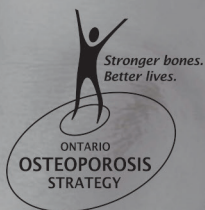


My BONE HEALTH Journal

Managing osteoporosis
for a full and active life



OSTEOPOROSIS
CANADA



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.

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.



“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.

This booklet provides you with charts that can be used to record information that will help you manage your bone health over time.

- You may wish to write directly in the booklet, or
- Photocopy the charts so that you can continue to use them on a regular basis, or
- You may decide to record your activities somewhere else, but still use these charts as examples.

DID YOU KNOW?

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

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.

Important contacts

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

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:
Phone Number:
Other:
Phone Number:
Other:
Phone Number:

My appointments

Date:	Time:
With:	
Date:	Time:
With:	
Date:	Time:
With:	
Date:	Time:
With:	
Date:	Time:
With:	
Date:	Time:
With:	

Questions to discuss with my health care team

1.
2.
3.
4.
5.
6.

Table of contents

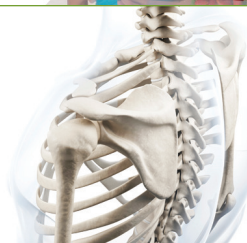
Take Charge of Your Health Make an Action Plan!

PAGE 10



Know Your Bones Fracture Risk Assessment

PAGE 14



Treat Your Bones The Importance of Medications

PAGE 20



Move Your Bones Exercise for Healthy Bones

PAGE 24





Feed Your Bones

Healthy Eating for Healthy Bones

PAGE 29



Protect Your Bones

Preventing a Fall

PAGE 36



Heal Your Bones

What to Do After a Fragility Fracture

PAGE 44



Where to Go for Help

PAGE 50



Commonly Used Terms

PAGE 54



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 have to 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 action-specific. 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 in achieving this goal?

1	2	3	4	5	6	7	8	9	10
I'M NOT READY			I THINK I CAN				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) around the block (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 chart like this:

Tracking My Action Plan		Comments
MON	Walked 20 minutes	Had a late dinner
TUE		
WED	Did not walk	Pouring rain
THU		
FRI	Walked 30 mins	
SAT	Walked 30 mins	
SUN		

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:

Have you had a Fracture Risk Assessment?

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?

Bone Mineral Density (BMD) test results are only **one** part of a fracture risk assessment.

Your Fracture Risk Assessment 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.

Do you know the difference between osteoporosis and osteoarthritis? If you are experiencing pain in your joints – knees, hips, feet and back – you may think you have osteoporosis. This pain is more likely due to osteoarthritis.

For more information about diagnosis and fracture risk assessment, visit www.osteoporosis.ca or call 1-800-463-6842.

Take Charge:
Track Your Fracture Risk

Record the results of your assessment in the chart below:

Date of BMD Test YY/MM/DD	Age	My BMD T-score	My Fracture Risk (Low, Moderate or High)

DID YOU KNOW?

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

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 2 cm ($\frac{3}{4}$ "") or more in height in the last year, or 6 cm ($2\frac{1}{2}$ "") 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.

Have your height measured every year

Record the results of your assessment in the chart below:

Date: YY/MM/DD	Height

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

Treat Your Bones:

The Importance of Medication

There are medications available to reduce the risk of fractures.
If you are at high risk of fracture, you need to be on a medication.

DID YOU KNOW?

Most osteoporosis medications help to build bone by slowing down bone loss, therefore reducing fracture risk.



Have you spoken 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.

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.

For more information about drug treatments, visit
www.osteoporosis.ca or call 1-800-463-6842.

Take Charge:
Keep track of your osteoporosis medications

Medication:	
Instructions: (i.e. how often; with or without food)	
Date Started:	Prescription Renewal Date:
Prescribing Doctor:	

Medication:	
Instructions: (i.e. how often; with or without food)	
Date Started:	Prescription Renewal Date:
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 by:

- Making your bones and muscles stronger
- Improving your balance, flexibility and coordination







Talk to your doctor before you start any exercise program

It's 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.

Doing weight-bearing 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.

It can be hard to start and keep to an exercise plan. Starting slowly and gradually increasing how often, how long and/or how hard you do your exercises will help.

Type of Exercise		Frequency
	<p>STRENGTH TRAINING Free weights, machines, exercise bands or body weight as resistance</p>	<p>At least 2 days per week</p>
	<p>POSTURE TRAINING Safe movements, awareness of position and posture (and back muscle strengthening)</p>	<p>Every day</p>
	<p>BALANCE TRAINING Tai chi, other exercises designed to challenge balance</p>	<p>Every day</p>
	<p>WEIGHT BEARING AEROBIC PHYSICAL ACTIVITY Walking, dancing, jogging, stair climbing, step aerobics, running</p>	<p>Most days (5 days or more per week)</p>

Take Charge: Your physical activity tracking sheet (for training)

Month/Year: _____

Goal for this month:

[illegible]

Think about your physical activity each week. What one small change could help you towards 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.
- Watch our videos on exercise and safe ways to do daily activities.
- Read After the Fracture for tips on managing pain and moving safely.

DID YOU KNOW?

