Marlene’s Osteoporosis Journey

by MARLENE WALLACE

Marlene's Experience With Osteoporosis

I am a retired, 60-year-old nurse who has a family history of osteoporosis. My mother had osteoporosis but she was never diagnosed or treated before she died at 86 years of age. My older and younger sisters also have osteoporosis. In their cases, it was diagnosed early and well-controlled with both medications and lifestyle choices (e.g. diet and exercise).

A bone density test was performed when I was 45. Being a female and having a family history of osteoporosis are both significant risk factors for this condition that results in reduction of bone density. Not surprisingly, I was diagnosed with osteoporosis as well.

First Drug Experience: Fosamax

At first, my family doctor put me on Fosamax once a day. Taking daily doses of this bone-building drug was the only oral prescription medication option at the time. Daily dosing proved to be really inconvenient. I had to wake up earlier than I normally would as this drug has to be taken at least half an hour before any other food or medications. You also have to sit upright as one of the side effects of Fosamax is esophageal reflux.

On my doctor’s recommendation, I also started to take daily doses of supplemental calcium and vitamin D. I still do to the present day. Thankfully, I love dairy products including milk, yogurt and cheeses, so, consuming lots of them is not an issue.

Weight-bearing exercise is also important in maintaining bone mass. Hence, I have incorporated walking into my daily routine. I also try to limit my intake of caffeinated beverages to one per day. Research has proven that caffeine robs the human body of its stores of calcium.

After a few years, pharmaceutical advancements allowed for Fosamax to be taken once a week, instead of daily. Eventually, once-a-month dosages were brought onto the market. Both of these developments allow for much more freedom and flexibility in diet as well as far fewer chances of experiencing bothersome side effects. I was much happier taking Fosamax when the monthly dosing option became available.

Being Put on Hormone Therapy

At 49, I was put on hormone replacement therapy (HRT) in addition to Fosamax. Decreasing levels of natural estrogens also contribute to the development of osteoporosis. After a few years, with my doctor’s approval, I discontinued HRT as studies showed that it can increase your chances of developing heart disease or breast cancer.

My bone mass gradually improved but only up to a point. Eventually my bone density test results showed that Fosamax was losing its effectiveness for some reason. After a discussion with my doctor, it was decided that I

would switch medications and start taking once-a-month doses of another bone-builder known as Actenol.

I continued taking Actenol for a few more years and my bone mass gradually started to improve again. After having another bone density test, my doctor informed me that prescription medications were no longer required as my bone mass was significantly improved back to my “osteopenic’ levels (i.e. pre-osteoporosis density).

Osteoporosis is a “silent” disease meaning there are no outward signs and symptoms other than the possible development of a stooped posture if it is not detected early enough. It can also make some individuals particularly prone to painful bone fractures.

Fortunately, I have never sustained any bone fractures. Therefore, living with osteoporosis has not really affected my life all that much especially since I no longer take any prescription medications. However, I do still receive a bone density test every two years.

Major factors that aid in the successful management of osteoporosis are early detection/screening followed by a medically supervised treatment plan that includes healthy diet choices, calcium/vitamin D supplements and exercise.