



Newsletter - Ontario Osteoporosis Strategy

#Fractureprevention. Winter is here.

The Ontario Osteoporosis Strategy is improving the quality of care for Ontario's at risk seniors by preventing hip fractures and saving lives.

Lets start 2020 off with a resolution to stay connected. Keep in touch with all that is happening in Ontario around fracture prevention and reducing the risk of hip fractures. See the latest news, resources and information from partners within the province. ostestrategy.on.ca

Share and be engaged on twitter with your **#fractureprevention** stories, initiatives or ideas. Follow us and stay updated on twitter **@ostestrategyon**



Angela M. Cheung (@AngelaMCheung)

2019-10-27, 9:52 AM

We should do the same for [#fractureprevention](#). Winter is coming ([#flu](#) and [#fracture](#) season). How can we prevent both effectively and decrease Emerg visits? Challenge for [@dpepe88](#) [@OsteoUHN](#) [@OsteoporosisCA](#) [@OsteoStrategyON](#) [@GERAScentre](#) [@SinaiGeriatrics](#) [@KevinSmithUHN](#)



St. Michael's
Inspired Care. Inspiring Science.



In this issue:	Dr. Steve Richie	Dr. Judi Laprade honoured	Dufferin Area Family Health Team	The GRU at Parkwood Hospital
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Dr. Steve Richie

A Champion Retires



At the end of November, Dr. Steve Richie retired from his full-time orthopaedic surgeon practice in Brantford. It is a career he says has “been great and fabulous” and he leaves with some ambivalent feelings.

Dr. Richie became keenly aware of osteoporosis back in 1995 when he heard Rheumatologist, Dr. Rick Adachi speak at a conference in Newfoundland. Dr. Adachi predicted that if nothing is done to address osteoporosis and reduce the risk of osteoporotic fractures or ‘fragility’ hip fractures in particular, the resulting tsunami of fragility fractures would incapacitate the health care system across Canada. A few years later he heard Orthopaedic Surgeon, Dr. Earl Bogoch speak about the focus on osteoporosis at St. Michael’s Hospital. Following this, as the President of the Ontario Orthopaedic Association, Dr. Richie invited Dr. Bogoch to a meeting where an initiative was discussed to develop a program called “A Lucky Break”. The emphasis of the program was to address osteoporosis within Ontario. This led to the hiring of a co-ordinator, an information brochure being developed along with a tear-off pad focusing on the importance of vitamin D and calcium, which was used in fracture clinics to support patients connecting with their family physicians about their bone health.

In 2005 the Ministry of Health and Long Term Care launched the Ontario Osteoporosis Strategy (OOS). Working closely with Ravi Jain, Director of the OOS, Dr. Richie became an advisor to the OOS and identified orthopaedic surgeons at hospitals across Ontario who would become Champions for the Fracture Screening and Prevention Program (FSPP), through the OOS. He developed a job description for Orthopaedic Champions, provided support to the surgeons when the Strategy was in its initial stages and presented data/updates regarding the FSPP at the annual Ontario Orthopaedic Association meeting.

Dr. Richie developed a personal interest in Osteoporosis when his healthy, active wife was diagnosed after a Bone Mineral Density Test...he was absolutely surprised!

Dr. Steve Richie

A Champion Retires

Over the years Dr. Richie has noticed an increase in his patients' awareness of this 'silent killer'. He attributes this heightened awareness to increased information within the media as well as the topic of osteoporosis now being included in the curriculum for family physicians in Ontario. He mentioned that things are constantly changing in medicine and that it is important to keep 'moving forward' to address fractures and osteoporosis. He sees a new generation of orthopaedic surgeons who are tuned in to osteoporosis and fractures. He states that "anything we can do to decrease fractures is a good thing."

Dr. Richie plans to assist on surgeries a few times a month during his transition to full retirement. After which he plans to continue skiing and travelling. He thinks he will explore joining a gym and most importantly keep active so he "stays out of his wife's hair".

We extend our gratitude to Dr. Richie for his support and commitment of the Ontario Osteoporosis Strategy.



From left to right

Kate Harvey (Regional Integration Lead - Ontario Osteoporosis Strategy), Dr. Steve Richie, Ravi Jain (Director - Ontario Osteoporosis Strategy)

Southlake Regional Health Centre - TAP Clinic

Osteoporosis Community Education Event

The team of osteoporosis healthcare providers from The Arthritis Program (TAP) Clinic at Southlake Regional Health Centre presented an informative and interactive forum on Monday November 4th at the McConaghy Centre in Richmond Hill. This highly attended event received rave reviews from participants who learned about diagnosis, medications for osteoporosis, exercise and food ideas that can lead to stronger bones and strategies to increase quality of life.