People with osteoporosis, or at risk of fracture, can prevent bone loss, fractures and falls by combining specific types of exercise – strength training, balance and posture training, and weight bearing activity.



Feed Your Bones:

Healthy Eating for Healthy Bones

A diet rich in calcium is essential for healthy bones. Each meal should include a calcium-rich food.

Eating a variety of foods is good for your health, but there are specific foods that are especially beneficial for your bones.

Calcium

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.

Calculate your calcium

How much calcium do you need? See the following chart for how much you should be getting every day.

RECOMMENDED CALCIUM INTAKE PER DAY (mg)	
19-50 Years	50+ Years
1000	1200

Now that you know how much calcium you should be getting, the next step is to see if you are getting that amount. Osteoporosis Canada recommends that you obtain most, if not all, of your calcium from food. The following chart lists some examples of common calcium-rich foods you may already be consuming:

FOOD	PORTION	CALCIUM (mg)
Milk – 2%, 1%, skim	1 cup	300
Fortified* orange juice	1 cup	300
Fortified* almond, rice, soy beverage	1 cup	300
Yogurt – plain, 1-2% MF	¾ cup	295
Cheese – cheddar, edam, gouda	1 ¼” cube	245
Salmon, canned, with bones	½ can	240
Beans – white, canned	1 cup	191
Almonds	½ cup	180

* Check the label to ensure the beverage has added calcium

For a list of calcium content in more foods, please visit www.osteoporosis.ca or call 1-800-463-6842.

To see how much calcium you get in a day, visit Osteoporosis Canada’s calcium calculator at www.osteoporosis.ca

Take Charge:

Plan to get more calcium in your day

Plan which calcium-rich foods you will add to your day.
Remember your portion sizes!

	Breakfast	Lunch	Dinner	Snack
Sample	Yogurt - $\frac{3}{4}$ cup	Cheese (1 $\frac{1}{4}$ " cube) with salad	Milk - 1 cup	Almonds - $\frac{1}{2}$ cup
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Tips for getting more calcium

To help increase your calcium intake through food, try some of these ideas:

- Sprinkle grated cheese over pasta, salads and soups.
- Add some skim milk powder to casseroles, puddings, soups, omelettes, mashed potatoes or when making homemade hamburger patties.
- Use yogurt as a topping for desserts and soups.
- Use milk instead of water to make canned soups.
- Toss shredded kale into your mixed green salad.
- Mix toasted, slivered almonds or sesame seeds with your salads, or use it for coating on fish.
- Melt cheese over vegetables like broccoli and cauliflower.
- Use canned salmon or sardines including the bones finely crushed.
- Choose calcium-fortified orange juice, soy, almond, or rice beverages with your meals.
- Try Kefir (a fermented milk beverage).

If you are lactose intolerant, vegetarian or vegan, read the Nutrition section on our website for more information and tips on getting enough calcium.

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

Some individuals may continue to have some difficulty meeting their daily recommended calcium intake. If you are finding you are having this difficulty, talk to your health care provider about how to increase your intake or whether you should take a calcium supplement.



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.

Many Canadians do not get enough vitamin D because:

- There are very few food sources of vitamin D.
- 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.



What type of Vitamin D is best?

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

For more information on nutrition visit,
www.osteoporosis.ca or call 1-800-463-6842.

Protect Your Bones:

Preventing a Fall

MOST FALLS CAN BE PREVENTED

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.



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 experienced 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 falls 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

- ☐ Put handrails on both sides of all stairs.
- ☐ Keep stairs well lit.
- ☐ Don't leave anything on stairs that you can trip over.
- ☐ Put a non-skid surface on the top of each step.

BATHROOM

- ☐ Use non-skid mats and grab bars in tub and shower.
Have grab bars installed professionally.
- ☐ Replace fixed shower head with handheld type.
- ☐ Put grab bars beside toilet.
- ☐ Install non-slip flooring throughout.
- ☐ Put one night-light in your bathroom and another in the hallway near the door.
- ☐ Set your water temperature to no more than 120 °F (49 °C).
Always test the water temperature before getting into the tub or shower.

KITCHEN

- ☐ Put kitchen supplies where they are easy to reach.
- ☐ Put heavy items in the lower cupboards.
- ☐ Use a solid step stool with a safety rail for reaching high cupboards.
- ☐ Wipe up spills right away so you won't slip.

LIVING ROOM AND BEDROOMS

- ☐ Leave lots of space to move around.
- ☐ Don't use throw rugs.
- ☐ Move electrical cords so they are out of your way.
- ☐ Use sturdy furniture and lamps.
- ☐ Put a light switch near the entrance of your bedroom.
- ☐ Place a lamp or light switch near your bed.
- ☐ Keep a phone and a list of emergency phone numbers near your bed.

ENTRANCE WAYS

- ☐ Keep clear of clutter.
- ☐ Have a chair to sit on to change footwear.

OUTSIDE

- ☐ Keep all walkways, stairs and the driveway clear and well lit.
- ☐ Install outdoor lighting with motion sensors.
- ☐ Put garden tools and snow shovels away.
- ☐ Report hazards in the community to your municipality, such as uneven sidewalks.
- ☐ 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.

