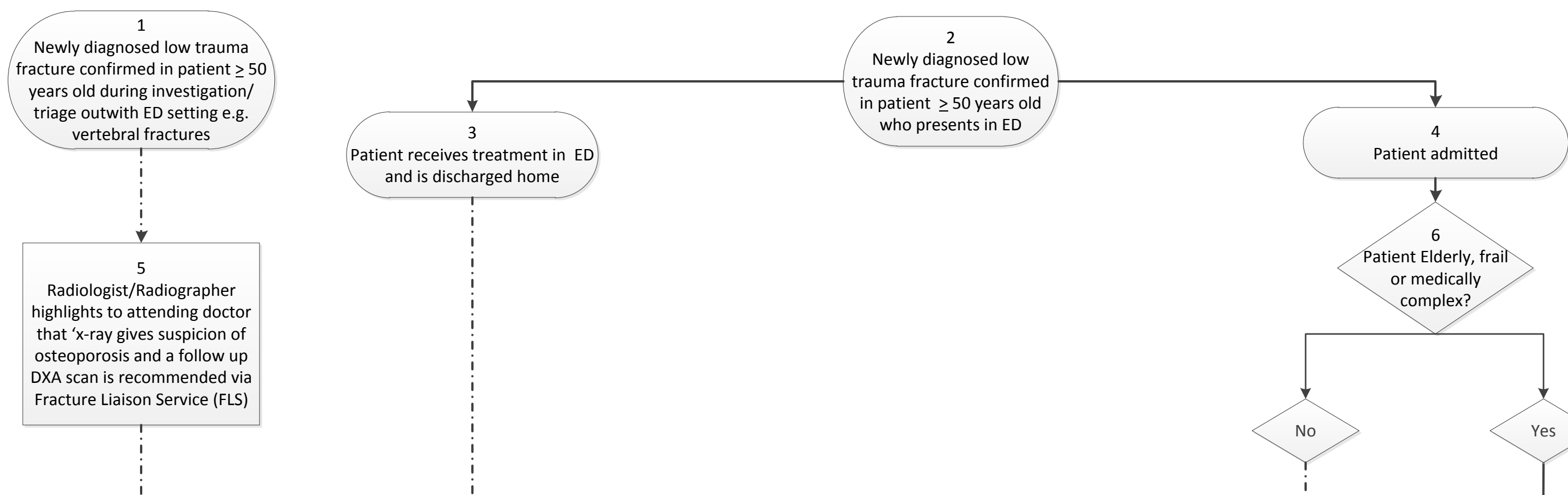
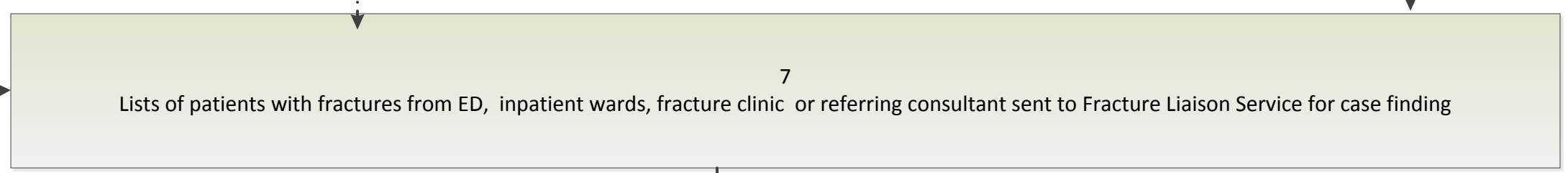


## Secondary Care

Presentation



Identification



Investigation

**8 Fracture Liaison Service**

Patients Identified: Exclude those with skull, face, foot and/or hand fractures

Patients Contacted for Assessment: If patient declines, information to be sent to patient and a decline letter sent to GP to follow up with the patient.

DXA Scan Performed: Exclusions are if a DXA scan  $\leq 2$  years old is available or DXA is unfeasible (patient bed/wheelchair bound or confused)

Patient Investigations & Education: Patient history discussed, relevant blood/other tests undertaken, fracture risk calculated, patient screened for falls risk, result of DXA scan & fracture risk explained to patient, if relevant pharmacological treatment options, diet, exercise, bone health and falls prevention advice discussed with patient

Treatment Plan: Patient info recorded on database and report that is generated is issued to patients' GP. Refer to falls service if required and available.

**10**

Patient sent/given information leaflet by Secondary Care which advises that no treatment with medication is required at this time but which promotes lifestyle advice.

