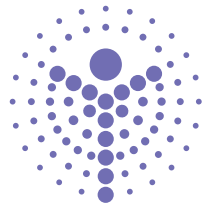


# CLOSING THE CARE GAP

2014-2015 Annual Report



Osteoporosis Canada

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Ostéoporose Canada

# ABOUT

## About Osteoporosis Canada

Osteoporosis Canada (OC) was the first national organization for osteoporosis in the world and is the only national charitable organization dedicated to serving Canadians who have, or are at risk of, osteoporosis and osteoporosis-related fractures.

We work to educate, empower and support individuals and communities in the risk reduction and treatment of osteoporosis.

## Our Vision

A Canada without osteoporotic fractures.

## Our Mission

To improve the quality of life of Canadians by preventing osteoporotic fractures, Osteoporosis Canada:

- Educates Canadians about osteoporosis
- Advocates for optimal osteoporosis care
- Invests strategically in osteoporosis research

## A Letter From the President & CEO

### Dear Friends and Supporters

What a year we have had! Last year we announced that our efforts moving forward would be focused on stopping fractures and saving lives. This year, we are happy to share highlights of our many successes in attaining a Canada without osteoporotic fractures:

- This past year saw the release of our new Quality Standards for Fracture Liaison Services (FLS) in Canada, which provides statements describing the essential functions of an FLS and clear guidance for healthcare professionals and administrators on what a world-class FLS will actually deliver. In addition, an FLS Summit was held with leaders and experts in healthcare, health policy and FLS from each province to collaborate and discuss FLS in Canada.
- Too Fit to Fracture: Managing Osteoporosis through Exercise, published by Osteoporosis Canada in November 2014, includes information on strength training, balance exercises and aerobic activity; interactive tools for getting started; tips for addressing the reasons why people don't exercise; and ways to move safely during everyday activities to avoid the risk of falls or spine fractures.
- Fracture Prevention Recommendations for Long-term Care were successfully completed, led by Alexandra Papaioannou MD MSc et al. Publication is expected in the Canadian Medical Association Journal (CMAJ) in the fall of 2015.

But we could not have done any of this without the support of all of you. We would like to thank our thousands of passionate volunteers, educators, healthcare professionals, researchers and partners. Their phenomenal and unwavering dedication and commitment ensure that osteoporosis education, patient support and fundraising activities are implemented in communities across Canada.

Special recognition and thank you also go out to all of our sponsors and donors, whose confidence and generosity provide much needed support to the organization, allowing us to work towards realizing our vision of a Canada without osteoporotic fractures.



DR. FAMIDA JIWA  
PRESIDENT & CEO



EMILY BARTENS  
CHAIR, BOARD OF DIRECTORS

# PROVIDING



## Providing Education and Support

[Canadian Osteoporosis Patient Network \(COPN\): Sharing. Supporting. Inspiring.](#)

In 2014, COPN celebrated its 10<sup>th</sup> anniversary. How did we celebrate 10 years in the growth of the Canadian Osteoporosis Patient Network? Since the newsletter COPING is COPN's flagship venture, we decided to mark this important milestone by showcasing, in the October 8, 2014 issue of COPING, 10 of our best articles from the past decade. This was a difficult task, poring through 10 years of newsletters to pick just 10 favourites from the 181 that COPN published since the first edition was emailed to a few hundred readers in 2004. Subscriptions to COPING are now in excess of 8,500, and continue to grow.

# SUPPORT

COPN also hosts a series of virtual public education forums called Bone Matters with presentations by recognized experts in the field of osteoporosis. Topics covered in 2014-2015 included fall prevention, drug treatments, a special forum featuring Dr. Marla Shapiro, travelling with osteoporosis, healthy eating for healthy bones, and are you too fit to fracture – new exercise recommendations.

## Beyond the Break

In partnership with Women's College Hospital in Toronto, OC hosts Beyond the Break, virtual forums for health professionals. This past year's topics included men and osteoporosis, celiac disease and osteoporosis, stroke effects on bone health, drug holidays and benefits and concerns of long-term bisphosphonate use.

