

Osteoporosis and fragility fractures as a priority for healthy ageing

Osteoporosis and fragility fractures primarily affect older people, leading to serious consequences including long-term disability and death. While prevention of falls and fractures is beginning to gain some policy attention, osteoporosis remains under-recognised in healthy ageing policies across Europe.

The population in Europe is ageing rapidly,¹ leading to an increase in the number of people living with osteoporosis and experiencing fragility fractures.² In 2010, an estimated 27.5 million people in the European Union had osteoporosis, contributing to 3.5 million fragility fractures each year.³ As a result of population ageing, the number of fragility fractures sustained each year is expected to reach 4.5 million by 2025.³

Older people often face serious consequences from fragility fractures, such as loss of mobility and independence, transition into long-term care, and even death.^{4,5} Only around half of older people who experience a fragility hip fracture will regain the same functional ability that they had before the fracture, while some will need to be admitted to a long-term care facility.⁴ In addition, as many as one in three people over 60 will die within one year of a hip fracture.⁵

European and national health strategies are beginning to recognise the importance of addressing frailty and falls as part of healthy ageing, although osteoporosis and fragility fractures are often not specifically addressed. For example, the European Commission's European Innovation Partnership on Active and Healthy Ageing⁶ and the World Health Organization's European strategy for healthy ageing recognise the importance of preventing falls.⁷ In addition, at the national level, many countries

promote the development and implementation of falls prevention strategies.^{8,9} Such initiatives, however, rarely discuss musculoskeletal health in the context of healthy ageing and do not specifically focus on improving care for older people living with osteoporosis or at risk of fragility fractures.¹⁰

To support independence in older age and reduce the impact of ageing on health systems, policymakers must recognise the critical importance of integrating osteoporosis and fragility fractures into policies, strategies and programmes that support healthy and active ageing.



Over the coming years, the proportion of the retired population will dramatically increase in Europe. It is imperative that we maintain older people's mobility and independence.



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References

1. Eurostat. 2017. *People in the EU: Statistics on demographic changes*. Brussels: European Commission
2. International Osteoporosis Foundation. 2018. *Broken bones, broken lives: A roadmap to solve the fragility fracture crisis in Europe*. Nyon: IOF
3. Hernlund E, Svedbom A, Ivergard M, *et al.* 2013. Osteoporosis in the European Union: medical management, epidemiology and economic burden. A report prepared in collaboration with the International Osteoporosis Foundation (IOF) and the European Federation of Pharmaceutical Industry Associations (EFPIA). *Arch Osteoporos* 8: 136
4. Tarazona-Santabalbina FJ, Belenguer-Varea A, Rovira E, *et al.* 2016. Orthogeriatric care: improving patient outcomes. *Clin Interv Aging* 11: 843-56
5. Roche JJW, Wenn RT, Sahota O, *et al.* 2005. Effect of comorbidities and postoperative complications on mortality after hip fracture in elderly people: prospective observational cohort study. *BMJ* 331(7529): 1374
6. European Commission. Action Group A2: Personalised health management and prevention of falls. Available from: https://ec.europa.eu/eip/ageing/actiongroup/index/a2_en [Accessed 27/11/19]
7. World Health Organization Regional Office for Europe. 2012. *Strategy and action plan for healthy ageing in Europe, 2012–2020*. Malta: WHO
8. Weerdesteyn V, Rijken H, Geurts ACH, *et al.* 2006. A five-week exercise program can reduce falls and improve obstacle avoidance in the elderly. *Gerontology* 52(3): 131-41
9. Cooper R. 2017. Reducing falls in a care home. *BMJ Qual Improv Rep* 6(1): u214186.w5626
10. Briggs AM, Persaud JG, Deverell ML, *et al.* 2019. Integrated prevention and management of non-communicable diseases, including musculoskeletal health: a systematic policy analysis among OECD countries. *BMJ Glob Health* 4(5): e001806