

Managing Osteoporosis to live a full and active life

Use this journal to help you:

- Learn about bone health and how to manage osteoporosis.
- > Keep track of what you do to keep your bones healthy and strong.

Use this booklet for the next few years for the best possible bone health.

DID YOU KNOW?

It is important to manage your own health when living with a chronic condition like osteoporosis. You will likely spend less than 12 hours a year with your health professional.

DID YOU KNOW?

A broken bone is called a fracture and may be a warning sign of osteoporosis.

"My Bone Health Journal" is for YOU:

- If you are taking (or have been prescribed)
 medication for osteoporosis, and
- If you are ready to make changes in your life to prevent broken bones.

Take charge of your health NOW!

Bring this journal with you when you visit your health professional. Sharing this information and working together will help you achieve the best possible bone health.

Family Doctor: Phone Number: Specialist #1: **Phone Number:** Specialist #2: **Phone Number:** Pharmacy: **Phone Number:** Fracture clinic: **Phone Number:** Other: **Phone Number:** Other: **Phone Number:** Other:

Important Contacts

Keep these numbers handy. They are partners in your care.

My Appointments

Date:	Time:
With who:	
Date:	Time:
With who:	
Date:	Time:
With who:	
Date:	Time:
With who:	
Date:	Time:
With who:	
Date:	Time:
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Questions to discuss with my health care tea	ım

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Take charge of your Bone Health

Action plans are practical tools for managing your osteoporosis. In this section of the journal, you will learn how to make an effective action plan.

In the other sections of the journal, you will be guided to make specific action plans. Each action plan helps you make one small step towards better bone health.

You decide what you want to accomplish — increase your calcium intake? Get more exercise?

Setting goals can help you create and stick to your action plans.

For your action plan, focus on the following:

- Something you want to do or something you decide to do
- > Something that you can do this week
- Something that is a specific action. For example, 'Losing weight' is too general. 'Avoiding snacks between meals' is a specific action.

Your action plan should answer the following questions:

1	What are you going to do?	Walking
2	How much are you going to do?	Walk for 30 minutes
3	When are you going to do it?	After dinner
4	How often are you going to do it?	Monday, Wednesday, Friday
5	How confident are you that you can do this?	8 (see confidence scale below)

How confident are you that you can carry out your action plan?

1 2 3 4 5 6 7 8 9 10 I'm not I think I can ready I can do this!

It's important that your plan is realistic and achievable, so aim for a confidence level of 7 or greater. The more confident you are, the more successful you will be in carrying out your plan.

Using the example of walking, here is the action plan:

This week, I will walk (what), for 30 minutes (how much) after dinner (when) Monday, Wednesday, Friday (how often). My confidence level is 8 (confidence level).

During the week, write down when you walk in a chart like this:

	Tracking My Action Plan	Comments
Monday	Walked 20 mins	Had a late dinner
Tuesday		
Wednesday	Did not walk	Pouring rain
Thursday		
Friday	Walked 30 mins	
Saturday	Walked 30 mins	
Sunday		

At the end of the week, review your chart to see if your action plan was successful. Think about another small change and make a new action plan for next week.

DID YOU KNOW?

Action plans help you make small changes each week. This is the best way to make lifestyle changes that improve your bone health.



Know Your Bones:

What is Your Fracture Risk?

Osteoporosis makes your bones become thin and weak, and more likely to break (fracture). Knowing whether your risk of fracture is low, moderate or high can help you make an action plan that is right for you.

DID YOU KNOW?

Keeping track of your bone density helps you know your fracture risk.

Your Fracture Risk and What You Need to Know!

Your health professional assessed your risk of having a fracture within the next 10 years. It was determined by your age, your sex, your T-score (which was the result of your bone mineral density test), and other risk factors you may have. Some of these risk factors include whether or not you have already fractured, whether you are on a medication that contributes to bone loss such as prednisone, or if you have another condition such as rheumatoid arthritis that can cause bone loss. The result may be Low, Moderate or High Risk.