Letter sent to GP by Secondary Care advising no pharmacological intervention recommended at this time along with recommendation that GP arranges a repeat DXA for low risk patients, as follows:

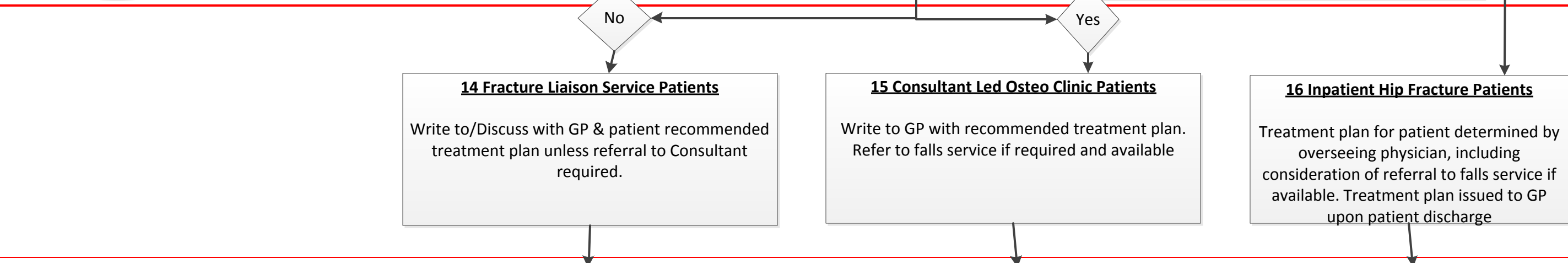
In 3 years if T-score  $\geq -2.5$  but  $\leq -2.0$   
or  
In 5 years if T-score  $> -1.9$  to  $-1.5$  unless there is another fracture or patient is unable to take medication.

**11**

Provision of e-mail or telephone advice to GPs by Consultants

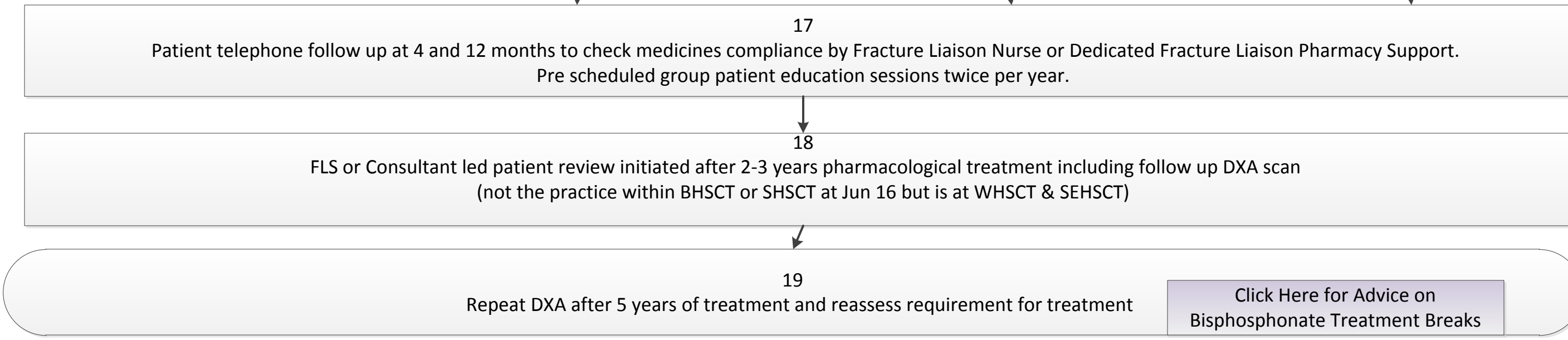
**13 \* Referral Criteria for Consultant Led Outpatient Clinic**

- males  $\leq 65$  with osteoporosis
- females with T-score  $\leq -3.5$  and Z-score below  $\leq -2$
- patients with  $> 1$  vertebral fracture
- patients intolerant/contraindicated to bisphosphonates
- treatment failure as per NICE
- complex medical history



