

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/frontlines-osteoporosis/optimizing-bone-health-in-older-women-exercise-strategies-to-reduce-fracture-risk/32334/>

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Optimizing Bone Health in Older Women: Exercise Strategies to Reduce Fracture Risk

Announcer:

You're listening to *On the Frontlines of Osteoporosis* on ReachMD. On this episode, we'll hear from Dr. Karen Kemmis, who's a board-certified clinical specialist in geriatric physical therapy and an instructor in the Doctor of Physical Therapy program at Upstate Medical University. She'll be sharing her insights on exercise recommendations for the prevention and treatment of osteoporosis. Here's Dr. Kemmis now.

Dr. Kemmis:

When I work with someone who is in the premenopausal or postmenopausal years, there's a few categories that I want to focus on when it's related to reducing the risk of fractures. So the first thing is exercises that can increase or help to maintain bone density. Another area is to help posture and safe body mechanics. And then the third area is to work on balance to decrease risk of falls. Specific to increasing bone density, there are two main categories of exercises that help with that, one being weight-bearing impact style exercises and the other one being resistance or strength training exercise. Both of these load the bone, applying extra stress so the bone can respond by getting stronger.

When trying to consider if low impact or high impact will be reasonable for an individual, we try to aim for the highest impact that won't cause problems. There's two areas to consider when thinking about this. One is the risk of a fracture, and the other is risk of irritating an injury. So, for example, if somebody says that they have arthritis in their knee or they have problems with their hip or their feet, we may need to limit the amount of impact to not exacerbate those injuries. When looking at fracture risk, we need to look at several different things. Certainly, the bone density test gives us some information, but that's not all of it, because that looks at quantity of bone, not the quality of bone, so then we delve into some of their history. Have they had a fracture that was brought on by low or no trauma? Have they had some medical issues that would increase their risk of having challenges with their bones, such as rheumatoid arthritis? Do they need to take steroids? Things like that would increase fracture risk, and then look at what their current activities are and try to increase, but incrementally. So let's say somebody is walking through their daily life and they're not at high risk of fracture. They might move into doing some running or some step aerobics. And then if they're tolerating that well with no problems, then maybe they move into something that is higher impact, like jumping rope or something like that. So increasing and seeing how the body tolerates it, making sure there's no increase in fractures as time goes on.

Announcer:

That was Dr. Karen Kemmis discussing the role of exercise in osteoporosis prevention and management. To access this and other episodes in our series, visit *On the Frontlines of Osteoporosis* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!