

## Failure to prevent fractures costing NSW & ACT more than \$1 billion each year: Osteoporosis Australia report

### *Launch of national SOS Fracture Alliance to 'make the first break the last'*

The brittle bones of NSW and ACT residents aged 50 plus are expected to cost \$1.1 billion in 2017,<sup>1</sup> while the total cost over 10 years will climb to \$7.5 billion by 2022.<sup>1</sup>

This is according to the first State and Territory report analysing the costs and burden of poor bone health for NSW and ACT, set for release by Osteoporosis Australia today (June 27, 2017).

Release of the *Osteoporosis costing NSW & ACT: A burden of disease analysis* report, will coincide with the launch of the independent SOS Fracture Alliance – Australia's only national alliance of 30 medical, allied health, patient and consumer organisations focusing on the prevention of osteoporotic fractures.

According to Osteoporosis Australia Medical Director, Professor Peter Ebeling AO, 1.9 million NSW and ACT residents aged 50 and above are currently living with brittle bones.<sup>1</sup> This figure is expected to climb to 2.1 million within the next five years,<sup>1</sup> leading to a cascade of fractures, which could be prevented, saving millions of dollars and improving patient lives. The report estimates by 2022, there will be 64,000 fractures in NSW and ACT each year.<sup>1</sup>

"A broken bone is usually a sign that we need to take action to prevent more bone loss, as each fracture significantly raises the risk of a further fracture.<sup>1</sup>

"What is extremely worrying is that four-out-of-five Australians treated for an osteoporotic fracture are not tested for osteoporosis, and therefore, are not offered treatment for osteoporosis,"<sup>2</sup> said Prof Ebeling.

"There is a significant gap in osteoporosis care, and our hospitals are becoming revolving doors for fracture patients being sent home, and returning with new fractures, rather than being properly assessed and treated for osteoporosis."

Founder and Chair of the SOS Fracture Alliance, Professor Markus Seibel, Sydney said Australians are being unnecessarily left to endure the pain of repeated fractures, and should regard the new figures as a serious public health warning.

"Two-thirds of NSW and ACT residents aged 50 and above have poor bone health or osteoporosis, and many don't know it, even when they have obvious risk factors, or already have sustained a fracture,"<sup>1</sup> Prof Seibel said.

"More often than not, people are sent home, after their fracture has been 'fixed', and miss out on essential investigation and care which in many cases would prevent further fractures.

"The SOS Fracture Alliance is seeking to increase recognition nation-wide of first fractures in people with undiagnosed osteoporosis, to make their first break the last," said Prof Seibel.

"This is why the SOS Fracture Alliance strongly advocates the implementation, across the nation, of routine services that identify, investigate and treat patients with osteoporotic fractures. These secondary fracture prevention services will integrate all sectors of the health system, in particular, primary care and hospital-based services."

Retired school teacher and mother to two adult children, Kate, 65, Sydney was diagnosed with osteoporosis in April 2017, after an accident during her weekly aerobics class which saw her lose her footing and fall to the floor, subsequently splitting her left femur (thigh bone) in two. She was rushed by ambulance to hospital, where she underwent a series of X-rays, and was administered high doses of morphine for the pain. The following morning, Kate underwent extensive surgery to repair her broken leg.

"During surgery, the doctors made a seven centimetre incision in my left hip and two other, smaller incisions down my left leg, into which they inserted a big rod down the centre of my thigh bone, which they fastened with a screw, to repair my broken femur," Kate said.

A few weeks after her surgery, Kate was seen by the Concord Hospital Secondary Fracture Prevention Service, one of the few in NSW that identifies patients who have sustained fractures, and investigates their bone health. If osteoporosis is diagnosed (which is common), patients receive specific bone-strengthening medications to prevent further fractures.

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Given she has no known family history of the silent disease, and, up until then, had been leading an active lifestyle, Kate was shocked to learn she was living with brittle bones.

