RECOGNITION OF OSTEOPOROSIS RISK FACTORS IN HIP FRACTURE PATIENTS: FIRST DATA FROM LATVIA

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Objective: Osteoporosis (OP) and its related fractures are highly prevalent condition worldwide with known risk factors. The aim of the study was to analyze recognition of OP risk factors in patients with hip fractures.

Material and Methods: Retrospective medical record analysis of patients (pts) attended to Riga 2nd Hospital specialized in traumatology and orthopedics. All pts included in the study were admitted to hospital in 3 year period (08.12.2009–19.12.2012) and had a hip fracture as a result of low energy trauma. OP risk factors such as gender, age, habits, comorbidities, medication, including glucocorticosteroid (GCs) use, previous fracture were analyzed. All interval data were presented in median values with interquartile range (IQR).

Results: A total of 888 pts medical records were analyzed: predominantly females (73.1 %) older than males 80 (IQR, 86–72) yrs vs. 72 (IQR, 80–61) yrs (p<0.001). Such risk factors were recognized: previous fracture–14.8 % (more than one fracture 9.2 %), smoking–12.5 %, alcohol abuse–7.7 %. Totally 24.4 % of all pts had comorbidities increasing risk of OP (28.0 %–chronic obstructive pulmonary disease or sarcoidosis, 9.9 %–diabetes mellitus, 8.7 %–chronic kidney disease, 1.5 %–rheumatoid arthritis, 0.7 %–gastrectomy). Only 1.4 % (n=12) of all pts used GCs in long-term. Medication increasing risk of OP (e.g., anticonvulsants, proton pump inhibitors) used 6.2 % (n=55) of all pts. Almost half of the pts had at least 1 OP risk factor, 30.6 % of pts had 2 risk factors, 9.2 % had 3 risk factors, 2.5 %–4 risk factors and 0.3 %–6 risk factors. Only in 2.8 % (n=25) pts OP diagnosis was found in medical records and 2.5 % (n=22) pts had recommendations for further OP evaluation or treatment.

Conclusion: Although most often cause of hip fractures is low BMD, especially in elderly, OP risk factors not always are recognized in Latvia and, as a result, there are future fractures, chronic pain and disability.