In Men With Osteopenia, 3-Year DXA Unnecessary

BY CAROLYN SACHS
Contributing Writer

HONOLULU — Men diagnosed with osteopenia through dual-energy x-ray absorptiometry are unlikely to have a change in diagnosis at a 3-year follow-up DXA, according to a study presented at the annual meeting of the American Society for Bone and Mineral Research.

"The interval for a follow-up bone density should be lengthened, or perhaps the repeat DXA should not be done unless there is an additional risk factor noted," wrote Dr. Robert A. Adler of the endocrinology section of McGuire Veterans Affairs Medical Center and Virginia Commonwealth University, Richmond, and colleagues.

The researchers followed 78 men with osteopenia (T score of lumbar spine, femoral neck, total hip, total forearm or distal 1/3 forearm between –1 and –2.4) from a baseline DXA test through follow-up DXA testing an average of 998 days later.

The mean age and weight of the patients at baseline were 70.7 years and 76.4 kg, respectively.

All of the men had been referred for an initial DXA test after a screening program using the Osteoporosis Self-Assessment Tool had found them to be at increased risk for osteoporosis.

Mean percent changes in bone mineral density (BMD) from baseline to follow-up were 1.8% for lumbar spine, –0.4% for femoral neck, –0.7 for total hip, –1.1 for 1/3 radius, and –1.6 for total forearm.

"The BMD changes were minimal, approximately plus or minus 2%," the researchers noted, and affected diagnosis very rarely: Only one patient started therapy for osteoporosis after the follow-up DXA test because of a significant change in BMD.

Although it was recommended upon diagnosis with osteopenia that the patients take calcium and vitamin D supplements, only about one-fourth to one-third actually received the supplementation after the baseline DXA.

"After the second DXA, an additional 17 men were prescribed supplements," the researchers pointed out.

Although these results suggest that a second DXA test may encourage clinicians to prescribe such preventive measures as calcium and vitamin D supplements for their patients, "there should be cheaper ways to improve clinician behavior," the researchers suggested.

Dr. Adler stated that he had no conflicts of interest. ■

Vegans Appear To Have Good Bone Health

HONOLULU — Though vegans do not eat dairy, they have surprisingly good bone health, according to results from a study presented at the annual meeting of the American Society for Bone and Mineral Research.

Heather J. Hinkley, Ph.D., of the British College of Osteopathic Medicine, in London, recruited 60 white females. Age ranged from 20 to 44 years, and all had been vegan for a minimum of 5 years. Exclusion criteria included use of hormone therapy, use of corticosteroids or thyroxine for more than 6 months, onset of menopause before age 45, lactation in the previous year, presence of rheumatoid arthritis, or previous osteoporosis-related fracture.

Broadband ultrasound attenuation of the calcaneum was examined for all women to assess bone mineral density. The results were compared with ultrasound attenuation data on 110 age-matched white female omnivores.

Though the vegan women had a slightly lower mean ultrasound attenuation, the difference was not significant. Weight also was not significantly different in vegan women, and no significant difference in body mass index was seen. There was no link between the duration of the vegan diet and ultrasound attenuation results.

The researchers observed that 66% of the vegans took calcium supplements, which may have benefited their bone density.

In addition, a lack of dietary animal protein in the vegan's diet may actually benefit the acid/base balance, resulting in less movement of bone mineral and decreasing calcium excretion, preserving bone health and integrity, they suggested.

—Greg Muirhead