From left to right

Dr. Edward Ng (Rheumatologist), Sue Charette (Occupational Therapist), Lorna Bain (Coordinator, The Arthritis Program), Sherry Hartnett (Kinesiologist), Diane Tin (Pharmacist), Cathy King Ward (Lived Experience Team Member), Eduardo Meneses (Fracture Prevention Coordinator, Ontario Osteoporosis Strategy)

missing from photo: Jordana Schonberger (Dietitian)

Quality Standards

Hip Fracture

Care for People With Fragility Fractures

Approximately half of all patients who suffer a hip fracture have already sustained a previous fracture— a ‘signal’ fracture – before breaking their hip. About 15% of hip fractures happen in patients who have already broken one hip. Hip fractures consume scarce orthopaedic resources. Osteoporotic hip fractures consume more hospital bed days than stroke, diabetes or heart attack. Click [here](#) to find out how Quality Standards are helping.

Dufferin Area Family Health Team (DAFHT) & Eramosa Physiotherapy Associates Partnership

team up to provide OP exercise programs to serve the Orangeville area

The Dufferin Area Family Health Team (DAFHT) and the Eramosa Physiotherapy Associates, have partnered to run two successful osteoporosis programs in the Orangeville area. The DAFHT is a multi-disciplinary team of health care providers supporting patients of more than 40 physicians in Dufferin-Caledon. The team consists of close to 50 providers including occupational therapists, chiropractors, mental health clinicians and more. Eramosa Physiotherapy Associates has been proudly serving the Orangeville community for the past 15 years and has been partnered with the DAFHT medical community for the past 5 years.

Several of the DAFHT providers, and Eramosa physiotherapists, have been BoneFit trained. BoneFit, a program offered through Osteoporosis Canada, trains healthcare and exercise professionals about safe movement, exercise, and modifications for individuals diagnosed with osteoporosis. The DAFHT's programming incorporates this training and utilizes resources and handouts from Osteoporosis Canada.

What is available through the Dufferin Area Family Health Team for the management of bone health?

Treasure Your Bones is a program for anyone with osteoporosis or at risk for osteoporosis. It includes two weekly 2.5 hour workshops where education is provided in a group setting by a registered dietician, a registered nurse, an occupational therapist, a physiotherapist, and pharmacist. The program is run four times per year and has reached close to 500 patients over the years offered.

After participating in the group, clients have the option to meet with any of the providers one-on-one to view their individual questions and needs.

OsteoFitness is the next step after participants have completed Treasure Your Bones, and includes three weekly 1 hour classes. The class includes exercise instruction and participation for bone health. The focus is on safe resistance training, balance training, and posture exercises. This class is situated at the Eramosa Physiotherapy Clinic and led by the physiotherapist and occupational therapist in a group setting. The program also runs four times per year and can accommodate 10 patients in each session. Participants will leave with personally modified exercises that are intended to support bone health and falls prevention. Many of these exercise and movement principles are put into day-to-day context and can be applied to other exercise programs and areas of life.

Dufferin Area Family Health Team (DAFHT) & Eramosa Physiotherapy Associates Partnership

team up to provide OP exercise programs to serve the Orangeville area

Occupational Therapy Assessments are offered on an individual basis as well. DAFHT clients can meet with an occupational therapist to review balance, home safety, discuss gait aids and equipment options. An occupational therapist can also help problem-solve areas of challenge and how to modify activities of daily living to make them safer and easier.

What Have People Said about the programs?

"What a great program- I learned so much and wish I had learned this sooner!"

"After talking with the pharmacist, I now have a better understanding of how to take my medications for osteoporosis"

"This program provided me with a lot of information I have never thought about before"

How can people access these programs?

Anyone who is rostered with a DAFHT physician has access to this large team of healthcare professionals. Clients can call in and self-refer, be referred by a family physician, or by another healthcare provider.

DAFHT clients diagnosed with Osteoporosis can simply call the DAFHT office or talk to a doctor about a referral to Treasure Your Bones.

For more information please visit www.DAFHT.ca



Katie Pistor, Physiotherapist at Eramosa Physiotherapy in Orangeville, Heidi Vanderhorst, Program Manager Dufferin Area Family Health Team (DAFHT) , Katelyn Hunter and Maryann Ashley, Occupational Therapists DAFHT.

