient mother, resulting in rickets (in severe cases) and can be linked to other diseases.

Vitamin D Supplements

For people with low vitamin D levels a supplement may be required as advised by your doctor or pharmacist. Low vitamin D levels can be easily corrected but may take several months to improve. Vitamin D supplements are available as tablets, capsules, drops or liquid. Most vitamin D supplements are vitamin 'D3' and the standard dose is in International Units (IU). Your doctor will advise you on the appropriate dose required and your pharmacist can provide general advice on vitamin D supplements.

Healthy Bones Australia recommends the following doses of vitamin D as a general guide only:

People who obtain some sun exposure but not at the recommended level	Adults at least 600IU per day Over 70 years at least 800IU per day	
Sun avoiders or people at risk of vitamin D deficiency	• 1,000 IU - 2,000 IU per day • Higher doses may be required	
Moderate to severe vitamin D deficiency	 3,000 – 4,000 IU per day for 6-12 weeks to raise the level of vitamin D quickly, followed by a maintenance dose of 1,000 -2,000 mg per day As advised by a doctor 	

Vitamin D and Food

Food does not provide an adequate amount of vitamin D. A limited number of foods contain small amounts of vitamin D such as egg yolks, liver, oily fish (salmon, tuna, mackerel, herring) and selected products fortified with vitamin D (eg milk powder, margarine and cereal).





Exercise and Bone Health

Exercise plays an important role in maintaining bone health. Research has demonstrated that when it comes to our bones not all exercise is equal. Bones benefit when a certain amount of impact or strain is placed on them making specific types of exercise most beneficial.

The ability of an exercise to have an impact on bone depends on the specific way that stress is applied to the bone during the exercise. Exercise is also important for the size, strength and capacity of our muscles which is essential to maintain mobility. Exercise must be ongoing to have a proper benefit.

Exercise Goals Throughout Life

Exercise goals for bone health change over time from:

- building maximum bone strength in childhood and adolescence
- · maintaining muscle and bone strength in adulthood
- · reducing bone loss in older age and maintaining muscle strength to support mobility and balance

Specific Types of Exercise to Support Bone Health

Weight bearing impact loading exercise. What is it? Exercise done on your feet so you bear your own weight which jolts bones rapidly and firmly.

· Examples: jogging, skipping, basketball, netball, dancing, impact aerobics, stair walking.

Resistance training. What is it? Using hand and ankle weights and gym equipment.

Example: training with weights which progress in intensity over time.

Balance Exercises and Preventing Falls

For older Australians balance and mobility exercises can also help to reduce falls which can lead to fractures. Half of all falls occur around the home. Balance exercises typically include:

- Standing still exercises eg: standing on one leg, standing tall raising arms, put one foot in front of the other and hold, tai chi
- Moving exercises eg: walking in small circles, walking with sudden change of direction, stepping over obstacles, walking on toes, walking with arms raised above the head
- Dual task exercises eg: standing on one leg while throwing and catching a ball

For more information see the Healthy Bones Australia Exercise Guide at www.healthybonesaustralia.org.au



Treatment

Diagnosed osteoporosis requires prescribed treatment to protect bone health. Your medication will be prescribed by a GP or specialist. In Australia there are a range of treatment options available. You and your doctor will determine the best treatment for you, taking into consideration other medical conditions. Your doctor can also advise if your medication is subsidised by the Pharmaceutical Benefits Scheme (PBS).

How do Osteoporosis Treatments Work?

Most medications function by slowing or blocking the activity of bone removing cells (called osteoclasts) while leaving bone forming cells (osteoblasts) at work. This helps improve bone strength over time. Osteoporosis medications are commonly prescribed over many years and must be approved by the Federal Government for use in Australia. It is recommended you take your medication as directed to receive the full benefit. It is also recommended people with diagnosed osteoporosis complement medication use with the recommended calcium, vitamin D and exercise levels.





PBS subsidies apply to:

- · People who had a fracture due to osteoporosis
- Anyone over 70 years with low bone density
- People with low bone density taking corticosteroids (eg: prednisone or cortisone) at a dose of 7.5 mg for at least 3 months

Types of Medications

The following medications are commonly prescribed in Australia to treat osteoporosis and have strong evidence for reducing risk of fracture.

Type of Medication	Dosage	
Bisphosphonate This medication can slow bone loss, improve bone density and reduce the risk of fractures	Tablets (weekly or monthly) Alendronate (brand name Fosamax or other generic brands) Risedronate (brand name Actonel EC or other generic brands) Annual intravenous infusion Zoledronate (brand name Aclasta)	
Denosumab This medication can slow bone loss, improve bone density and reduce risk of fractures		

Other Medications

The following medication options can be prescribed based on individual patient needs.

MHT (Menopausal Hormone Therapy)

MHT (formerly known as HRT) helps to slow bone loss, reducing the risk of osteoporosis in women around the time of menopause or after menopause. It is safe and effective for most women under the age of 60 who have osteoporosis and also need hormonal treatment to relieve the symptoms of menopause. It may also be prescribed for women under 60 who are unable to take other osteoporosis medicines. It is particularly useful for women who have undergone early menopause (before 45 years of age).

Selective Oestrogen Receptor Modulators (SERMS)

Raloxifene (brand name Evista)

This medicine is taken daily and acts on bones in a similar way to that of the hormone oestrogen, slowing bone loss and reducing the risk of spinal fractures in women who have been through menopause. The PBS subsidy applies for post-menopausal women who have already had a fracture due to osteoporosis.

Restricted use medications

Teriparatide (brand name Terrosa) self-administered daily injection for up to 24 months.

This medicine must be prescribed by a specialist and is initiated in people with severe osteoporosis when other osteoporosis medication has not worked. Once the course of the treatment is completed another type osteoporosis medication will be commenced to ensure the new bone formed is maintained. The PBS subsidy is for 18 months for people with very low bone density who have experienced a minimum of two fractures (with one of the fractures occurring whilst on another type of osteoporosis medication).

Romosozumab (brand name Evenity) administered once a month by a doctor with 2 injections (during the same visit), for 12 months.

This medicine must be prescribed by a specialist and is initiated in people with severe osteoporosis when other osteoporosis medication has not worked. Once the course of treatment is completed another type of osteoporosis medication will be commenced to ensure the new bone formed is maintained. The PBS subsidy is for 12 months for people with very low bone density who have experienced minimum of two fractures, with one of the fractures occurring whilst on another type of osteoporosis medication.

Side Effects

Osteoporosis mediation is commonly taken over many years. Side effects from osteoporosis medications are rare and it is recommended you speak to your doctor if you have any concerns or queries regarding your medication. Anyone experiencing a suspected side effect should consult their doctor. Your medication will come with a list of potential side effects if you experience any side effect you will need to inform your doctor.

For more information



Call our national toll-free number





Visit our website healthybonesaustralia.org.au



Talk to your doctor