Discuss your fracture risk with your health professional and together, decide the best treatment plan for you.

Ask your health professional for the hip T-score of your last bone density test and the results of your fracture risk assessment and record this information on the following page.

For more information about diagnosis and fracture risk assessment, refer to Osteoporosis Canada's Diagnosis fact sheet by visiting www.osteoporosis.ca or call 1-800-463-6842 to get a copy.

DID YOU KNOW?

Osteoporosis Canada recommends all men and women over 65 to have a BMD test.

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Track your height - and why it matters

It is normal to lose a little height as you get older. But losing too much height can be a sign that you have had a spine fracture. When a bone in your spine breaks it collapses and makes your spine a little shorter. As spine fractures can be painless, you may not be aware this has happened.

Ask yourself:

- Have I lost 2cm ($^{3}/_{4}$ ") or more in height in the last year, or 6cm (2 $^{1}/_{2}$ ") or more overall from when I was a young adult?
- Do I have a more rounded spine?

If you answered "yes" to either of these two questions, tell your doctor that you are concerned and ask for an x-ray of your spine.

DID YOU KNOW?

Fractures in the spine may cause stooped posture or a hump in your back. This is called kyphosis.



Record the results of your assessment in the chart below:

DATE OF BMD TEST (YY/MM/DD)	AGE	MY BMD T-SCORE	HEIGHT	MY FRACTURE RISK (LOW, MODERATE OR HIGH)

Review your chart and if you keep losing height, check back with your doctor.

Treat Your Bones:

The Importance of Medication

Taking your osteoporosis medication is vital to reduce your risk of fractures.

By taking action to manage your bone health you can prevent future fractures.



Have you talked to your doctor about your medication?

Talking to your doctor about osteoporosis, your fracture risk and medications is an important part of managing your bone health.

Talk openly with your doctor to make sure your treatment plan is right for you.

Find answers to your questions in Osteoporosis Canada's Drug Treatments fact sheet by visiting www.osteoporosis.ca or call 1-800-463-6842 to get a copy.

Important Medication Tips:

- Create your own medication record.
 It will help you stay organized,
 especially if you are on many medications.
- > Work with one pharmacist and let them know of all medications and supplements you are taking. Be sure you include all over-the-counter drugs and herbal supplements.
- > Use a calendar to keep track of when you take your medication. You could also mark the date to renew your prescription.
- Ask your pharmacist to help you organize your medication

Attention: Always take your osteoporosis medication as directed by your doctor.

If you have any concerns about your medication and its effects, talk with your doctor. Do not stop taking your medication without talking to your doctor first.



Take Charge:Keep Track of Your Meds

MY OSTEOPOROSIS MEDICATION	INSTRUCTIONS (i.e. how often; with or without food)	DATE STARTED	DATE TO RENEW PRESCRIPTION	PRESCRIBING DOCTOR

Keep your medication list up to date with this chart.

Many people find it hard to take medications for a long period of time. If you are having trouble remembering or staying on your osteoporosis medication, ask your doctor or pharmacist for help. You need this medication to prevent further bone loss or a fracture.

Move Your Bones:

Exercise for Healthy Bones

Exercise helps prevent falls and fractures by:

 Making your bones and muscles stronger

Improving your balance,
 flexibility and coordination

Talk with your doctor before you start any exercise program. It is important to know what exercises are safe for you to do.

Your doctor may refer you to a physiotherapist to plan exercises and activities that are right for you.

If you are afraid of getting hurt or breaking another bone, there is help available.

To improve your bone health, your exercise program should include each of these types of exercise.

Doing one type of exercise such as walking is good for you. However, adding strength, balance and posture training is the best way to prevent bone loss, falls and fractures.