## Too Fit to Fracture: Managing Osteoporosis through Exercise

People with osteoporosis, and those at risk of developing it, can prevent bone loss, fractures and falls by combining specific types of exercises.

Too Fit to Fracture: Managing Osteoporosis through Exercise, published by Osteoporosis Canada in November 2014, includes information on strength training, balance exercises and aerobic activity; interactive tools for getting started; tips for addressing the reasons why people don't exercise; and ways to move safely during everyday activities to avoid the risk of falls or spine fractures. Poor posture, combined with loss of bone strength, can increase the risk of spine fracture. Poor alignment can be improved with exercises that target muscles important for posture.

One of the most common questions asked by those recently diagnosed with osteoporosis is, "What kind of exercises should I do?" This booklet is a valuable resource to help answer that question.

### COPN Executive Committee 2014-2015

Cheryl Baldwin, Chair – Winnipeg, Manitoba  
 Cherylle Unryn, Vice-Chair – Winnipeg, Manitoba  
 Larry Funnell, Past Chair – Surrey, British Columbia  
 Sheila Brien – Toronto, Ontario  
 Ina Ilse – Toronto, Ontario  
 Tanya Long – Toronto, Ontario  
 Sheila McBeath – Winnipeg, Manitoba  
 Virginia McIntyre – Coldbrook, Nova Scotia  
 Sarah Nixon-Jackle – Saskatoon, Saskatchewan  
 Rowena Ridout, Medical Advisor – Toronto, Ontario  
 Christine Thomas – Ottawa, Ontario

over  
80%

OF ALL FRACTURES IN  
CANADA AFTER AGE 50 ARE  
CAUSED BY OSTEOPOROSIS.

1 in 3  
women  
& 1 in 5  
men

WILL SUFFER FROM AN  
OSTEOPOROTIC FRACTURE  
DURING THEIR LIFETIME.



# IMPROVING



# CARE

## Ensuring Optimal Osteoporosis Care

### Bone Fit™ : Encouraging Safe Exercise Prescription

Bone Fit™ is an evidence-informed exercise training workshop for health care professionals. Bone Fit™ Basics is geared to community fitness professionals and Bone Fit™ Clinical is for clinical exercise professionals. The workshop consists of an e-learning module followed by an in-person workshop. Participants are taught the most appropriate, safe and effective methods to prescribe and progress exercise for people with osteoporosis to maintain bone health and prevent the risk of fracturing. All participants are taught simple transitional movements, activities of daily living and recreational pursuits adaptable for people with osteoporosis.

In 2014, Bone Fit™ collaborative workshops continued with community fitness professionals and clinical exercise professionals teaching overlapping content in a combined workshop. From April 2014 to March 2015, nine of these Bone Fit™ combined workshops were held across Ontario, training 117 community fitness professionals and 136 clinical health professionals. In July 2014, there was one Bone Fit™ combined workshop in Alberta, training 14 community fitness professionals and nine clinical health professionals.

The Bone Fit™ program expanded to include organizational trainings and the first of these was a virtual hybrid training for 24 VON-SMART coordinators, held in May 2014. For this workshop three sites in Barrie, Trenton and London connected via the Ontario Telemedicine Network. This unique opportunity allowed for simultaneous training and facilitated feedback with the support of Bone Fit™ trainers at each site. In July 2014, a Bone Fit™ Clinical workshop was held for 12 PT Health staff in Toronto.

In April 2014, Osteoporosis Canada partnered with the University of Waterloo on a Knowledge Translation and Exchange research project led by Dr. Lora Giangregorio. The University of Waterloo is translating 'Too Fit to Fracture: Managing Osteoporosis through Exercise' research to community partners through Bone Fit™ workshops. They are committed to supporting one Bone Fit™ training in each LHIN by April 2016. At the Bone Fit™ workshops,

# 1 in 3

HIP FRACTURE PATIENTS  
RE-FRACTURE AT 1 YEAR.  
1 IN 2 HIP FRACTURE PATIENTS  
WILL SUFFER ANOTHER  
FRACTURE WITHIN  
5 YEARS.

