



**National Institutes of Health
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Osteoporosis and Asian American Women

Asian American women are at high risk for developing osteoporosis (porous bones), a disease that is preventable and treatable. Studies show that Asian Americans share many of the risk factors that apply to Caucasian women. As an Asian American woman, it is important that you understand what osteoporosis is and what steps you can take to prevent or treat it.

What Is Osteoporosis?

Osteoporosis is a debilitating disease characterized by low bone mass and, thus, bones that are susceptible to fracture. If not prevented or if left untreated, osteoporosis can progress painlessly until a bone breaks, typically in the hip, spine, or wrist. A hip fracture can limit mobility and lead to a loss of independence, while vertebral fractures can result in a loss of height, stooped posture, and chronic pain.

What Are the Risk Factors for Osteoporosis?

There are several factors that increase your chances of developing osteoporosis, including:

- a thin, small-boned frame
- previous fracture or family history of osteoporotic fracture
- estrogen deficiency resulting from early menopause (before age 45), either naturally, from surgical removal of the ovaries, or as a result of prolonged amenorrhea (abnormal absence of menstruation) in younger women
- advanced age
- a diet low in calcium
- Caucasian and Asian ancestry (African American and Hispanic women are at lower but significant risk)

- cigarette smoking
- excessive use of alcohol
- prolonged use of certain medications.

Are There Any Special Issues for Asian Women Regarding Bone Health?

Recent studies indicate a number of facts that highlight the risk that Asian American women face with regard to developing osteoporosis:

- Compared to Caucasian women, Asian women have been found to consume less calcium. One reason for this may be that up to 90 percent of Asian Americans are lactose intolerant. Therefore, they may avoid dairy products, the primary source of calcium in the diet. Calcium is essential for building and maintaining a healthy skeleton.
- Asian women generally have lower hip fracture rates than Caucasian women, although the prevalence of vertebral fractures among Asians seems to be as high as that in Caucasians.
- Slender women have less bone mass than heavy or obese women and are, therefore, at greater risk for osteoporotic bone fractures.

How Can Osteoporosis Be Prevented?

Building strong bones, especially before the age of 20, can be the best defense against developing osteoporosis, and a healthy lifestyle can be critically important for keeping bones strong. To help prevent osteoporosis:

- Eat a well-balanced diet rich in calcium and vitamin D.
- Exercise regularly, with an emphasis on weight-bearing activities such as walking, jogging, dancing, and lifting weights.
- Don't smoke and limit alcohol intake.

Talk to your doctor if you have a family history of osteoporosis or other risk factors that may put you at increased risk for the disease. Your doctor may suggest that you have your bone density measured through a safe and painless test that can determine your risk for fractures (broken bones), and measure your response to osteoporosis treatment. The most widely recognized bone mineral density test is called a dual-energy x-ray absorptiometry or DXA test. It is painless: a bit like having an x ray, but with much less exposure to radiation. It can measure bone density at your hip and spine.

What Treatments Are Available?

Although there is no cure for osteoporosis, there are treatments available to help stop further bone loss and reduce the risk of fractures:

- Alendronate (Fosamax¹), risedronate (Actonel), and ibandronate (Boniva) are bisphosphonates approved for preventing and treating postmenopausal osteoporosis. In addition, alendronate is approved for treating osteoporosis in men and for use by men and women with glucocorticoid-induced osteoporosis. Risedronate is approved for treating osteoporosis in men and for preventing and treating glucocorticoid-induced osteoporosis in both women and men.
- Some bisphosphonates are fortified with calcium and vitamin D. These nutrients are important for everyone, and people should include adequate amounts of them in their diets.
- Calcitonin (Miacalcin, Fortical) is another treatment used by women for osteoporosis.
- Raloxifene (Evista), a Selective Estrogen Receptor Modulator, is approved for preventing and treating postmenopausal osteoporosis.
- Teriparatide (Forteo) is an injectable form of human parathyroid hormone (PTH). It is approved for postmenopausal women and men with osteoporosis who are at high risk for having a fracture.
- Estrogen therapy (also called hormone therapy when estrogen and another hormone, progestin, are combined) is approved for preventing postmenopausal osteoporosis. It should only be considered for women at significant risk of osteoporosis after nonestrogen medications have been carefully considered.

Resources

For additional information on osteoporosis, visit the National Institutes of Health Osteoporosis and Related Bone Diseases ~ National Resource Center Web site at www.niams.nih.gov/bone or call 1-800-624-2663. Fact sheets on osteoporosis are available in Chinese, Cambodian, Korean, Lao, and Vietnamese.

For additional information on minority health, visit the Office of Minority Health Resource Center Web site at www.omhrc.gov/OMHRC or call 1-800-444-6472.

¹ Brand names included in this fact sheet are provided as examples only, and their inclusion does not mean that these products are endorsed by the National Institutes of Health or any other Government agency. Also, if a particular brand name is not mentioned, this does not mean or imply that the product is unsatisfactory.

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For Your Information

This publication contains information about medications used to treat the health condition discussed here. When this fact sheet was printed, we included the most up-to-date (accurate) information available. Occasionally, new information on medication is released.

For updates and for any questions about any medications you are taking, please contact the U.S. Food and Drug Administration at 1-888-INFO-FDA (1-888-463-6332, a toll-free call) or visit their Web site at www.fda.gov.

Recognizing the National Bone and Joint Decade 2002-2011