Type of Exercise

Frequency



STRENGTH TRAINING

Free weights, machines, exercise bands or body weight as resistance

At least 2 days per week



POSTURE TRAINING

Safe movements, awareness of position and posture (and back muscle strengthening)

Daily 5-10 minutes



BALANCE TRAINING

Tai chi, other exercises designed to challenge balance

Daily 15-20 minutes



WEIGHT BEARING AEROBIC PHYSICAL ACTIVITY

Walking, dancing, jogging, stair climbing, step aerobics, running

Daily 20-30 minutes. At least 150 minutes a week



Take Charge:

Your physical activity tracking sheet

	Month/Year: _		Goal for	this month:			
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	☑ Strength training	Strength training	Strength training	Strength training	Strength training	Strength training	Strength training
WEEK	☑ Posture training	Posture training	Posture training	Posture training	Posture training	Posture training	Posture training
1	Balance training	Balance training	Balance training	Balance training	Balance training	Balance training	Balance training
	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise
	Strength training	Strength training	Strength training	☐ Strength training	Strength training	Strength training	Strength training
WEEK	☐ Posture training	☐ Posture training	☐ Posture training	Posture training	☐ Posture training	Posture training	☐ Posture training
2	Balance training	Balance training	Balance training	Balance training	Balance training	Balance training	Balance training
	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise
	Strength training	Strength training	Strength training	Strength training	Strength training	Strength training	Strength training
WEEK	Posture training	Posture training	Posture training	Posture training	Posture training	Posture training	Posture training
3	Balance training	Balance training	Balance training	Balance training	Balance training	Balance training	Balance training
	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise
	Strength training	Strength training	Strength training	Strength training	Strength training	Strength training	Strength training
WEEK	Posture training	☐ Posture training	☐ Posture training	Posture training	☐ Posture training	☐ Posture training	☐ Posture training
4	☐ Balance training	☐ Balance training	☐ Balance training	☐ Balance training	☐ Balance training	☐ Balance training	☐ Balance training
	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	Aerobic exercise	☐ Aerobic exercise

Think about your physical activity each week. What one small change could help you toward better bone health? Make an action plan and use this chart to track your progress.

Osteoporosis Canada can help you learn to exercise safely. Call us at **1-800-463-6842** or visit our website **www.osteoporosis.ca** for these resources:

- → Find a Bone Fit[™] trained professional to teach you the right exercises for osteoporosis
- > Read the booklet Too Fit to Fracture.
- > Read the 8-part series on exercise in the COPING newsletter
- > Watch our webcasts
- Read After the Fracture for tips on managing pain and moving safely

DID YOU KNOW?

Many people when they get older lose flexibility in the chest, shoulders, hip and ankles. Stretching will improve mobility and balance leading to fewer falls.

Feed Your Bones:

Healthy Eating for Healthy Bones

Eating a variety of healthy foods can help you build healthy bones.

To learn how to make wise food choices, read Canada's Food Guide. Ask your health professional for a copy.

Calcium

Calcium is good for your bones – studies of older adults show that getting enough calcium can slow bone loss and lower your risk of fracture!



DID YOU KNOW?

Osteoporosis Canada recommends getting calcium from your diet whenever possible.



Calcium Calculator

Do you get enough calcium from the foods you eat? Check it out... your body will thank you!

CALCIUM INTAKE

Find the calcium-rich foods you ate yesterday. Note that many foods commonly thought to be high in calcium do not contain enough calcium in one portion to count.

Write the number of portions you ate for each food. Example: 2 slices of bread is 1 portion.

Total the number of portions and multiply by the milligrams of calcium per portion.

Enter the amount in the last column.

Add the amounts in this column to get your total calcium intake.