# 28% of women & 37% of men

WHO SUFFER A HIP FRACTURE  
WILL DIE WITHIN  
THE FOLLOWING YEAR.





the University of Waterloo will engage with healthcare providers and community fitness professionals to understand their knowledge of Too Fit to Fracture and Bone Fit™ principles and to identify knowledge gaps.

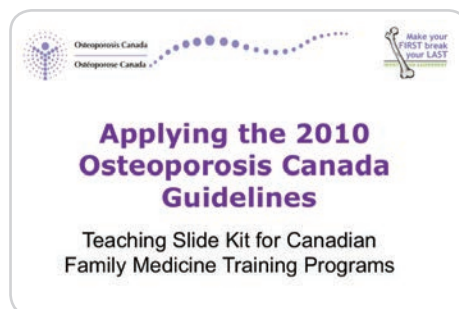
The workshops continue to build a Bone Fit™ trained network and encourage safe exercise prescription and a continuum of care from clinic to community for people with or at risk of osteoporosis.

#### [Slide Kit for Health Care Professionals : Applying the Osteoporosis Canada Guidelines](#)

The Scientific Advisory Council (SAC) of Osteoporosis Canada is made up of over 70 dedicated researchers, clinicians and educators who provide a complete coverage of cross-disciplinary expertise in the field of bone metabolism and osteoporosis.



The SAC's Knowledge Translation Committee has developed an easy to use and flexible slide kit for health care professionals based on the 2010 Osteoporosis Canada Guidelines. There are two parts to this slide kit with the first part including background slides on the assessment and management of osteoporosis that may be delivered in a didactic teaching format. The second part is a case study that is designed to be interactive in a question and answer format to stimulate active participation and learning.



The slide kit has been added to Osteoporosis Canada's collection of online health care professional tools to be used by educators in its entirety or customized to specific audiences in English and French. To date, it has been downloaded over 500 times by a variety of health professionals including family practice physicians, medical residents, nurses, nurse practitioners, pharmacists and dietitians. The committee is currently updating the slide kit for 2015-16 and adding more case studies.

### Recommendations for Fracture Prevention in Long-Term Care

This year Osteoporosis Canada completed development of new guidelines that aim to prevent fractures in residents in long-term care facilities. These guidelines are targeting frail seniors and their families and the teams that care for them.

The much-anticipated guidelines have been developed with input from residents of long-term care facilities and their families as well as researchers and healthcare professionals. Based on current evidence, these guidelines build on the 2010 Clinical Practice Guidelines for the Diagnosis and Management of Osteoporosis in Canada.

The lead author of the guidelines is Dr. Alexandra Papaioannou, a member of Osteoporosis Canada's Scientific Advisory Council (SAC), and publication is expected in the Canadian Medical Association Journal (CMAJ) in the fall of 2015.

FRACTURES FROM  
OSTEOPOROSIS ARE

**more  
common**

THAN HEART ATTACK,  
STROKE AND BREAST CANCER  
COMBINED.

EACH YEAR IN CANADA  
THERE ARE ABOUT

**30,000**

HIP FRACTURES – AND MANY  
MORE CANADIANS SUFFER  
OSTEOPOROTIC FRACTURES  
AFFECTING THE SPINE, WRIST,  
SHOULDER AND PELVIS.



**“OSTEOPOROSIS  
CANADA SIMPLY  
COULD NOT  
ACCOMPLISH ANYTHING  
WITHOUT THE GIFTS OF  
DEDICATED DONORS.  
THANK YOU FOR  
YOUR SUPPORT!”**

– Cheryl Baldwin,  
Chair of Osteoporosis  
Canada’s Canadian  
Osteoporosis Patient  
Network (COPN)

“In January 2003, soon after my mother was diagnosed with osteoporosis, I became a member of the Osteoporosis Canada Manitoba Chapter Executive as treasurer. In the spring of 2003 I learned firsthand what it truly means to live with osteoporosis. On a beautiful spring morning, as I went to my car, I managed to find the last piece of ice in the city. I fell and fractured my ankle in three places. The recovery was a long and painful process but what was even more difficult was learning to live with the fear of falling. I have since been diagnosed with osteoporosis and I am still extremely nervous when I go out on an icy day.

