

Osteoporosis Treatment

Whom to Screen

All women by age 65

All men over age 70

Post-menopausal (PM) women and men age 50+ with risk factors

Lifestyle & Nutrition Interventions

- For a T-score -2.5 or less, fragility fracture or an Elevated FRAX*
- Re-check BMD 1-2 years after starting medication therapy and then every 2 years**
- Treatment continuation decision at 5 years

Reference prices taken from Lexicomp August 2019 and are subject to change.

*Adapted from AACE/ACE 2016 Postmenopausal Osteoporosis Treatment Algorithm

**American Society of Consultant Pharmacy recommendation; American College of Physicians recommends waiting until 5 years before re-checking BMD.

Assessment Tools

Central DXA X-ray

This is the gold standard. A DXA is not needed post-fragility fracture, the fracture is evidence of osteoporosis.

FRAX®

Fracture Risk Assessment Tool

<https://www.sheffield.ac.uk/FRAX/tool.aspx?country=9>

No Fragility Fracture and No Risk Factors

Alendronate (Fosamax 35mg)
\$82.24/month

Risedronate (Actonel 150mg)
\$271.19/month

Zoledronic Acid (Reclast)
\$1,004.00/injection
Prevention: Every 2 years

Denosumab (Prolia)
\$1,462.87/6 months

Diagnostic Criteria

Osteopenia

T-score: -1 to -2.5

Osteoporosis

T-score: -2.5 or less

Fragility fracture

Osteopenia + elevated FRAX (10-year probability $\geq 3\%$ for hip fracture $\geq 20\%$ for major osteoporotic fracture)

Fragility Fracture or Risk Factors

Alendronate (Fosamax 70mg)
\$81.80/month

Risedronate (Actonel 150mg)
\$271.19/month

Zoledronic Acid (Reclast)
\$1,004.00/injection
Treatment: Yearly

Denosumab (Prolia)
\$1,462.87/6 months