OUTSTANDING HOSPITALS DON’T SIMPLY TREAT FRAGILITY FRACTURES – THEY PREVENT FRACTURES FROM RECURRING.

THE BEST HOSPITALS OWN THE BONE.
Osteoporosis Epidemic – Fragility Fractures:

Represent a Significant Societal Problem

Fragility fractures have become nearly epidemic in the United States among older adults with over 2 million fractures each year – more than heart attacks, strokes, and breast cancer combined.¹

Continue to Increase

At least 44 million Americans are affected by osteoporosis or low bone density.²³ Due to an aging population, the number of Americans with osteoporosis or low bone density is expected to increase significantly.¹ Up to one-half of all women and up to one-quarter of all men will suffer fragility fractures in their lifetimes.⁴

Result in Enormous Costs

Direct care expenditure from osteoporosis-related fractures exceeds $19 billion annually.⁴ By 2025, the annual cost of fractures is projected to grow to more than $25 billion, as annual fractures surpass 3 million.⁴

Are Undertreated

Approximately 80% of patients do not receive recommended osteoporosis care following a fracture.⁷ Men, who account for 30% of fractures and 25% of costs, are particularly undertreated.¹⁹

HEDIS Measure - % Compliance²⁷

- Beta-blocker use 6 months after heart attack: 83%
- Breast cancer screening: 69%
- Colorectal cancer screening: 55%
- Osteoporosis management within 6 months of fracture: 21%

Cause an Unnecessary and Devastating Toll

Nearly 25% of patients who suffer a hip fracture die within a year.¹ Those who do survive often experience a loss of independence and may require long-term nursing home care.

Are the First Sign of Poor Bone Health

One of the best indicators for a future fracture is a previous fragility fracture.⁸ Fragility fractures are the first sign of poor bone health. Patients with a fragility fracture are at an 86% higher risk of a second fracture.⁷

Provide a “Teachable Moment”

Fragility fractures, as sentinel events, provide opportunities for clinicians to educate patients, fellow physicians and other healthcare providers about the importance of bone health and osteoporosis treatment.⁸

“A Trusted Word” “Own the Bone takes a disease state that, despite its prevalence, gets very little attention usually and puts it into focus in a way that helps our patients and the hospital in terms of delivering excellent care.” — Sharon Bresinger, MD, Saint Francis Hospital
TOP 10 REASONS TO ENROLL

1. THE ONLY FRAGILITY FRACTURE PREVENTION PROGRAM IN THE U.S.

Own the Bone is the only formalized national fragility fracture prevention program available to independent hospitals and medical centers, providing your hospital, medical center or private practice with all of the support and tools necessary to begin your own comprehensive fragility fracture treatment program.

2. TESTED AND PROVEN EFFECTIVE

In 2005, a 10-month Own the Bone pilot study (at 14 healthcare institutions throughout the US), published in the Journal of Bone and Joint Surgery, showed that efforts to educate patients and primary care physicians about the risk of osteoporosis and future fractures could positively affect bone health care in patients with fragility fractures.

3. SMART MEDICAL AND BUSINESS DECISION

"Failure to diagnose" and treat osteoporosis in association with related fractures is a key quality of care and a professional liability issue for hospitals, medical centers, and physicians. Implementing higher quality standards before you are required to do so is a sound medical and business decision.

4. MAKES CONFORMING TO CURRENT TREATMENT RECOMMENDATIONS EASY

Own the Bone measures are consistent with recommendations from the National Osteoporosis Foundation (NOF), Centers for Medicare and Medicaid Services (CMS), Joint Commission (JC), the World Health Organization (WHO), and the American Medical Association (AMA).

5. MEASURES YOUR HOSPITAL’S PERFORMANCE

The Own the Bone registry provides access to benchmarking capabilities enabling you to document improvements in patient care over time as well as compare results to other participating institutions nationwide.

6. SHOWCASES YOUR COMMITMENT TO YOUR PATIENTS’ BONE HEALTH

Own the Bone sites are recognized in major media outlets, such as the U.S. News and World Report “Best Hospitals” guide. In addition, sites receive branded materials and template press releases to inform local media and their patients about their commitment to bone health.

7. ADAPTABLE TO YOUR INSTITUTION’S NEEDS

Own the Bone includes elements that are adaptable to suit your institution and patient population’s needs. Your site can enter and track data for a target patient population (hip fractures, knee fractures, etc) or for your entire fragility fracture patient population.