From 2006 to 2014 I sat on the Board of Directors of Osteoporosis Canada; I was chair from 2011 to 2013. As a board member, I participated in numerous committees, developed strategic plans, held annual meetings and connected with people across the country. I am very proud that during my time on the board, it refocused its priority to the highest risk patient, striving to ensure that all adults 50 years and older who experience a fracture receive screening and, if appropriate, treatment.

I am still very involved with the organization as chair of the Canadian Osteoporosis Patient Network and incoming chair of the Manitoba Chapter Executive.

Because I am passionate about the work that Osteoporosis Canada is doing, I have decided to leave a gift to them in my will. My financial planner showed me that I could look after my family and also make a generous gift because of the tax advantages that will benefit my estate.

This gift will help Osteoporosis Canada provide support to those with osteoporosis and move ever closer to a Canada without osteoporotic fractures. Osteoporosis Canada simply could not accomplish anything without the gifts of dedicated donors. Thank you for your support!”

"I am an Associate Professor of Radiology at Dalhousie University and Section Head of Breast Imaging at the Queen Elizabeth II Health Sciences Centre in Halifax. My primary interests are Nuclear Medicine, with a special interest in bone densitometry, and Breast Imaging.

I volunteer on the Osteoporosis Canada Scientific Advisory Council. I am a member of the Knowledge Translation Diagnostic Imaging Subcommittee. My volunteer work focusses on translating current research into disease management. I recently participated in writing a paper jointly with the Canadian Association of Radiologists (CAR) entitled "Improving Management of Osteoporosis through Simple Changes in Reporting Fragility Fractures." It was published in the CAR Journal.

My work on the Knowledge Translation Diagnostic Imaging Subcommittee involves reaching out to radiology students and practitioners to ensure they recognize symptoms of osteoporosis, even when they are screening a patient for other causes.

By having radiologists check for osteoporosis whenever they are taking images, I am hoping that Canadians who have osteoporosis will be diagnosed and treated before their condition becomes more advanced. Not only will this save a lot of pain and suffering, but every fracture that is prevented lowers costs to our healthcare system.

I am very excited about working on this program but I also recognize that the development and coordination of these types of programs are only made possible through gifts from donors like me."



**"I AM HOPING  
THAT CANADIANS  
WHO HAVE  
OSTEOPOROSIS WILL  
BE DIAGNOSED AND  
TREATED BEFORE THEIR  
CONDITION BECOMES  
MORE ADVANCED."**

– Dr. Sian Iles,  
Member of Osteoporosis  
Canada's Scientific  
Advisory Council

# ADVOCATING

## Enhancing Post-fracture Care

### Fracture Liaison Services (FLS) : Closing the Care Gap

Each year, hundreds of thousands of Canadians suffer recurrent fractures because their osteoporosis has gone undiagnosed and untreated. Across Canada, fewer than 20% of people who suffer a fracture are assessed for osteoporosis. These preventable fractures come at a great cost to patients, their families and the healthcare system.

Fortunately, a proven solution exists – Fracture Liaison Services (FLS). FLS is the most effective program to prevent repeat fractures due to osteoporosis. In an FLS, a coordinator screens fracture patients for osteoporosis and follows them to make sure they receive the care they need to prevent their next fracture. This care may include a bone mineral density test and/or medication.

Today, there are very few FLS in Canada. Osteoporosis Canada is working to improve this by promoting and supporting FLS implementation across the country. As part of this effort, we develop and provide various educational tools and resources to help build quality FLS in Canada.