CALCIUM-RICH FOODS	PORTION SIZE	NUMBER OF PORTIONS I ATE	TOTAL PORTIONS	MILLIGRAMS OF CALCIUM PER PORTION	TOTAL MILLIGRAMS OF CALCIUM
EXAMPLE > Bread > Hummus	2 slices or 70 g 1/2 cup or 125 mL I had 3/4 cup	1 1/2	2 V/2 Portions	x 50	125
> Black beans, Lima beans, Lentils—cooked > Bread > Broccoli > Eggs > English muffin or Bagel > Gai lan, Mustard greens > Hummus > Naan > Orange	> 1 cup or 250 mL > 2 slices or 70 g > 3/4 cup or 175 mL > 2 > 1 who'e > 1/2 cup or 125 mL > 1/2 cup or 125 mL > 1/2 > 1 medium orange			x 50	
> Almonds > Bok choy, Kale, Rapini, Okra—cooked > Chickpeas, Kidney beans, Pinto beans, Romano beans—cooked > Cottage cheese—regular or low fat > Dessert tofu > Ice cream, Frozen yogurt > Parmesan cheese	> 1/4 cup or 60 mL > 1/2 cup or 125 mL > 1 cup or 250 mL > 1/2 cup or 125 mL > 100 g > 1/2 cup or 125 mL > 1 Tbsp or 15 mL			x 75	
> Baked beans, Soybeans, White beans—cooked > Blackstrap molasses > Collards—cooked > Cheese—soft and semi-soft such as Blue, Feta, Mozzarella > Pancake or Waffle > Pudding—made with milk > Tofu—made with calcium—check labels	> 1 cup or 250 mL > 1 Tbsp or 15 mL > 1/2 cup or 125 mL > 25 g > 1 large or 2 small > 1/2 cup or 125 mL > 100 g			x 150	
> Cheese—firm such as Cheddar, Swiss, Gouda > Cheese—processed > Paneer > Salmon—canned with bones > Sardines—canned with bones > Soup—made with milk > Yogurt, fruit flavoured—regular or low fat*	> 25 g > 2 slices, 21 g each > 25 g > 1/3 can > 1/2 can > 1 cup or 250 mL > 3/4 cup or 175 mL			x 200	
> Milk—skim, 1%, 2%, whole, buttermilk, chocolate, flavoured* > Calcium-fortified beverages such as Soy, Rice, Orange juice—check labels > Skim milk powder > Yogurt—plain, regular or low fat*	> 1 cup or 250 mL > 1 cup or 250 mL > 1/3 cup or 75 mL > 3/4 cup or 175 mL			x 300	
*Add 100 mg for each portion of calcium-enriched milk or	yogurt.		TOTAL M INTAKE		mg

2 DID YOU GET ENOUGH CALCIUM?

Compare your calcium intake to your recommended daily intake.

MY TOTAL CALCIUM INTAKE: _____ mg

MY RECOMMENDED INTAKE: _____ mg

ı	RECOMMENDED CALCIUM INTAKE PER DAY (MG)					
1-3 YEARS	4-8 YEARS	9-18 YEARS	19-50 YEARS	51-70 MEN	YEARS WOMEN	71+ YEARS
700	1000	1300	1000	1000*	1200	1200

Source: Dietary Reference Intakes for Calcium and Vitamin D, 2010

Did you get enough calcium?

- Yes. Great, you are on track! Look for more Ideas for Action in STEP 3 to stay on track. Are you also taking a calcium supplement? You might not need to because you are getting enough from food.
- No. Many people do not get enough calcium from the foods they eat. Before considering a calcium supplement, go to STEP 3 to make a plan. Experts agree that getting calcium from food is preferred.*

TAKE ACTION

Plans make things work!

Use the list in STEP 1 and the Ideas for Action on the next panel to make a plan to add calcium-rich foods to your diet.

Select one or two times of day when a change will be most realistic.

Example:

In the morning I usually eat toast with jam and a coffee

Calcium-rich foods I will add:

toast with jam and a caffe latte

My Action Plan:

Calcium-rich foods I will add:

_____ I usually eat

4 IS YOUR PLAN REALISTIC?

Think about your plan. Ask yourself the following questions:

- > Can I picture myself carrying out this plan?
- > Have I chosen foods I like?
- Are the times I plan to eat calcium-rich foods convenient for me?
- > Have I chosen reasonable portion sizes?
- Are there other problems I may have?
 How can I overcome them?
- > Am I getting enough calcium with this plan?
- Do I need to consider a calcium supplement?
 (The total amount of calcium you get each day from both food and supplements should be about equal to your recommended calcium intake.)