Knowledge Translation

Discoveries from the Fracture Screening Prevention Program

The evaluation team at St. Michael's hospital engages in knowledge translation and the promotion of findings from the Fracture Screening and Prevention Program through publications in peer-reviewed scientific journals and presentations at conferences.

Multiple simultaneous fractures are associated with higher all-cause mortality in the Fracture Screening and Prevention Program

As part of a program evaluation of the Fracture Screening and Prevention Program (FSPP), administrative data at ICES (formerly known as the Institute of Clinical Evaluative Sciences) was used to examine mortality rates of the patients enrolled in the FSPP. The association between the index fracture type and the risk of death at five years follow up was also examined, as information on this topic was lacking.

There were 6,543 patients in the analysis, all of whom were confirmed to have sustained a fragility fracture defined as a fracture that occurred spontaneously or following a minor trauma. The majority of the patients in the analysis were female (82%), 68 years of age on average, with the most common index fracture being the distal radius fracture (36%).

The overall unadjusted mortality rate was 14.8% five years after program enrollment: those with a hip fracture had the highest mortality rate (31%), followed by those with multiple (simultaneous) fractures of different sites (23.4%) and a proximal humerus fracture (17.8%). See Table 1 for details.

index fracture type	Total number of patients with index fracture	death within 1 year		death within 2 years		death within 5 years	
		n	%	n	%	n	%
All	6,543	177	2.7%	365	5.6%	969	14.8%
Distal Radius only	2,372	31	1.3%	89	3.8%	267	11.3%
Ankle only	1192	22	1.9%	37	3.1%	106	8.9%
Hip only	630	43	6.8%	78	12.4%	196	31.1%
Proximal Humerus only	997	44	4.4%	78	7.8%	177	17.8%
Multiple fractures	214	8	3.7%	17	7.9%	50	23.4%
All other fractures	1138	29	2.5%	66	5.8%	173	15.2%

Knowledge Translation

St. Michael's Hospital

Accounting for other factors that could impact mortality (age and sex), the study found that multiple fractures patients were at the highest risk of dying, followed by those with a hip fracture, and a proximal humerus fracture, all relative to those with a distal radius fracture which was the most common fracture in our sample. This, along with previous research showing that patients presenting with multiple fractures have high refracture rates, suggests that this group is at high, previously unrecognized, risk and deserving of special attention.

Reference: Sujic R et al. (2019) Multiple simultaneous fractures are associated with higher all-cause mortality: results from a province-wide fracture liaison service. Osteoporos Int. doi: DOI 10.1007/s00198-019-05207-z [Epub ahead of print]



BEYOND THE BREAK

A Virtual Education Series for Health Professionals

Beyond the Break is an inter-professional and continuing education series for health professionals across Ontario. Improve your knowledge on: emerging best practices, screening, diagnosis, treatment and management of osteoporosis. Find out more [here](#).

Distinquished Alumni - Dr. Judi Laprade

School of Rehabilitation Therapy, Queens University

Dr. Judi Laprade, Bone Fit Lead Trainer and Associate Professor at the Department of Surgery at the University of Toronto, was recently awarded the School of Rehabilitation Therapy Distinguished Alumni Award from Queen's University. The Award recognizes one graduate annually from each of the Physical Therapy, Occupational Therapy, and Rehabilitation Science programs who has made exceptional contributions to their chosen profession, field and/or community.

Since 2010, Dr. Laprade has been a Lead Trainer and the Content Lead for Bone Fit™ with Osteoporosis Canada and the Ontario Osteoporosis Strategy, running over 60 workshops and training 1600+ health and fitness professionals. Bone Fit™ is an evidence-informed exercise training workshop for healthcare professionals and exercise practitioners who work with clients with osteoporosis. With Dr. Laprade at the helm and support from the co-trainers, Bone Fit™ has become a well recognized program in exercise across the country.

Dr. Laprade received her degree in Physical Education at the University of Western Ontario and then went on to complete her Physical Therapy degree, MSc and PhD in the Department of Anatomy at Queen's University. She has previously taught anatomy and physical therapy courses at Queen's University and The Hong Kong Polytechnic University. Currently, she is the Anatomy Course Director for the kinesiology & physical education, dentistry and physical therapy programs.

For more information on this award, click [here](#).



