

Osteoporosis in Elderly Women: A Retrospective Study of 20 Cases

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ABSTRACT

Introduction: Osteoporosis is a typical aging pathology. It is a diffuse disease of the skeleton characterized by a decrease in bone mass resulting in a high bone fragility and fracture risk.

Aim of the study: To improve the screening and the therapeutic strategy of this assignment especially in the geriatric population and to review the risk factors, the etiologies, the prevention and the treatment of osteoporosis in the elderly woman.

Patients and methods: A comparative retrospective study of 20 patients with osteoporosis and 20 patients with osteopenia older than 65 years were collected in external consultation of rheumatology in Jammel hospital over a period of 3 years.

Results: Average age of osteoporotic patients was 71.6 years. Average age at menopause for osteoporotic women was 59.2 years and was 52.1 years for osteopenic women. Low calcium and protein intake was found in 81% of osteoporotic patients and in 68% of osteopenic women. The pathologies potentially

inducing osteoporosis were type I diabetes, systemic lupus erythematosus and rheumatoid arthritis. The iatrogenic causes of osteoporosis were corticosteroids and chemotherapy. The fractures noted in patients with osteoporosis were: 1 femur fracture, 2 wrist fractures and 5 vertebral fractures. 70% of our osteoporotic patients and 40% of osteopenic patients had received calcium-vitamin D treatment. 42.3% of osteoporotic women had received bisphosphonates.

Conclusion: Beside osteoporosis risk factors, measuring BMD is reliable for screening the fracture's risk. In elderly patients with risk of osteoporosis, vitamin D and calcium supplementation in combination with bisphosphonates, regular physical activity and prevention of falling are fundamental measures to maintain mobility and improve quality of life.