Remember, you will be more successful if you make one small change at a time.

^{*} Osteoporosis Canada recommends 1200 mg for men over 50 years old.

^{*}Dietary Reference Intakes for Calcium and Vitamin D, 2010

IDEAS FOR ACTION

These ideas will help you think about and plan ways to increase your calcium.

CHECK one or two changes that you can easily make. Concerned about fat? Remember that lower fat dairy products have all the calcium of regular dairy products.

- Select milk as a beverage when eating out.
- Stir-fry broccoli, kale or bok choy and sprinkle with toasted almonds.
- Use yogurt or hummus as a dip, garnish, spread or dressing.
- Stock up on canned salmon for use in sandwiches, salads and casseroles.
- Make soups with milk instead of water.
- Try tofu in lasagna.
- Make your coffee choice a caffè latte.
- Add cheese or chickpeas to salads and sandwiches.
- Select milk desserts such as custards, puddings and yogurt.
- Buy calcium-enriched milk or enrich your own by adding 1 Tbsp of skim milk powder per cup of milk.

- Add skim milk powder to cooked cereals, casseroles, hamburger patties, omelettes, mashed potatoes, etc.
- Consider taking a calcium supplement if you simply cannot get enough calcium from food.

Check out the online Calcium Calculator™ on the Osteoporosis Canada website by visiting www.osteoporosis.ca and click on Calculate My Calcium.

If you do not meet your daily requirement, ask your health professional how to get more calcium from your diet and whether you need calcium supplementation.

Need more help?
Ask your health professional to refer you to a dietitian.

Vitamin D

Vitamin D is also very important for bone health!

Vitamin D helps to prevent falls and fractures by:

- Helping your body absorb calcium and build strong bones
- > Improving your muscles for better balance

Vitamin D is made by your skin when it is exposed to sunlight. We must rely on sunlight for vitamin D as very few foods contain it.

Many Canadians do not get enough vitamin D because:

- > In our climate, we do not always get enough sun.
- Sunscreen reduces the skin's ability to make vitamin D
- > As we get older, our skin makes less vitamin D

Osteoporosis Canada recommends that all Canadian adults take a vitamin D supplement each day.

How Much Vitamin D Do You Need?

AGE	DAILY VITAMIN D REQUIREMENT
MEN AND WOMEN 19-50	400 - 1,000 IU
MEN AND WOMEN 19-50 AT HIGH RISK OF FRACTURE	800 - 2,000 IU
MEN AND WOMEN 50+	800 - 2,000 IU

Vitamin D comes in pills, chewables and drops. Talk with your pharmacist or health professional about the right supplement for you. If you are taking a supplement for the first time, plan how you will add it to your daily routine.

For more information see Osteoporosis Canada's **Nutrition - Healthy Eating for Healthy Bones** factsheet.

The type of vitamin D that you should buy is vitamin D3. This is the most common type of vitamin D found in supplements in Canada.

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DID YOU KNOW?

Falling is a very serious health problem. It is very important that you take steps to prevent falls. Having osteoporosis means you are more likely to break a bone if you fall.

Protect
Your Bones:

Preventing a Fall

Most falls **CAN** be prevented!

Are you at risk of falling?

Answer these questions once a year to see if you are at risk of falling:

- Have you had a fall or falls within the past 12 months?
- Have you had a near fall within the past 3 months?
- Do you have a fear of falling?
- Do you need to use the arm rest to get up from your chair?
- Do you have other health conditions that can cause you to fall? (Examples: Parkinson's, stroke, hypertension, arthritis)

Talk to your health professional if you have answered yes to any of these questions – you may be at risk of falling.

DID YOU KNOW?