Effect of Implementation of a Standardized Hip

Fracture Pathway on Osteoporosis Care on a Geriatric Rehabilitation Unit

Each year in London Ontario, there are approximately 400 fragility hip fractures, acutely cared for across two teaching hospital sites. Currently, London does not have a citywide fracture liaison service addressing the needs of hip fracture patients. As such, most patients with hip fracture were not getting investigated or treated for osteoporosis. However, a quarter of hip fracture patients are admitted to the geriatric rehabilitation unit (GRU) at Parkwood Hospital to undergo post fracture rehabilitation. The GRU is a 30- bed unit that admits patients aged 65 and over, and is staffed by a team of geriatricians, a nurse practitioner, nurses and allied health professionals. Approximately 50% of admissions are patients who have suffered a hip fracture. The average length of stay in the GRU is 28 days which provides an ideal setting for fracture screening and secondary fracture prevention.

The introduction of a fracture pathway on osteoporosis sought to improve osteoporosis care in patients with fragility hip fractures by developing and implementing a sustainable hip fracture pathway in the GRU. The goal was to increase the rate of osteoporosis treatment by 30% in eligible patients.

Read more about the incredible work that has been done by the GRU project at Parkwood Hospital [here](#).



Back Row standing Left to Right: Christine Waite, Katie Warmington, Tammy Rice, Marcelina Almario, Dallas Miller, Rob Mackenzie, Lesa Duckworth, Endocrine Resident, Erin Watson, Michelle Campbell, Cheryl MacDonald. Front Row Sitting Left to Right: Christine White, Emily VanBommel, Tammy Quaite, Mrs. Fournier, Mr. Fournier, Dr. Jenny Thain

A Broken Bone is Life-Changing

John Winslow's story

John Winslow was an engineer who loved getting the job done. He enrolled in McMaster University's Divinity Program and went on to become a Reverend. A resident of Hamilton, he believed in giving back to the community and spent his leisure time swimming, skiing and playing tennis, often teaching neighbourhood kids how to love and enjoy sports.

All this changed in the summer of 2017. John had just stepped off the local bus in front of his home. As the bus turned the corner, John lost his balance and fell on the curb, injuring his elbow. He walked home thinking he had suffered a minor bruise from his fall.

When the pain in his elbow became unbearable, a friend drove John to St. Joseph's Healthcare, Hamilton, where emergency care doctors confirmed that John had broken his elbow. John had to have surgery to fix his broken elbow, which took several months to heal.

A year later in July 2018, it was déjà vu for John. He fell on the curb after stepping off his local bus, thereby breaking the same elbow. "I felt discouraged that I had not learnt anything from my first injury. It was the same kind of break, the same fall and the same elbow. My father often told me, knowledge isn't any good unless it is between your ears. And, I wish that after my first fracture, I would have remembered my father's words of wisdom," lamented John.

Follow John's journey [here](#).



John Winslow 2019

TOO FIT TO FALL OR FRACTURE: ONE PAGE GUIDE

This one page guide is packed with useful information to get your patients thinking about ways they can safely and effectively exercise.

See expert recommendations along with real life examples of what those at risk can do and what you should avoid.

[DOWNLOAD THE ONE PAGE GUIDE](#)



An evidence-informed exercise training workshop, designed for healthcare professionals and exercise specialists to provide training on the most appropriate, safe and effective methods to prescribe and progress exercise for people with osteoporosis.



Interactive Practical Learning



Learn the most recent recommendations on reducing fracture risk



Emphasize safety in your exercise program

BASICS
CLINICAL

Aimed at exercise and fitness professionals working in the community with uncomplicated osteoporosis clients | \$200

Developed for rehabilitation professionals working in a clinical environment with simple or complex osteoporosis clients | \$400

All registrations include a light breakfast, lunch, free t-shirt (Basics) or foam roller (Clinical).

To register, visit www.benefit.ca



2020

CHATHAM

MAR 7-8

KINGSTON

MAR 28-29

Community Connections

-Mackenzie Health Fracture Clinic staff



FOLLOW US ON TWITTER TO STAY CONNECT WITH OUR EFFORTS AROUND THE PROVINCE

@OSTEOSTRATEGYON

Contact your Regional Integration Lead (RIL)

RILs cultivate partnerships in communities across Ontario to integrate fracture prevention pathways and establish bone health educational collaborations. They develop and disseminate tools and resources for healthcare professionals, patients and caregivers.

www.osteostategy.on.ca

Look for the next issue of Fracture Link in June 2020.

If you would like to be featured in the upcoming issue of Fracture Link please contact Marq Nelson mnelson@osteoporosis.ca 1 800 463-6842 ext 2318

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