Intervention

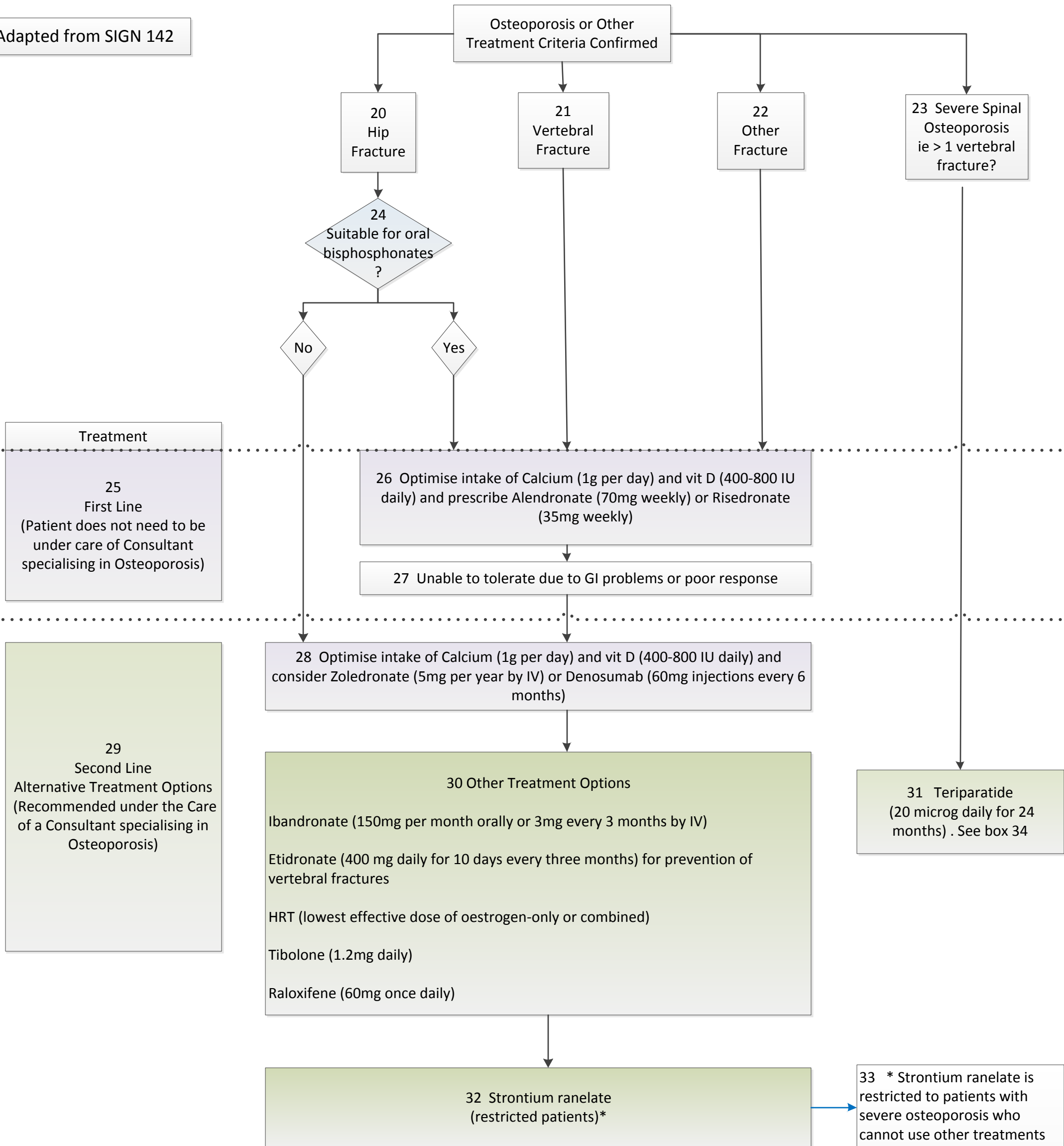
Review/On-going Support



Click Here for Advice on Bisphosphonate Treatment Breaks

# Treatment for Post Menopausal Women with Osteoporosis and for Males with Osteoporosis

Adapted from SIGN 142



## 34 Extract from NICE for Indications for Teriparatide

Teriparatide recommended for secondary prevention in postmenopausal women who are unable to tolerate, have a contraindication of unsatisfactory response to other oral anti-osteoporosis agents

AND

Who are aged 65+ with a T-score of -4.0 or below, or a T-score of -3.5 or below plus more than 2 fractures

OR

Who are aged 55-64 years and have a T-score of -4.0 or below plus more than 2 fractures

33 \* Strontium ranelate is restricted to patients with severe osteoporosis who cannot use other treatments and should NOT be started in people who have or have had:

- ischaemic heart disease
- peripheral arterial disease
- cerebrovascular disease
- uncontrolled hypertension

(2g daily at night)