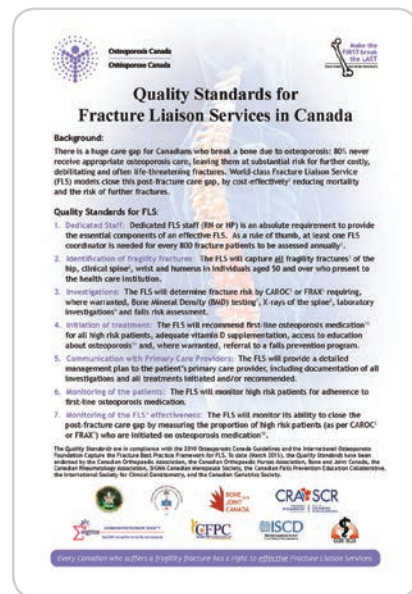
### The Canadian FLS Network

The Canadian FLS Network is for healthcare professionals, healthcare administrators and institutions interested in quality FLS in Canada. Members of the network receive a newsletter, Liaison, detailing timely and relevant information related to FLS in Canada. This year, the Canadian FLS Network membership surpassed 130 members.

### Osteoporosis Canada's Inaugural FLS Summit

We recognized that those involved in FLS implementation needed an opportunity to come together to collaborate and discuss FLS in Canada.

We created such an opportunity by holding Osteoporosis Canada's inaugural FLS Summit in May 2014. Leaders and experts in healthcare, health policy and FLS gathered from each province to explore FLS from concept to practice. Attendees reviewed evidence in support of effective FLS models and were





# FOR CARE

provided the tools and resources required for effective FLS implementation. Some of the successful outcomes achieved as a result of the summit, included an increase in our Canadian FLS Network membership and the development of Quality Standards for Fracture Liaison Services in Canada.

## Quality Standards for Fracture Liaison Services in Canada

The Quality Standards for Fracture Liaison Services in Canada document was developed to support the implementation of effective FLS. These standards provide very clear guidance to healthcare professionals and administrators on what an effective FLS will deliver and assurance that the FLS can be set up for success at the time of implementation. As of March 2015, the standards have been endorsed nationally and internationally by eight leading organizations.

## Fracture Liaison Services Webinars

Osteoporosis Canada hosted its first webinar related to FLS implementation in June 2014. A total of three webinars have been hosted for 2014-2015, and additional broadcasts are being planned for the upcoming year. In addition, we are creating a new FLS website that addresses the need for easier access to FLS tools, resources, news and information in Canada. Upon completion, the FLS website will be the most comprehensive Canadian FLS online resource. It will be available in both English and French and will launch in mid-2015.

Osteoporosis Canada urges all jurisdictions to implement FLS, so that Canadians can avoid the unnecessary disability and mortality of fractures.



FEWER THAN  
**20%**

OF PEOPLE WHO SUFFER A FRACTURE ARE ASSESSED FOR OSTEOPOROSIS.

IF ALL CANADIAN FRACTURE PATIENTS RECEIVED FLS BEGINNING IN 2015 –

**20,000**

HIP FRACTURES AND

**10,000**

NON-HIP FRACTURES

WOULD BE AVERTED BY 2023. THE CANADIAN HEALTHCARE SYSTEM WOULD SAVE OVER \$413 MILLION IN AVERTED HIP FRACTURE COSTS ALONE BY 2023.

# RECOGNIZING



## Lindy Fraser Memorial Award

[Dr. Diane Thériault](#)

On Saturday September 12, 2014, the 2014 Lindy Fraser Memorial Award was presented to Dr. Diane Thériault at the annual Osteoporosis Canada Scientific Advisory Council American Society for Bone and Mineral Research (ASBMR) breakfast meeting in Houston, Texas USA. Osteoporosis Canada established this prestigious award in 1993 to recognize individuals who have done exemplary research and have helped to increase the knowledge about osteoporosis.

Diane has been a volunteer of Osteoporosis Canada since 1998 and was a member of the national Board of Directors from 2002 to 2010 (Chair from 2007 to 2009). She joined the Scientific Advisory Council in 2005 and served on the Canadian Osteoporosis Patient Network (COPN) Scientific Review Committee for several years.

