

MULTIMORBIDITY IN WOMEN WITH OSTEOPOROTIC FRACTURES IN THE REPUBLIC OF BELARUS

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P05

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Key words: *low-energy fracture, osteoporosis, multimorbidity*

Introduction. Most people with osteoporosis have multimorbidity, but not of them have fractures. The increasing risk of the fracture could be connecting with some chronic disease.

Aim of the Study. The objective of this study was to

define the odds ratio for low-energy fractures for women aged over 50 with difference chronic diseases.

Materials and Methods. The study protocol included the data about chronic diseases diabetes mellitus (DM), myocardial infarction (MI), any cases of cancers, GI ulcers, stroke, COPD, heart failure (HF) and rheumatoid arthritis (RA). The low-energy fractures of forearm, hip fractures and spine was taking account for all female patients aged over 50.

Results. During the research study it was revealed 416 previous low-energy fractures of typical localization among 1533 women with osteoporosis. According to the results of the statistical analysis in patients with fractures of the most frequent combination of osteoporosis and COPD (OR=5.98; 95% CI 2.72-12.60; $p<0.001$), RA (OR=4.11; 95% CI 2.53-6.64; $p<0.001$), HF (OR=2.47; 95% CI 1.70-3.58; $p<0.001$), stroke (OR=2.40; 95% CI 1.46-3.95; $p<0.001$), DM (OR=1.64; 95% CI 1.14-2.39; $p<0.05$) and GI ulcers (OR=1.46; 95% CI 1.07-2.01; $p<0.05$). There are now significant differences between groups with or without fractures if patients had a previous history of MI (OR=1.27; 95% CI 0.68-2.46; $p=0.594$) and any localization of cancer (OR=1.08; 95% CI 0.71-1.67; $p=0.818$).

Conclusions. The presence of some chronically disease in osteoporotic patients may increase the risk of subsequent low-energy fractures in future. These results should be considered for planning strategies antiosteoporotic therapy.

P05

WIELOCHOROBYWOŚĆ U BIAŁORUSKICH KOBIET ZE ZŁAMANIAMI OSTEOPOROTYCZNYMI

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Słowa kluczowe: złamanieiskoenergetyczne, osteoporoza,
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