



Osteoporosis Is A Male Disease Also

With renewed interest in the diagnosis and treatment of osteoporosis in women, we should not lose sight of the fact that the disease also affects men. One particular part of the male population that is at increased risk of developing osteoporosis are men with chronic obstructive pulmonary disease (COPD). The problem is even worse if they take inhaled or oral cortisone type preparations (corticosteroids).



Pulmonary disease specialists who treat COPD are very much aware of the problem and feel that these men must be screened for osteoporosis.

Research has been conducted on several groups of men recording bone mineral density measurements using dual energy x-ray absorptiometry (DEXA).

Even male patients with COPD who did not take corticosteroids were found to have increased risk of osteoporosis.

Patient physical activity probably has something to do with the problem, but cannot explain it fully.

These patients are also frequently chronically underweight and it was noted that being 10% under normal body weight increased the risk for bone loss two fold.

Even without COPD, osteoporosis affects one third of all men age 75 and over, according to the National Osteoporosis Foundation. The Foundation considers that one out of five osteoporosis patients is male.



Osteoporosis is responsible for 300,000 hip fractures each year in the United States. Hip fractures occur two or three times more frequently in osteoporotic women than in osteoporotic men. Another statistic is that twice as many men as women die within a year of sustaining a hip fracture. The reason for this is poorly understood at this time.

More study needs to be done on the development of treatment therapies for osteoporotic men. Unfortunately, the problem of osteoporosis in men has received only a small fraction of the attention that the disease has received in women.



Smoking Increased Risk of Osteoporosis in Men

It has been established that smoking increases the risk of osteoporosis in women. The International Osteoporosis Foundation reveals that smoking also accelerates the erosion of men's bones, including young men.

In Sweden, 1,000 men ages 18 to 20 were given bone mineral density tests. It was found that smokers had a lower bone mineral density in the spine, hip and body as a whole than non-smokers.

It has also been noted, that second hand smoke results in lower bone density.

The most significant effect was found in the hip, which had the largest decrease in bone mineral density.



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