In 2010, Diane was recognized with the Volunteer of Distinction Award that honours an exceptional volunteer – of long-standing service – who has made a superior and sustained contribution to Osteoporosis Canada in addition to demonstrating outstanding leadership in numerous capacities.

A rheumatologist by trade, Diane was very supportive of early efforts to establish an Osteoporosis Canada Chapter in Nova Scotia. She could always be called upon to address a group, spearhead a committee, or approach government, and has been the chapter's medical advisor over the years. Largely due to Diane's hard work and well-honed skills in advocacy and persuasion, the number of bone density machines in Nova Scotia has steadily increased from three to eight allowing greater access to bone mineral density (BMD) testing within the province.

Diane's recent focus has been on the development of provincial Fracture Liaison Services (FLS) spearheading a multidisciplinary, nation-wide FLS working group. She acts as its Chair and Chief Scientific Officer. OC has embarked on a broad campaign to promote the implementation of FLS across Canada involving advocacy work to obtain government support/funding for FLS education to help ensure that FLS that will be implemented have the necessary processes in place to make them both effective and cost-effective.

Diane organized the original FOCUS (Fractures = Osteoporosis Care for Us) forum in Toronto in November 2011, the launch of Osteoporosis Canada's FLS toolkit on World Osteoporosis Day in 2013 and the spring 2014 FLS Summit

# EXCELLENCE

meeting held in Toronto. Diane was also the driving force behind OC's expert report, Make the FIRST break the LAST with Fracture Liaison Services, which examines the personal and financial burden of fractures and recommends a cost-effective model of care that has been proven to reduce the impact of osteoporosis and repeat fractures.



## Osteoporosis Canada-Canadian Multicentre Osteoporosis Study Fellowship Award

Lauren Burt, PhD

This collaborative award offers recipients the opportunity to gain new insight into the field of osteoporosis and provides the basis for a career in clinical/epidemiological research related to osteoporosis. Lauren Burt is thrilled to be this year's recipient of the Osteoporosis Canada CaMos Fellowship.

Lauren holds a Bachelor of Exercise Science (Honours) and a Doctor of Philosophy from the Australian Catholic University. Currently, Lauren is a postdoctoral fellow within the Bone Imaging Laboratory at the University of Calgary where she works on the Canadian Multicentre Osteoporosis Study (CaMos) under the supervision of Dr. Steven Boyd and Dr. David Hanley.

Her project is entitled "Transforming HR-pQCT for improved Clinical Diagnostic Applications: A Canadian Multicentre Osteoporosis Study". This work will produce a sex-and site-specific centile driven normative database for HR-pQCT parameters. Specific centile curves will be established at the radius and tibia for males and females. Being able to determine true age- and sex-related bone changes across the lifespan, with this high resolution imaging technology in a normal aging cohort may provide valuable information on bone quality, fracture risk and aging, not yet known.

# 50%

THE REDUCTION IN FUTURE FRACTURE RISK BY EFFECTIVE DRUG TREATMENTS FOR PATIENTS PRESENTING WITH FRAGILITY FRACTURES

# 80%

THE PERCENTAGE OF CANADIANS WHO SUFFER A FRAGILITY FRACTURE AND DO NOT RECEIVE TREATMENT FOR THEIR UNDERLYING OSTEOPOROSIS

# FINANCIAL

## Making A Difference

### Every Donation Counts

Osteoporosis Canada had Program Fund revenues of \$7,022,698 during the fiscal year ended March 31, 2015. The Program Fund financial operations yielded a surplus of \$119,989.

The Reserve Fund, excess of revenues over expenditures of \$64,339, ended the fiscal year at \$794,974. The Designated Bequest Fund, which represents funds donated for specific activities specified by the donor, ended the fiscal year with a balance of \$40,832.

The Research Fund, which is administered by the Finance and Audit Committee of the Board of Directors and is financially segregated from the Program Fund, ended the fiscal year with a balance of \$1,674,857. The Research Fund provides the financial resources for scientific research projects selected by the Scientific Advisory Council of Osteoporosis Canada.