Near falls are more common than falls. A near fall is when you suddenly sit down or when you fall against a wall. It is important to tell your health professional if you have had a near fall as this may predict a fall in the future.

Your Fall Prevention Safety Checklist

Use this checklist to see if there are changes you can make in and around your home to prevent falls. By making your home safer, you can live independently for as long as possible.

HEALTH

- Exercise regularly to strengthen your muscles and improve your balance and coordination.
- Review ALL your medications (prescription, over-the-counter and herbal) with your pharmacist. Ask about side effects and take all your medication correctly.
- Eat a variety of healthy foods and get enough calcium.
- Drink plenty of water and other fluids.
- ☐ Take vitamin D. It helps keep your bones strong and improves muscle strength.
- Have your vision checked once a year.
- Have your hearing checked once a year.
- Have your blood pressure checked each time you see your health professional.
- ☐ Take good care of your feet.
- Limit the amount of alcohol you drink.

STAIRS Dut handrails on both sides of all stairs.	LIVING ROOM AND BEDROOMS
	Leave lots of space to move around.
Keep stairs well lit.	Don't use rugs or mats.
Don't leave anything on stairs that you can	Move electrical cords so they are out of your way.
trip over.	Use sturdy furniture and lamps.
Put a non-skid surface on the top of each step.	Put a light switch near the entrance of
BATHROOM	your bedroom.
Use non-skid mats and grab bars in tub and	Place a lamp or light switch near your bed.
shower. Have grab bars installed professionally.	Keep a phone and a list of emergency phone
Replace fixed shower head with handheld type.	numbers near your bed.
Put grab bars beside toilet .	
Install non-slip flooring throughout.	ENTRANCE WAYS
☐ Put one night-light in your bathroom and another	Keep clear of clutter.
in the hallway near the door.	Have a chair to sit on to change footwear.
Set your hot water temperature to no more than	
120°F (49°C). Always test the water temperature before getting into the tub or shower.	OUTSIDE
before getting into the tub or shower.	Keep all walkways, stairs and the driveway clear
KITCHEN	and well lit.
Put kitchen supplies where they are easy to reach.	Install outdoor lighting with motion sensors.
Put heavy items in the lower cupboards.	Put garden tools and snow shovels away.
Use a solid step stool with a safety rail for reaching high cupboards.	Report hazards in the community to your municipality, such as uneven sidewalks.
Wipe up spills right away so you won't slip.	Avoid walking on icy, slippery, or uneven ground.

GENERAL TIPS

Use a portable, cordless phone or a cell phone.

 Avoid dizziness by getting up slowly from a chair or bed.

Remove your reading glasses when you're not reading.

Keep your house well lit and use night lights throughout.

Take your time when moving. Don't rush to answer the door or phone.

Get help to do major chores like snow shovelling, raking leaves, mowing the lawn, painting.

See your health professional if you feel unsteady or have trouble walking. You may need to visit a physiotherapist or occupational therapist for advice, exercise, or an assistive device such as a cane or walker.

Use your assistive devices properly, as shown by your therapist

Pets like to stay close. Be careful not to trip over your pet or their toys.

Review your footwear. Wear low-heeled shoes that give good support.

Wear shoes both inside and outside of the house. Avoid wearing floppy slippers or stocking feet.

For advice or help, call your health or community information centre to find a fall prevention program in your area.

If your home is not as safe as it could be, now is the time to make the needed changes. Your safety depends on it!



Take Charge:

Make Your Home Safer Now!

	MAKE A LIST OF CHANGES TO MAKE IN YOUR HOME
1.	
2.	
3.	
4.	
5.	

Review this list to make an action plan. What small changes are easy to do right away? What changes will you need help with? Where can you find help?



Heal Your Bones:

What to do After a Fragility Fracture

A broken bone (fracture) caused by a slip, trip or fall (from standing height or lower), or from doing an everyday activity (like making a bed, coughing, lifting laundry) may be a sign of osteoporosis or low bone mass (weak bones).

