

Health Tips

Your Good Health Information From eDocAmerica

with

Dr. D



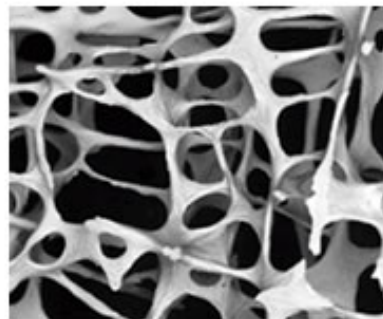
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Health Tip: What's the Difference between Osteopenia and Osteoporosis?



Most people are aware that osteoporosis is a disease characterized by reduced bone density that leads to an increased susceptibility to fractures, especially involving the hip and spine. In the U.S., it is estimated that 10 million individuals, mostly women, have this condition. What is less well understood is that there is an intermediate condition between having normal bone mass and osteoporosis known as osteopenia.

Osteopenia is not a disease but is an indication that the bone mineral density is below the statistical norm. It is estimated that 34 million Americans have osteopenia. If measures are not taken to slow down osteopenia, osteoporosis can develop.

Risk factors for loss of bone mass: Assuming a normal diet and absence of disease, maximum bone density occurs in women around age 30. Most of this bone mass is acquired by the late teens, pointing out the importance of developing strong bones during childhood and adolescence. After age 30 bone density begins to decline. The rate and extent of this decline is only partly under the control of the individual. Factors that increase the likelihood of developing osteoporosis include:

- Being female
- Having a family history of osteoporosis
- Having a small, thin frame
- Being of Caucasian, Asian or Hispanic ethnicity
- Low estrogen level in women, particularly from early menopause or following removal of the ovaries
- Diet low in calcium and/or vitamin D
- Sedentary lifestyle

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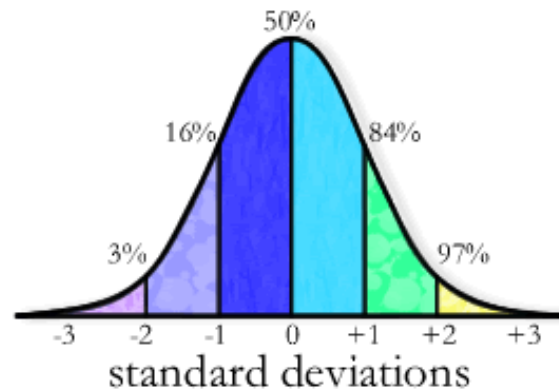
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Distinguishing osteopenia from osteoporosis: Bone mineral density testing is required to distinguish osteopenia from osteoporosis. With this information, a comparison can be made between the individual being tested and a young adult at peak bone density. Depending on the variation from this ideal, an assessment of the extent of loss of bone mass can be made. As currently



defined, someone with osteoporosis has a bone mineral density (BMD) that is 2.5 standard deviations or more below the mean of a younger person, as measured in a portion of the femur (thigh bone). Osteopenia is defined as a BMD that is 1 standard deviation or more below the younger person's mean. These deviations from normal are designated as "T-scores"

on bone densitometry reports (the subject of a future Health Tip).

How are osteopenia and osteoporosis treated? Deciding whether and how to treat osteoporosis is quite complex and many factors need to be taken into consideration, such as the age of the individual, the [10-year probability of developing a fracture](#), the bone density T-score and the history of previous fractures. When treatment is decided to be the best course of action, options include bisphosphonates (e.g. Fosamax), raloxifene (Evista), estrogen (in women) and calcitonin. In regard to osteopenia, there is insufficient evidence currently to recommend treatment with medications in everyone. In fact, having osteopenia does not definitely mean that you will develop osteoporosis or have a fracture related to low bone density. For everyone with osteopenia to take bone strengthening medicines would impose an unreasonable risk of medication side effects and expense. Measures to reduce risk---smoking cessation, getting regular exercise, getting adequate amounts of calcium and vitamin D, and avoiding excessive alcohol intake---are the first steps for those with osteopenia to avoid developing osteoporosis. Treatment with medication is usually reserved for those people at high risk for fractures, e.g. a postmenopausal woman with multiple risk factors and a T-score in the high osteopenia range.

Who needs to have bone density testing and when? The National Osteoporosis Foundation recommends that bone density testing be done under the following circumstances:

- A postmenopausal woman under age 65 with one or more risk factors for osteoporosis

- A man age 50-70 with one or more risk factors for osteoporosis
- A woman age 65 or older, even without any risk factors
- A man age 70 or older, even without any risk factors
- A woman or man after age 50 who has broken a bone
- A woman going through menopause with certain risk factors
- A postmenopausal woman who has stopped taking estrogen therapy (ET) or hormone therapy (HT)

The somewhat more restrictive screening recommendations from the [U.S. Preventive Services Task Force](#) advise that "all women 65 years of age and older should be screened for osteoporosis by getting a bone density test. Women who have risk factors for osteoporosis should begin screening when they are 60 years of age."

In a future Health Tip, I'll discuss the interpretation of the bone densitometry report. These are often confusing to decipher and can even be alarming without some understanding of the statistics involved. In the meantime, if you have any questions about osteoporosis, osteopenia or bone density testing, an answer is just an email to one of our eDocAmerica physicians away.

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11719 Hinson Road, Suite 130 Little Rock, Arkansas 72212

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