Kate's recovery process has since involved physiotherapy as an outpatient, bone strengthening medication, "unconditional support" from her husband and a "positive outlook on life."

Nowadays, she is a strong advocate for the new SOS Fracture Alliance, citing "had I been referred to a bone mineral density clinic when I was going through menopause, and subsequently been diagnosed with brittle bones and prescribed appropriate medication, I could have saved the healthcare system thousands of dollars and resources."

According to CEO of Osteoporosis Australia, Greg Lyubomirsky, Sydney, urgent action is needed to improve health outcomes for patients and their families.

"Breaking a bone is an immediate and ongoing medical emergency. It involves time in hospital, surgery, rehabilitation and often home care.

"Fractures adversely impact patients and their families. Fractures disrupt daily activities, are painful, and take a long time to recover from," said Mr Lyubomirsky.

"It is our collective responsibility to stop osteoporotic fractures from occurring.

"Fractures are an important cause of death in older people, and require the same focus and attention as heart attacks and stroke," Mr Lyubomirsky said.

"Yet, we know too many fracture patients are leaving hospital without appropriate investigation for osteoporosis.<sup>1</sup>

"Our report released today clearly demonstrates the high cost to the healthcare system of the growing numbers of preventable fractures.<sup>1</sup> We must do better," said Mr Lyubomirsky.

Osteoporosis affects women and men, and occurs when bones lose their quality and strength, weakening the skeleton.<sup>3</sup> Osteoporotic-fractures most often occur in the spine, hip, wrist, upper arm, ribs, and pelvis.<sup>3</sup> Proper medical investigation and management can halve the risk of further fracture.<sup>3</sup>

Direct costs of managing fractures from osteoporosis include ambulance services, hospitalisations, emergency and outpatient departments, rehabilitation and community services.<sup>1</sup> These are preventable costs.

### About the NSW & ACT report

The ***Osteoporosis costing NSW & ACT: A burden of disease analysis*** report forms part of a series of reports commissioned by Osteoporosis Australia, and co-authored by health economics experts from the Australian Catholic University and Deakin University. The report investigates the rising costs and burden of poor bone health and related fractures.<sup>1</sup>

The report reveals 155 fractures occur each day among residents aged over 50 in NSW and the ACT.<sup>1</sup> The total costs of brittle bones in those aged 50 and above in NSW and the ACT is projected to reach \$1.1 billion this year, \$740 million (67 per cent) of which will relate directly to fracture costs.<sup>1</sup> By 2022, it is estimated 64,000 fractures will occur each year (174 per day).<sup>1</sup>

### About the SOS Fracture Alliance

The Australian National SOS Fracture Alliance unites 30 medical, allied health, patient and consumer organisations under its umbrella. The more than 2.91 million individual members have one common goal – to 'make the first break the last' by improving nation-wide care for patients presenting with a minimal trauma fracture. The SOS Fracture Alliance is working to close this gap in osteoporosis care by addressing the fact that the overwhelming majority of patients who sustain an osteoporotic fracture receive no investigation, nor treatment to prevent further fractures. Comparatively, Australia has one of the world's poorest rates of identifying and managing osteoporotic fractures appropriately – some 70 to 80 per cent of women who have broken a bone and would therefore qualify for osteoporosis treatment, are not investigated or diagnosed, nor receive appropriate medical care.<sup>1,4</sup> As a result, the numbers of preventable fractures impacting patients, their families and the healthcare system are steadily growing.

**For more information about osteoporosis and the *Osteoporosis costing NSW & ACT: A burden of disease analysis* report, visit [www.osteoporosis.org.au/burdenofdisease](http://www.osteoporosis.org.au/burdenofdisease). For more information about the SOS Fracture Alliance, visit [www.SOSfracturealliance.org.au](http://www.SOSfracturealliance.org.au).**

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**DIGITAL MEDIA KIT:** Available for download TUES, JUNE 27, 2017 at [www.fracturepreventionmediakit.org](http://www.fracturepreventionmediakit.org)  
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## References

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