What to expect after a fracture

Pain is your body's natural response to a broken bone and injury to the tissues around it. However, it is possible to have a fracture without pain. A bone can break in your spine and you may not know it.

If you have pain, your doctor may prescribe medication to reduce pain. Pain usually gets better as you heal.

In order for a broken bone to heal, it may need a cast, a brace, a splint, surgery or a combination of treatments. Your doctor will discuss the plans for your treatment and follow-up. Healing can take a couple of months or longer, depending on your health and the type of injury.

During this time, your doctor will give you instructions about rest and movement. You may need physiotherapy to learn to move safely and get back to your usual activities. If needed, your therapist will recommend assistive devices such as a cane or walker and show you how to use them safely.

Eating healthy foods that provide protein, calcium and vitamin D can help you recover and prevent another fracture.

For more information about what to do after a fracture and save movement, go to http://www.osteoporosis.ca/after-the-fracture/.

Keep Track of Your Broken Bones

WHEN DID IT HAPPEN? (YY/MM/DD)	WHAT BONE WAS BROKEN? (ex: hip, wrist, spine)	HOW DID I BREAK MY BONE?

After Healing is Complete

Many people heal completely and no longer have pain. However, some people have chronic pain, which continues long after their injury has healed.

DID YOU KNOW?

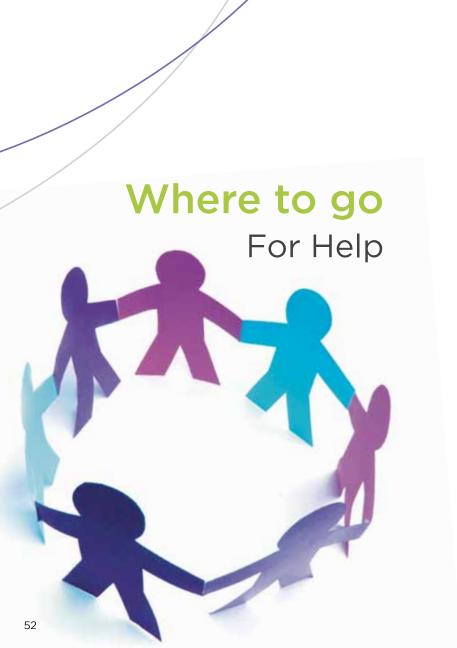
Controlling pain can help you manage your day-to-day activities and enjoy a better quality of life.



Keep track of when and where you feel pain and discuss it with your doctor:

DATE (YY/MM/DD)	DESCRIPTION OF PAIN	ACTIONS TAKEN

Review your chart to see if your pain is getting better, and what actions help ease your pain. If you cannot manage your pain or it gets worse, call your doctor.



Osteoporosis Canada

Osteoporosis Canada provides medically accurate information to patients, health professionals and the public. Services to individuals with osteoporosis and the public include free publications, a bilingual toll-free information line, website, educational programs and referrals to self-help groups and community resources.

National Office

301-1090 Don Mills Rd, Toronto, ON M3C 3R6

Website • www.osteoporosis.ca

Email • info@osteoporosis.ca

Toll-Free Information Line

English • 1-800-463-6842

French • 1-800-977-1778

The information line is open from 9 a.m. to 5 p.m. (ET), Monday to Friday.

The Information Line staff can:

- > Answer your questions
- > Send you printed material
- > Refer you to other helpful resources

The Canadian Osteoporosis Patient Network (COPN)

Join the thousands of Canadian men and women who are turning to COPN for information they know they can understand and trust.

Contact Osteoporosis Canada for your free membership.

As a COPN member, you will receive a newsletter with:

- The latest information about osteoporosis care and research
- Inspiring personal stories from others who are affected by and living well with osteoporosis
- Notifications of osteoporosis educational events in your community

Local Chapters

Your community may have a local Chapter of Osteoporosis Canada where you can get information about:

- > Educational and special events in your area
- > Self-help or support groups and local resources

Support Groups

Support groups give people in the same or similar situation opportunities to learn and support one another.

