If you require any advice or information regarding your osteoporosis or osteoporosis treatment:

- **You can contact your USF Diabetes and Endocrinology Center endocrinology provider by calling:** 813-396-2580
- **You can find the USF Diabetes and Endocrinology Center providers on**
  [https://health.usf.edu/care/diabetes-endocrinology/providers](https://health.usf.edu/care/diabetes-endocrinology/providers)

I. **PRACTICE GOOD HEALTH HABITS:**

- Avoid others who are sick. Separate yourself from all individuals by six (6) feet.
- Frequently wash hands with soap and water or use alcohol-based hand sanitizer. Wash your hands for 20 seconds after touching anything that has come into your home.
- Avoid touching your eyes, nose and mouth.
- Cover coughs and sneezes with a tissue.
- Disinfect surfaces around your home and/or office regularly.
- Avoid shaking hands, hugging and kissing.
- Avoid large gatherings.
- If you become ill, stay home, call your doctor’s office to discuss symptoms. Go to a healthcare facility only if directed by your physician or if you are seriously ill.
- Wipe down door handles and taps daily.
- Open your mail carefully, as you will need to wash your hands after touching it. The other option is to leave your mail for 24 hours, which is how long the virus stays on paper. However, we would still recommend washing your hands.
- Either wipe down the outside of all boxes of food etc. delivered to your home or let them sit for 24 hours in a corner out of harm’s way.
- Do not allow anyone into your home unless it is an emergency or concerns your health. If you have family living nearby, you could (or they could) put a chair or bench outside one of your windows and let grandchildren speak to you through an open window (or on the phone) but ensure a distance of six feet. If you have a neighbor or friend close by this is also an option.
- If you must go out for food shopping etc., then use a thick scarf if you do not have a mask. If it is possible, get shopping delivered. Make sure to wear gloves that can be washed or use disposable gloves when handling a shopping cart or basket.
- If you are over 70 then respect the advice about cocooning. It is difficult but necessary and will reduce your chances of contracting the virus.

II. **SOCIAL LIFE in ISOLATION:**
• Maintain contact with family and friends by telephone or email – physical isolation doesn’t have to be social isolation!
• Don’t hesitate to ask for the support you need for shopping, getting prescriptions filled, or other errands.
• Maintain contact with family and friends by phone, email, WhatsApp, Viber, Skype, Zoom or Facetime – Physical isolation does not have to be social isolation!
• Ask a family member or friend to instruct you on how to put any of the apps on to your phone

If you find you are anxious or bored, you might try some of the following:
• Dig out those books or articles you have put aside and never had time to read.
• Write those letters to family or friends that you kept meaning to do.
• Organize your family photos, naming who is in them!
• Write or type up your family tree or incidences that you found amusing in your lifetime.
• If you physically can do so without causing pain or putting yourself at risk of an injury or fracture, you could do some spring-cleaning of your closets and kitchen cabinets. Ideally, items should be placed between the hip and eye level. Anyone at high risk to fracture or who has already broken bones in their back mustn’t attempt this.
• Use the internet to find sites offering meditation or mindfulness. There are also lots of apps on your phone or computer that can be diverting. We will send out a list of these separately.
• Exercise can also help to reduce stress levels. Again, there is lots of free stuff on the internet.
• Keep updated on what is happening but also take time away from the news. Avoid too much social media.

The importance of appropriate exercise during this time.
Anyone who has bone loss needs to be extremely careful about what type of stretches and exercises they do to prevent breaking bones.
When a person has initially been diagnosed with bone loss or the causes of bone loss have not been found and addressed, we do not recommend any form of exercise other than walking and/or walking up and downstairs, as long as this does not cause pain. These recommendations should stay in place until all the causes of your bone loss have been investigated and addressed.
Don’t make any assumptions before you are diagnosed completely. If you are on a prescribed Osteoporosis treatment you must continue to take it.
We do not have a standard set of exercises that we send as each person needs to be assessed individually. A person can look perfectly fine but have severe undiagnosed Osteoporosis. For example, there are 19-year olds with severe bone loss. The most important fact for those with bone loss is that you are at risk of fracturing or refracturing, therefore it is much safer and less painful, to slowly build up your bone strength.
It is NOT recommend to do the following exercises when you have bone loss:

Touching your toes with your legs straight, regular sit-ups, twisting of your back with your feet on the ground. Examples of these include: golf, skipping, trampolines, excessive weights, vibration machines, lifting of children in and out of a crib or car, high impact exercises such as box drops or heel drops, due to risk of fracture.

If you have been told that you have broken bones in your back or severe Osteoporosis, which is a T score of -3.0 or higher in any area on your DXA scan results, we recommend the following:

Initially, no lifting anything over three pounds. Put food items in a cart and only half fill the bags. Do not use a vacuum, stretch up for items, or twist your body to either side with your feet planted on the ground, no stretches or exercise that put stress on your back. Examples include regular sit-ups, touching your toes with your legs straight, golf, trampolines, high impact, vibration machines, and excessive weights. No lifting of children in and out of a crib or car.

Exercises that are normally recommended for those with bone loss:

Tai chi, walking up and down flights of stairs, gentle weights which are slowly increased, tennis, brisk walking making sure to change pace and pathway. Pilates can be helpful but only after being assessed by a health professional who has reviewed your DXA scan results to see what stretches and exercises are safe for you to do. Dancing is one of the best forms of weight-bearing as long as you have good balance. Exercise in water can help build up muscle strength and endurance without putting excess stress on joints but you would still need to do weight-bearing exercise.

