

DIRECTOR'S MESSAGE

Dear Readers,

Happy Chinese New year to all who are celebrating! Wishing you a healthy, peaceful and joyous year of the Tiger ahead!

As the years roll on and as we age, a common condition that you might have heard of is "Osteoporosis". In this edition, we will learn about some common myths and misconceptions around osteoporosis.

I hope you will find the information useful and remember that it is never too early or too late to think about your bone health! Start sowing seeds to strong bones so that you can protect your independence as your grow older.

By Dr Linsey Utami Gani, ECHO Programme Director



BREAKING
BONES:

DOCTOR'S SHARING

DEBUNKING COMMON MYTHS & MISCONCEPTIONS OF OSTEOPOROSIS

Breaking Bones: Debunking common myths & misconceptions of osteoporosis

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steoporosis is a common condition, as one grows older and experience fractures that can be dangerous. It is a condition where there's low bone mass causing an increased risk of fracture.

Osteoporosis is more common as one age. It is in post-menopausal women and in those with underlying conditions, predisposing them to lower bone mass. How dangerous is osteoporosis, does it have any symptoms and can it be treated?

Osteoporotic fractures are different from traumatic fractures in that it happens with minimal trauma. An example is a fall from standing height that results in a hip fracture.

There are an estimated nine million osteoporotic fractures worldwide in 2000. Singapore has one of the highest hip fracture rates in the Asian region due to its ageing population. Read on to find out what are some of the common myths and misconceptions on osteoporosis.



Myth 1: Osteoporosis is part of "normal ageing", as it's not as dangerous as cancer or diabetes.

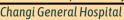
Osteoporosis is certainly more common as one grows older, it is predicted that one in three women and one in five men will experience an osteoporotic fracture in their lifetime. Unfortunately, some osteoporotic fractures such as hip fractures have been shown to have major consequences. Studies have shown that 40% of patients with hip fractures may not be able to walk independently, 33% become dependent with having to live in a nursing home and up to 25% may die within 1 year of sustaining a hip fracture³

Myth 2: I don't have any pain in my bone, so I don't have osteoporosis.

Many patients tend to confuse osteoporosis with osteoarthritis – a condition where there is degeneration of the joint causing pain. Osteoporosis is painless unless one sustains a fracture. As such, osteoporosis is often not diagnosed until a fracture is sustained. A bone mineral density scan is often used to assess the bone mass to assess risk of fracture. Your doctor will be able to advise if you are at risk of osteoporosis and need this test.

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Myth 3: Osteoporosis is part of growing old and it cannot be treated

Although fractures can be dangerous, fortunately osteoporosis can be treated and fracture risk can be reduced. With medications, lifestyle changes and falls prevention, the risk of fractures can be reduced to as much as 80%! Medications for osteoporosis can come in the form of tablets or injections. Your doctor will assess which of these treatments are suitable for you. It is important to discuss with your doctor if you have concerns over the medications. Medications for osteoporosis are often prescribed together with calcium and vitamin D supplements.

Singaporeans have one of the longest lifespan in the world, with average life expectancy expected around 85 years old. Protecting your bones and reducing fracture risk will ensure that you can remain independent and continue to enjoy this longevity in good health. Speak to your doctor today about your risk of osteoporosis and how to protect your bones!

HEALTHY

OSTEOPOROTIC BONE





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Mild to Moderate Medical Conditions?

Your GP can treat it!

The GPFirst Programme is an initiative by Changi General Hospital's A&E Department in partnership with over 170 participating GP clinics in eastern Singapore.

Patients with mild to moderate symptoms are encouraged to seek treatment at the GP clinics first instead of going to the A&E.

Should the patient be referred by his or her GP via GPFirst. he or she will:

- (V) Be accorded higher priority over non-emergency cases
- Receive a \$50 subsidy* on the prevailing attendance fee at CGH A&E

For more information, visit www.GPFirst.sg

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