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.

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 on what to do after a fracture and safe movement, visit www.osteoporosis.ca or call 1-800-463-6842.

Keep track of your broken bones

When did it happen? (DD/MM/YY)	
What bone was broken? (ex: hip, wrist, spine)	
How did I break my bone?	
When did it happen? (DD/MM/YY)	
What bone was broken? (ex: hip, wrist, spine)	
How did I break my bone?	
When did it happen? (DD/MM/YY)	
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.

Take Charge:
Manage your Pain!

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

Date (DD/MM/YY)	
Description of pain	
Actions taken	
Date (DD/MM/YY)	
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.

Where to go for help



Osteoporosis Canada

Osteoporosis Canada provides medically accurate information to patients, healthcare 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 community resources.

National Office:

500-1200 Eglinton Ave E.

Toronto, ON M3C 1H9

www.osteoporosis.ca • info@osteoporosis.ca

1-800 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

Canadian Osteoporosis Patient Network (COPN)

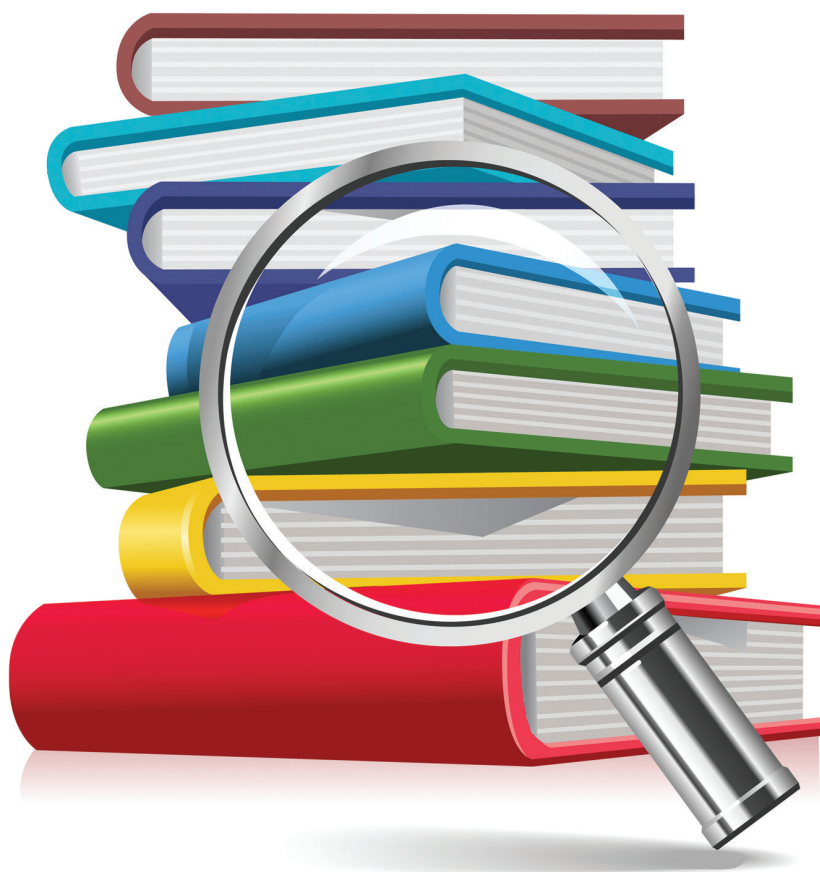
Join the thousands of Canadian men and women who are turning to COPN for information they know they can understand and trust.

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.
- Notifications of free Bone Matters webinars on topics of interest delivered by experts in osteoporosis.

Visit **www.osteoporosis.ca** for tools and resources
or call toll-free **1-800-463-6842** to find out what
local educational and/or special events are available in
your community.



Commonly Used Terms

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 you 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

A 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.

Fracture Risk Assessment

A fracture risk assessment tells you your risk of fracture in the next 10 years – low, moderate or high. This assessment uses bone mineral density test results and a number of other key factors.

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.

Osteoarthritis

Osteoarthritis is a disease of the joints and surrounding tissues. Osteoarthritis and osteoporosis are often confused because the words sound the same.

Osteopenia

Osteopenia is the term sometimes used to describe a person with a lower bone density than normal. However, it is not as low as osteoporosis. Osteopenia is not a diagnosis and the preferred term is Low Bone Mass (see above).

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 condition.

Posture Training

Posture training exercises aim to strengthen the muscles important for posture, such as those that run the length of your spine, or those that stabilize 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 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, the muscles have to become stronger to adapt to the new challenge.

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 one 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.

Osteoporosis Canada and the Ontario Osteoporosis Strategy would like to thank the following organizations for their support and contribution to the development of this publication: Active Living Canada, St. Michael's Hospital, South West LHIN Self-Management Program, Central East LHIN Self-Management Program, Stanford CDSMP.



Osteoporosis Canada

500-1200 Eglinton Ave E, Toronto, ON M3C 1H9

Registration Number: 89551 0931 RR 0001

www.osteoporosis.ca • info@osteoporosis.ca

1-800-463-6842

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

Copyright © 2018