

## Asian Americans at High Risk for Brittle Bones

**M**ay, Osteoporosis Month, is a time to remember the importance of taking care of our bone health. Asian Americans are at high risk of brittle bones.

Millions of Asian Americans believe that getting shorter as we age is a natural part of life. Unfortunately, it's not. Instead, shrinking of height is a symptom of osteoporosis, a condition also known as brittle bone disease.

According to the National Osteoporosis Foundation, 10 million people — 8 million of them women — have osteoporosis. Within that population, 20 percent are of Asian descent. An estimated 52 percent of Asians have low bone mass. Research has shown that women who are thin and have a small stature are most susceptible to the disease.

The most common complication of osteoporosis is a vertebral compression fracture—a painful break in the

spine that could result from a simple twist or bend.

“Many times, patients with acute vertebral compression fractures cannot cough or breathe deeply without experiencing excruciating pain,” said David Schultz, MD, an anesthesiologist, interventional pain management specialist and medical director of MAPS Medical Pain Clinics in Minneapolis.

“The danger is many people don't realize they have osteoporosis until a fracture occurs,” Schultz added. “Worse yet, many patients go undiagnosed, thinking their back pain is just a part of aging.” Schultz believes no patient should live with the resulting severe or persistent pain.

Vertebral compression fractures occur when bone tissue inside the vertebrae breaks and then collapses. People may lose height and develop a hunchback appearance, which is sometimes called “dowager's” or “widow's” hump.

Pressure on the spinal cord may lead to numbness, tingling or weakness.

Left untreated, patients experience a loss of mobility. “Many are bed-ridden, which could result in blood clots and pneumonia,” Schultz explained. The longer the pain lasts, the greater likelihood of a downward spiral effect, impacting the physical, social, and psychological aspects of a person's life.

Schultz recommends immediate evaluation for a suspected spinal fracture. Sometimes, conservative options such as pain medication, anti-inflammatory drugs, bed rest, and external bracing will work. But if they fail, Schultz says patients should consider a proven and safe treatment called percutaneous vertebroplasty, which brings more immediate pain relief.

This minimally invasive, outpatient procedure involves a small puncture through the skin with an access needle. Specially formulated acrylic bone cement is injected into the fractured vertebrae filling the space within the bone. The needle is removed and the cement hardens quickly,

strengthening the vertebra. Vertebroplasty is performed with x-ray guidance.

“From the procedure room to the recovery room, patients say they feel dramatically better,” Schultz said. Studies have shown patients who undergo vertebroplasty experience 90 percent or better reduction in pain within 24 hours after the procedure. Complications are rare (less than one percent), but risk factors include infection, cement leakage, bleeding, spinal cord compression and paralysis.

To prevent osteoporosis, Schultz suggests eating calcium-rich foods, participating in weight-bearing exercises and avoiding smoking. He also recommends women 50 and older get a bone density scan to assess their risk of osteoporosis. Asian Americans should request the test at a younger age.

To learn more about treatments for vertebral compression fractures and to locate a physician who specializes in vertebroplasty, visit [www.fracturerelief.com](http://www.fracturerelief.com). ■

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