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THE EFFECTIVENESS OF GLUCOCORTICOID-INDUCED OSTEOPOROSIS PREVENTION IN POLYMYALGIA RHEUMATICA PATIENTS.

Tara Swami and **Dr. Catherine Molloy**
University College Cork, Ireland

Studies indicate that <50% of Polymyalgia Rheumatica (PMR) patients receive glucocorticoid-induced osteoporosis (GIOP) prevention when nearly all should be prescribed bone protective therapy (BPT) according to current guidelines. Our objective is to determine if PMR patients in Cork are adequately protected from GIOP by examining bone densitometry (DXA) scan results, BPT use, and adherence to guidelines. PMR patients with a documented history of glucocorticoid use who underwent a DXA scan at CUH from 01/01/2016 and 27/10/2017 were included in the analysis. Patient demographic information, use of BPT, and DXA T-scores were obtained from chart review. 153 patients were identified, of whom 69% were female. 73 (47.7%) were taking BPT consistent with current guidelines and 42 (27.5%) were not taking any BPT. At the most recent DXA scan, 42 (27.5%) had normal BMD, 84 (54.9%) were osteopenic, and 27 (17.6%) were osteoporotic. The mean T-score of patients receiving BPT, -1.76, is significantly lower than the mean T-score of patients

not receiving BPT, -1.41 (p=0.04). In a regression analysis, BMI and BPT were significantly associated with osteoporosis or osteopenia (p=0.007 and p=0.049 respectively). In 91 individuals who underwent ≥ 2 DXA scans, patients not receiving bisphosphonates were more likely to have BMD loss over time (p=0.022). Despite guideline recommendations, many patients are not prescribed adequate BPT, demonstrated by a high rate of osteoporosis and osteopenia. The results suggest that PMR patients in Cork are not optimally protected from GIOP, uncovering an opportunity to improve the current management of PMR.

Biography

Tara Swami is a final year medical student at University College Cork in Ireland. She completed a Bachelor of Science at McGill University in Montreal, Canada and a Master of Biotechnology in Toronto, Canada and has a keen interest in Rheumatology.

114109735@umail.ucc.ie