On behalf of the Board of Directors, I would like to take this opportunity to thank the volunteers, staff and management of Osteoporosis Canada for their invaluable contribution to the success of our organization.



IAN MACNAIR  
Treasurer, National Board of Directors



# HIGHLIGHTS

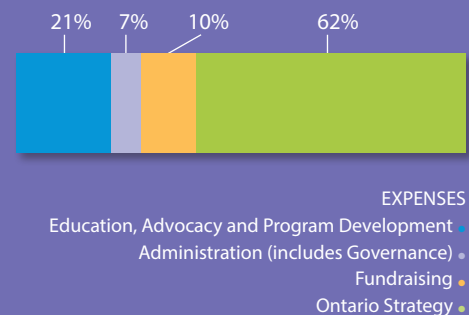
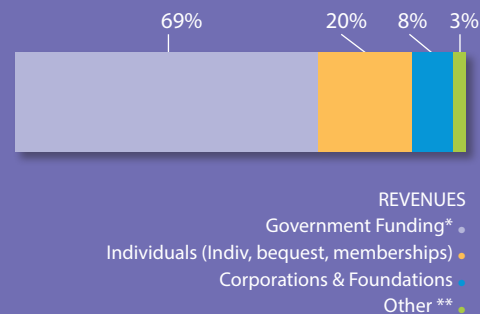
## Osteoporosis Canada Year ended March 31, 2015

Program Fund Revenues	F2015	
Government Funding*	4,816,998	69%
Individuals (Indiv, bequest, memberships)	1,457,311	20%
Corporations & Foundations	561,418	8%
Other**	186,971	3%
<b>TOTAL REVENUES</b>	<b>7,022,698</b>	

Program Fund Expenses		
Education, Advocacy and Program Development	1,451,743	21%
Administration (includes Governance)	495,817	7%
Fundraising	712,011	10%
Ontario Strategy	4,243,138	62%
<b>TOTAL EXPENSES</b>	<b>6,902,709</b>	

\*Ontario Ministry & Other Provincial Funding

\*\*Other, Program materials and Interest/dividends



## Scientific Advisory Council 2014-2015

ANGELA CHEUNG <i>Chair</i> MD, PhD, FRCPC University of Toronto	STEVEN BURRELL MD, FRCPC Dalhousie University	LISA-ANN FRASER MD, MSc, ABIM, FRCPC University of Western Ontario LORA GIANGREGORIO PhD University of Waterloo	ROBERT JOSSE MD, FRCP, FRCPC, FACP, FACE University of Toronto	HEATHER McDONALD-BLUMER MD, FRCPC University of Toronto	VICKY SCOTT RN, PhD University of British Columbia
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EARL BOGOCH MD, FRCSC University of Toronto	SID FELDMAN MD, CCFP, FCFP University of Toronto	ABIDA SOPHINA JAMAL MD, PhD, FRCPC University of Toronto	NORMA MACINTYRE BSc(PT), MSc, PhD McMaster University	LINDA PROBYN MD, FRCPC University of Toronto	SUSAN WHITING PhD University of Saskatchewan
JACQUES BROWN MD, FRCPC Université Laval	JULIO FERNANDES MD, MSc, PhD, MBA, FRCSC Université de Montréal	ELAINE E. JOLLY MD, FRCSC University of Ottawa	SUMIT MAJUMDAR MD, MPH University of Alberta	ROWENA RIDOUT MD, MSc, FRCPC University of Toronto	CHUI KIN YUEN MD, FRCSC, FACOG, MBA University of Manitoba
DEBRA BUTT MSc, MD, CCFP University of Toronto	HEATHER FRAME MD, CCFP Winnipeg, Manitoba		SHARON MARR MD, FRCPC, Med McMaster University	ANNA CAROL SAWKA MD, PhD, FRCPC University of Toronto	NESE YUKSEL Pharm.D. University of Alberta



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CHRISTINE THOMAS

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