Find a chapter near you by calling Osteoporosis Canada toll-free at **1-800-463-6842** or going to **www.osteoporosis.ca**. Click on *About Us*, then *Chapters*.

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Aerobic Physical Activity

A rhythmic activity that you do for at least 10 minutes at a time continuously, and it increases your heart rate and makes your breathe harder than you usually do during your daily activities.

Assistive Devices

Assistive devices are tools or equipment that help you do your daily activities. Examples include canes, walkers, long-handled reachers and grab bars.

Balance Training

Balance training exercises involve moving your body weight or challenging your balance. They are an important part of your exercise program, as they help to prevent falls.

Bone Mineral Density Test

An x-ray that shows the density of your bones. It is used to measure bone loss.

Chronic Disease

Chronic diseases are long-term or lifelong diseases that:

- > develop slowly
- > often get worse over time
- > may be controlled, but rarely cured

Fall

Unintentionally coming to rest on the ground, floor or other lower level with or without injury.

Femoral Neck

The femoral neck is part of your thigh bone. It joins the shaft of the thigh bone with the "ball" at the top that fits into your hip socket.

Fracture/Broken Bone

A fracture is a break, crack, split or chip in your bone.

Fragility Fracture

A broken bone caused by a slip, trip or fall (from standing height or lower), or from doing an everyday activity (like making a bed). Sometimes called a low trauma fracture.

Health Professional

A person who helps in identifying, preventing or treating illness or disability. Examples: doctor, nurse practitioner, physiotherapist, dietitian.

Kyphosis

Exaggerated curve of the spine resulting in a rounded upper back.

Low Bone Mass

Low bone mass means that you have lower bone density than what is expected for a healthy person, but not low enough to be considered osteoporosis. This condition increases your risk of osteoporosis and broken bones.

Osteoporosis

Osteoporosis is a disease that causes bones to become thin and weak, leading to an increased risk of a broken bone. Osteoporosis is a chronic or long-term disease.

Posture Training

Posture training exercises aim to strengthen the muscles important for posture, such as those along your spine and around your shoulder blades. Posture training teaches you how to keep your neck, back and shoulder in good positions at all times. Good posture can prevent injury during your daily activities.

Self-management

Self-management refers to the actions you take for your health and well-being. This involves gaining knowledge, skills and confidence to manage your health, along with your health care professionals and community resources.

Spine Fracture

A spine fracture is a broken bone (vertebra) in

your spine, often called a compression fracture.

Osteoporosis is the most common cause of spine fractures. A spine fracture due to osteoporosis may not cause any symptoms right away. Later on, it may cause back pain, a loss of height or a stooped posture.

Strength Training

Strength training exercises make your bones and muscles work by lifting, pushing or pulling against a load. The load comes from a heavy object (such as weights) or something that provides resistance (such as an elastic band or water). As the difficulty of the exercise increases over time, your muscles and bones adapt and become stronger.

T-score

In a bone mineral density (BMD) test, your bones are compared with those of an average young adult. The results are reported as a T-score. Your T-score is a way to tell how strong your bones are.

10 Year Fracture Risk

Your risk of breaking a bone in the next 10 years.

Weight Bearing Exercises

Weight bearing exercises make your muscles and bones move against gravity, while on your feet. They help build bones and keep them strong. Examples include walking, dancing and stair climbing.

Osteoporosis Canada (OC), a registered charity, is the only national organization dedicated to serving people who have, or are at risk for, osteoporosis and osteoporotic fractures. The organization works to educate, empower and support individuals and communities in the risk reduction and treatment of osteoporosis.

The Ontario Osteoporosis Strategy represents the vision and coordinated efforts of many groups and professionals who work together throughout healthcare services to further the cause of osteoporosis prevention, diagnosis and management.

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This information contained in this booklet is not intended to replace medical advice. Users are advised to discuss their individual circumstances with their doctor.

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