

MDS Alert

Best Practices: Osteoporosis Is A Major Red Flag For Fracture Risk ... But Is It Flying In Section I?

Study shows shortfalls in diagnosing, treating this crippling disease.

When you see an osteoporosis diagnosis, you immediately know a resident is much more likely to break a bone as the result of a fall or even routine movement.

Yet facilities may not be capturing this major risk factor on the MDS or in the medical records, according to a study by the **New York Association of Homes & Services for the Aging.**

Diagnostic deficit: When NYAHSA researchers looked at osteoporosis treatment in New York and Pennsylvania facilities, they found only about 17 percent of residents had osteoporosis coded in Section I of the MDS. Of that 17 percent of residents, 28 percent were female, and 6 percent, male.

The real numbers: About 85 percent of frail elderly women in nursing homes have osteoporosis, as do about 20 to 30 percent of men, says **Colene Byrne, PhD**, outcomes researcher for NYAHSA.

"We know that some known diagnoses might not be coded on the MDS," she adds. "But when we gathered additional data from a sample of 17 nursing homes and linked it to the MDS, "we found that 36 percent of females had the diagnosis" and 8.5 percent of males, reports Byrne.

In the study, only 3.5 percent of the residents were taking antiresorptive medications, such as bisphosphonates, which studies show are highly effective in preventing falls and fractures, says **Christie Teigland, PhD**, director of health informatics research for NYAHSA/EQUIP for Quality.

And only 10.5 percent were receiving calcium and vitamin D. Thus, 86 percent of the residents were getting no treatment at all.

Also of concern: About 20 percent of the long-term female residents who had low body mass but no diagnosis of osteoporosis in Section I suffered a fracture at some time during their nursing home stay.

Take-away point: Any fracture should be a red flag for osteoporosis, says Teigland.