III. **FRACTURE PREVENTION**:

Risk of breaking a bone
Whether you're social shielding, isolating, or just staying at home, you can still take action to look after your bone health, and reduce your risk of breaking a bone.

- Preventing falls is vital: ensure that your home environment is obstacle free
- Make sure you have a well-balanced diet with enough calcium and protein
- Find ways to get vitamin D for your bones
- Make your daily exercise effective for your bones, and find out how you can adapt exercise to make it safe for your osteoporosis, especially if you have spinal fractures
- If you're prescribed calcium and vitamin D, keep taking them, even if your osteoporosis medication is delayed
- Do not discontinue any osteoporosis treatment (including calcium and vitamin D supplements) which you have been prescribed and talk to your doctor if you have any concerns.
- Avoid excessive amounts of alcohol
• Avoid smoking
• Think about how you can avoid slips, trips and falling over, to protect your bones
• Help your muscles stay strong by doing specific exercises and avoiding long periods of sitting down, if possible

IV. ANTI-OSTEOPOROSIS MEDICATIONS RECOMMENDATIONS:

It is recommended that you have at least a one-month supply of your current medications on hand during this time of social distancing and self-quarantine. This includes your osteoporosis medications.
• If you are taking the following oral medications or self-injectables to treat your osteoporosis, please check with your healthcare provider to make sure you have adequate amounts on hand:
  o Alendronate (brand names: Fosamax®, Binosto®)
  o Ibandronate (brand name: Boniva®)
  o Risedronate (brand names: Actonel®, Atelvia™)
  o Raloxifene (brand name: Evista®)
  o Calcitonin (brand names: Fortical®, Miacalcin®)
  o Estrogen (multiple brands)
  o Estrogen/Bazedoxifene (brand name Duavee®)
  o Teriparatide (brand name: Forteo®) If you finish your 2 years of teriparatide or decide to discontinue the medication, please discuss an alternative medication so you do not have bone loss when you stop it.
  o Abaloparatide (brand name: Tymlos®) If you finish your two years of abaloparatide or decide to discontinue the medication, please discuss an alternative medication so you do not have bone loss when you stop it.

ZOLEDRONIC ACID:
Zoledronic acid (brand name: Reclast®): This is a once-a-year infusion and can be delayed for a short period of time since the medication lasts a long time. Please discuss the schedule with your healthcare professional.
Zoledronic acid medication is a long-acting drug. As such, it stays in your body longer than 12 months (probably more than 24 months). Therefore, delaying your treatment for a number of months will not put you at a higher risk of sustaining fragility fracture nor cause significant decline in your bone mineral density. It is important that you engage in regular exercise, refrain from smoking, minimise alcohol intake and continue with your calcium (and or vitamin D) supplementation if you have been prescribed one by your doctor.

DFENOSUMAB:
It is extremely important that patients taking the following medications administered by a healthcare provider stay on time for scheduled injections:
Denosumab (brand name Prolia®) – If you skip or delay taking a dose, you have an increased risk for breaking a bone, especially if you already have a broken bone in your spine.
It’s important that your next injection isn’t delayed for more than four weeks, as the benefits wear off quickly.
You can have repeat injections up to four weeks early, so you have some flexibility. A decision on whether you're able to self-administer should be made by your healthcare professional, together with you. **Please discuss your schedule with your healthcare professional as soon as possible.**

**ROMOSOZUMAB:**
Romosozumab (brand name Evenity®) – If you miss or delay a dose of EVENITY®, **please contact your healthcare provider as soon as possible to schedule your next dose.**

**IBADRONATE:**
A delay of a few months does not increase your risk of breaking a bone, and doesn't cause your bone density to significantly drop. Ibandronic acid is a long-lasting drug. If you're prescribed calcium and vitamin D, keep taking them, even if your medication is delayed.

**TERIPARATIDE:**
A short delay in your daily injections will not affect your bone health. If you're prescribed calcium and vitamin D, keep taking them, even if your medication is delayed.

**ORAL MEDICATIONS:**
If you miss a number of doses over a few weeks, your overall bone health is unlikely to be affected. If you need to collect your prescription, and are unwell, self-isolating or social shielding, ask family, friends or a neighbor to help you. Most areas now have networks and voluntary groups that help people in this situation, so check social media to see if you have any locally that can help you. If you're prescribed calcium and vitamin D, keep taking them, even if your medication is delayed.

**Calcium and vitamin D** – It is important to continue with the calcium (food FIRST and supplement for any shortfall in your diet) and vitamin D schedule and management that were established with your healthcare professional.

**YOUR BONE APPOINTMENT:**
If your hospital or government advice tells you to stay at home and/or you are concerned about visiting your doctor’s office or hospital, or you need a prescription refilled, try to arrange a telephone appointment instead.

**If your appt has been cancelled:**
An urgent decision about your bone health is not needed right now. A delay is unlikely to affect your bone health and risk of breaking bones in the long term. It's still important that you get a new appointment when the current situation improves.
Depending on your situation, you may be offered a phone appointment instead of your face-to-face appointment.

**The information above can be found:**
https://theros.org.uk/
https://www.irishosteoporosis.ie/