

L54 BONE MINERAL DENSITY IN POSTMENOPAUSAL WOMEN WITH OSTEOPOROTIC FRACTURES

III Środkowo Europejski Kongres Osteoporozy i Osteoartrozy oraz XV Zjazd Polskiego Towarzystwa Osteoartrologii i Polskiej Fundacji Osteoporozy, Kraków 24-26.09.2009

Streszczenia:

Ortopedia Traumatologia Rehabilitacja 2009, vol 11 (Suppl. 2), s:113.

L54

BONE MINERAL DENSITYIN POSTMENOPAUSAL WOMEN WITH OSTEOPOROTIC FRACTURES

Povoroznyuk V.V., Vayda V.M., Dzerovych N.I.

Institute of Gerontology AMS Ukraine

Ukrainian Scientific-Medical Centre for the Problems of Osteoporosis

Kyiv, Ukraine

This research is aimed at studying the bone mineral density among postmenopausal women with osteoporotic fractures.

Object. The total of 160 postmenopausal women 45–79 years old (average age – $63,4 \pm 0,7$ years; average duration of postmenopausal period – $14,4 \pm 0,7$ years) were examined. Patients were divided into two groups: group A – women ($n=100$, average age – $63,2 \pm 0,9$ years) without osteoporotic fractures, group B – women ($n=60$, average age – $65,5 \pm 1,2$ years) with osteoporotic fractures in their anamnesis.

Methods. The questionnaire; measurement of anthropometrical characteristics (height, mass, body mass index); bone mineral density (BMD), T- and Z-scores of the spine (L1–L4), hip (femoral neck, trochanter and total femur), and forearm (ultradistal, midforearm) were determined by means of Dual-energy X-ray absorptiometer „Prodigy” (GE Medical

systems, 2005).

Results. All indexes of different skeletal areas measured by DXA in postmenopausal women with osteoporotic fractures were significantly lower ($p<0,001$) compared with the data of women without osteoporotic fractures: total body – BMD: $0,999\pm0,015$ g/cm² and $1,097\pm0,010$ g/cm², T-score: $-1,59\pm0,18$ and $-0,34\pm0,12$, Z-score: $-0,81\pm0,15$ and $-0,06\pm0,09$; spine (L1–L4) – BMD: $0,909\pm0,023$ g/cm² and $1,094\pm0,017$ g/cm², T-score: $-2,26\pm0,20$ and $-0,78\pm0,14$, Z-score: $-1,18\pm0,18$ and $-0,02\pm0,13$; femoral neck – BMD: $0,780\pm0,016$ g/cm² and $0,886\pm0,014$ g/cm², T-score: $-1,88\pm0,11$ and $-1,09\pm0,01$, Z-score: $-0,59\pm0,10$ and $-0,05\pm0,09$; trochanter – BMD: $0,696\pm0,017$ g/cm² and $0,819\pm0,016$ g/cm², T-score: $-1,35\pm0,15$ and $-0,36\pm0,12$, Z-score: $-0,42\pm0,14$ and $0,33\pm0,11$; total femur – BMD: $0,839\pm0,019$ g/cm² and $0,968\pm0,016$ g/cm², T-score: $-1,29\pm0,16$ and $-0,27\pm0,12$, Z-score: $-0,33\pm0,13$ and $0,45\pm0,11$; ultradistal forearm – BMD: $0,299\pm0,008$ g/cm² and $0,352\pm0,08$ g/cm², T-score: $-2,12\pm0,20$ and $-0,77\pm0,19$, Z-score: $-0,74\pm0,21$ and $0,39\pm0,18$; midforearm – BMD: $0,562\pm0,013$ g/cm² and $0,648\pm0,010$ g/cm², T-score: $-2,13\pm0,18$ and $-0,96\pm0,12$, Z-score: $-0,69\pm0,16$ and $0,18\pm0,12$, accordingly.

Conclusion. Lowbone mineral density of different skeletal areas is a significant predictor of osteoporoticfracturesin postmenopausal women.