ElderCare Patient Education Series

The Know Your Medicine brochure series includes:

Cholesterol Depression Diabetes (Type 2) Heart Failure High Blood Pressure Osteoporosis

The ElderCare Patient Education series includes:

Aging and Your Response to Medicines
Alcohol: Friend or Foe?
The Caregiver's Guide to Using Medicine
Choosing the Right Nonprescription Medicine
The Consumer's Quick Reference to Using Medicines
Eye Medicines: May Be More Than Meets the Eye
Home Safety Issues
How to Select Your Pharmacy and Pharmacist
Medicines and Travel
Personal Medicine Record
Questions You May Have About Generic Medicines
Vitamins Are Not Enough



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Know Your Medicines

Osteoporosis





Osteoporosis

Osteoporosis is often called "the silent disease." It weakens the bones of older adults without any noticeable symptoms. Most people over 50 don't know they have osteoporosis until they fall and break their wrist or hip—a medical emergency that strikes one in eight men and half of all women.

How Can I Find Out If I Have Osteoporosis?

You don't have to break a bone to find out if you have osteoporosis. Your doctor can do a bone density study. Called a DEXA scan, this simple, non-invasive test can tell you if you've had significant bone loss. Unfortunately, it can't tell you how much bone you are losing every day.

Risk Factors

Women are at greater risk, particularly if they...

- · have a family history of osteoporosis
- · are white or Asian
- started menopause early (before age 50)
- have a small body frame

- Make sure you received the correct medicine before you leave the pharmacy. If not, notify the pharmacist.
- Make sure you can read and understand the medicine name and directions on the container. If the label is hard to read, ask your pharmacist to use large type. If you have difficulty opening the bottle, tell your pharmacist.

DO NOT

- Stop taking a prescription drug unless your doctor says it's OK—even if you are feeling better. If you are worried that the drug might be doing more harm than good, talk with your doctor. He or she may be able to change your medicine to another one that will work just as well.
- Take more or less than the prescribed amount of any drug
- Mix alcohol and medicine unless your doctor says it's OK. Alcohol can affect how
 well a medicine works. Mixing alcohol and
 medicine can even make you sick.
- Take medicine prescribed for another person or give your medicine to someone else.

When Taking Your Medicine...

ALWAYS

- Take your medicine exactly the way your doctor prescribes it—no more and no less.
- Tell your doctor or pharmacist about any allergies you have. It also is important to tell them about any problems you have had with medicines in the past, such as rashes, indigestion, dizziness, or not feeling hungry.
- Keep a daily record of all the medicines you take. Include prescription and overthe-counter medicines. Write down the name of each medicine, the doctor who prescribed it, the amount you take, and the times of day you take it. Keep a copy in your medicine cabinet and one in your wallet or pocketbook.
- Review your medicine record with your doctor during every visit, especially if your doctor prescribes new medicine. Your doctor may have updated information about the medicines you are taking.
- Check the expiration dates on your medicine bottles. If your medicine has expired, throw it away.
- Call your doctor immediately if you have any problems with your medicines.

Men and women are at risk if they...

- · don't get enough exercise
- smoke
- · have a history of drinking alcohol
- take certain medicines, such as systemic corticosteriods (i.e., prednisone), phenytoin, or other seizure medicines
- · have a history of hyperthyroidism

As everyone ages, their risk of osteoporosis increases.



Taking Responsibility for Your Health

Your bones are strongest when you are in your early 30s, but you can reduce your risk by making sure your diet includes the Recommended Daily Allowance (RDA) of calcium.

- Postmenopausal women over 50 who are on estrogen replacement therapy need 1,000 mg a day.
- Men over 65 and postmenopausal women not on estrogen replacement therapy need 1,500 mg a day.

Also, you should exercise at least 4 times a week. Dancing, walking, hiking, or even water aerobics increase your bone mass and reduce your risk of falls.

 Before starting an exercise program, talk to your doctor and an exercise specialist.



It Is Important to...

- Talk to your doctor about osteoporosis, especially if you fit any of the risk factors.
- Include foods rich in calcium and Vitamin
 D in your diet, but watch the amount of
 fat in dairy products. Take supplements if
 necessary.
- Have your doctor recommend an exercise program.
- Think about home safety. To prevent falls, install hand rails, add lights to dark rooms, and secure loose rugs.



D

What About Nutritional Supplements?

Calcium is an essential nutrient that helps prevent osteoporosis. If you don't get enough calcium from dairy products and green leafy vegetables in your diet, there are several types of supplements you can take. Calcium even comes in some over-the-counter heart burn medicines.



Calcium is crucial but your body can't absorb it without Vitamin D. Age, diet, and not getting enough sun all contribute to Vitamin D deficiencies. Getting 15 minutes of sun 3 times a week isn't always possible during a hospital stay, but dairy products and fortified cereals often provide enough Vitamin D. For people older than 50, the recommended daily allowance (RDA) is 400 IU. For people older than 70, the RDA is 600 IU.



Which Medicines Help?

Estrogen (or Hormone) Replacement Therapy

For women entering menopause, estrogen replacement therapy is the standard of care for preventing and treating osteoporosis. Even older women can benefit from it.

There are many different estrogen replacement products: pills, creams, patches. Your doctor or pharmacist can help you choose.

Side Effects

Headaches, bloating, weight gain, vaginal bleeding, breast tenderness, and an increased risk of breast cancer.

Hormone therapy is not recommended for women with a history (or family history) of breast cancer, a history of blood clots, or an unstable blood pressure.

A

Selective Estrogen Receptor Modulators

Generic Name	Brand Name	
raloxifene	Evista	

This medicine has been shown to increase bone density and reduce the risk of heart disease without increasing the risk of endometrial or breast cancer.

Side Effects

Upset stomach, leg cramps, and blood clots in the legs. This medicine does not alleviate hot flashes like estrogen replacement.

Bisphosponates

Generic Name	Brand Name
alendronate	Fosamax
risedronate	Actonel

This medicine, which makes bones stronger, can be prescribed to prevent or treat osteo-porosis.

Side Effects

Nausea, esophageal burning, reflux disorder, and constipation. Must be taken by itself on an empty stomach with water only. For 30 minutes after taking this medicine, you may not eat or drink, and you must remain in an upright position.

Calcitonin

Generic Name	Brand Name
calcitonin	Miacalcin

This medicine, which comes as a nasal spray, makes bones stronger and relieves pain associated with osteoporosis. To prevent nasal irritation, it is important to alternate nostrils for each metered puff of medicine. For people with severe arthritis or impaired movement, there are assistive devices that make this medicine easier to use. It must be stored upright in a refrigerator.

Side Effects

Upset stomach and nasal irritation.