8. PROVIDES ALL OF THE NECESSARY TOOLS

Own the Bone provides you with all of the tools necessary to start a fragility fracture prevention program or to enhance your current fragility fracture program, including:

- Getting started toolkit
- Access to a national web-based patient registry
- Case Report Form
- System-generated physician communication and patient education letters
- Patient and physician education tools that may be customized with your institution’s logo
- Access to informational teleconferences and resources through the Own the Bone website
- Web-based registry training
- Quarterly Bone Health Bulletin e-newsletter
- Public relations tools and national recognition opportunities

9. PROMOTES BEST PRACTICES

Own the Bone sites have access to networking opportunities – virtual and in-person – to learn and share best practices.

10. IT’S THE RIGHT THING TO DO

Only 21% of Medicare patients receive recommended osteoporosis care following a fracture.1 By implementing Own the Bone in your hospital or practice, you are showing your patients that you are concerned about their bone health and that they will receive the appropriate follow-up care when they choose your healthcare institution for bone fracture treatment.

WHY OWN THE BONE?

The Own the Bone program provides a simple, easy-to-use tool to enable hospitals, medical centers, and practices to:

- Identify, evaluate and treat fragility fracture patients, ages 50 and over, at risk for osteoporosis
- Coordinate patient care among different specialties and physicians
- Enter patient information into a web-based registry
- Quantify improvements in patient care
- Encourage 60-90 day patient follow-up

Through a clinically-proven, web-based patient registry and ten prevention measures, Own the Bone seeks to:

- Correct the deficiency documented in the RAND and NCQA studies as it applies to physician treatment recommendations in fragility fracture patients
- Change physician and patient behavior to reduce incidence of future fractures and positively affect osteoporosis treatment

A TRUSTED WORD

“Helping our patients prevent future fractures is crucial to our role as orthopaedic surgeons. Participating in the Own the Bone program helps us do this.” – Beau S. Konigsberg, MD, UNMC

WHY OWN THE BONE?
10 RECOMMENDED PREVENTION MEASURES

The Own the Bone patient registry tracks and monitors the ten measures. These include:

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<th>NUTRITION COUNSELING</th>
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<th>Calcium supplementation</th>
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<td>2</td>
<td>Vitamin D supplementation</td>
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<tr>
<td>PHYSICAL ACTIVITY COUNSELING</td>
<td>3</td>
<td>Weight-bearing and muscle-strengthening exercise</td>
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<td>Fall Prevention education</td>
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<td>LIFESTYLE COUNSELING</td>
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<td>Smoking cessation</td>
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<td>6</td>
<td>Limiting excessive alcohol intake</td>
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<td>PHARMACOTHERAPY</td>
<td>7</td>
<td>Pharmacotherapy</td>
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<tr>
<td>TESTING</td>
<td>8</td>
<td>Testing Bone mineral density testing: DXA (Dual Energy X-Ray Absorptiometry)</td>
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<td>COMMUNICATION</td>
<td>9</td>
<td>Physician referral letter to report the patient’s fragility fracture, risk factors, and recommendations for treatment</td>
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<tr>
<td></td>
<td>10</td>
<td>Patient education letter to explain bone health risk factors and recommendations for treatment</td>
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Are you interested in becoming a champion for bone health at your institution? Contact us to learn more about Own the Bone and begin participating in this transformative quality improvement program.

WHY THE AMERICAN ORTHOPAEDIC ASSOCIATION?

Founded in 1887, the American Orthopaedic Association (AOA) is the oldest orthopaedic association in the world. At its core is its mission: “To identify, develop, engage, and recognize leadership to further the art and science of orthopaedics.”

The AOA developed Own the Bone as a quality improvement initiative to positively impact the bone health care of patients with fragility fractures. Orthopaedic leaders understand the sobering statistics related to the epidemic of fragility fractures in the US population and the importance of collaboration between the orthopaedic specialty and other healthcare providers to close the osteoporosis treatment gap.

Nationally-recognized bone health experts, from specialties including orthopaedic surgery, endocrinology, rheumatology, women’s and family health, and gerontology, continue to collaborate on the design and enhancement of Own the Bone.

A TRUSTED WORD “Own the Bone isn’t hard to implement, it just takes leadership and a coordinated effort among hospital administration, nursing staff, and interested physicians within an institution.” — Marc F. Swiontkowski, MD, Park Nicollet Methodist Hospital
REFERENCES


A TRUSTED WORD “What was highlighted in the 2004 Surgeon General’s Report still holds true today. The report states that providers should be aware of a number of “red flags” that might signal a problem with an individual’s bone health at different ages. Probably the most important of these red flags, and one that is frequently ignored, is a fragility fracture. Own the Bone is a tool to put action to the Surgeon General’s recommendations and address this growing public health problem.” — Lawrence G. Raisz, MD, Scientific Editor, 2004 Bone Health and Osteoporosis, A Report of the Surgeon General