

Osteoporosis: prevention before treatment

Osteoporosis is a metabolic disease of the bone, which is characterized by a reduction of bone mass, resulting in a fragile bone tissue increasing the bone's vulnerability to fractures.

It seems consensual that bone density increase occurs until the age of 30 and from then on, a decline is observed. This varies from individual to individual, depending on of several factors which influence this: physical inactivity, reduced sun exposure, reduced weight, use of corticosteroids, and poor eating habits.

According to the World Health Organization, 1/3 of white women over the age of 65 have Osteoporosis. Although it is a disease which is more prevalent in females, it also affects males. It is estimated that about 1/5 of males over the age of 60 are 25% more likely to suffer a fracture due to Osteoporosis.

Articles have been written reporting a strong correlation between muscle strength and bone quality; people with stronger muscles have stronger bones, and the opposite is also true.

For this reason, physical activity is advised as an important contribution in maintaining healthy bones. Structured physical exercise is fundamental in the prevention and treatment of Osteoporosis. Exercise benefits bone mineral density when it starts to decrease, strengthens muscles and improves balance.

The type of exercises that produce the best results in Osteoporosis are strength exercises. High-impact, high-intensity aerobic exercises should also be introduced in the exercise plan.

Isometric trunk muscle strength and open kinetic chain exercises are very useful because, by strengthening the posterior body muscles, they contribute in reducing the risk of vertebral fractures, a very vulnerable region in the elderly who suffer from Osteoporosis, besides also strengthening the thigh muscles, very important in maintaining

balance and also in the prevention of neck of the femur fractures.

Due to the transmitted impact aerobic exercises, such as running, help in calcium retention. On the other hand, walking as an exercise is not very efficient in improving bone density.

Osteodensitometry is the test used to evaluate bone density. It is also the standard method used in the diagnosis and follow-up of people with Osteoporosis, who need to control the evolution of the disease. This test is performed in a part of the body with the highest propensity for osteoporotic fractures such as the proximal femur and the lumbar spine.

An osteodensitometry is recommended in the following situations: i) Women over the age of 65 and men over the age of 70; ii) Women under the age of 65 who are postmenopausal and men over 50 years of age who present 1 major or



2 minor risk factors; iii) Premenopausal women and men under the age of 50, only if there are known causes of secondary Osteoporosis or major risk factors.

Major risk factors for Osteoporosis are: age (+ 65 years); previous

vertebral fracture; family history of hip fracture in one of the parents; corticoid therapy (+3 months in a row); early menopause (<40 years); hypogonadism; primary hyperparathyroidism and increased propensity for falls.

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