



# Osteoporosis: register

NICE indicator

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www.nice.org.uk/indicators/ind90

## **Indicator**

The contractor establishes and maintains a register of patients:

- aged 50 or over and who have not attained the age of 75 with a record of a fragility fracture on or after 1 April 2012 and a diagnosis of osteoporosis confirmed on DXA scan, and
- aged 75 or over with a record of a fragility fracture on or after 1 April 2014 and a diagnosis of osteoporosis.

## Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our menu of indicators.

To find out how to use indicators and how we develop them, see our <u>NICE indicator</u> process guide.

#### Rationale

Fragility fractures are fractures that result from mechanical forces that would not ordinarily result in fracture, known as low-level (or 'low energy') trauma. Reduced bone density is a major risk factor for fragility fracture. Other factors that may affect the risk of fragility fracture include the use of oral or systemic glucocorticoids, age, sex, previous fractures and family history of osteoporosis. There is increased bone loss after the menopause in women, and age-related bone loss in both women and men. Identifying people with a fragility fracture and a diagnosis of osteoporosis enables treatment initiation to prevent further fractures.

## Source guidance

- Osteoporosis: assessing the risk of fragility fracture. NICE guideline CG146 (2012, updated 2017)
- Raloxifene for the primary prevention of osteoporotic fragility fractures in postmenopausal women. NICE technology appraisal guidance 160 (2008, updated 2018)
- Raloxifene and teriparatide for the secondary prevention of osteoporotic fragility fractures in postmenopausal women. NICE technology appraisal guidance 161 (2008, updated 2018)

## Specification

A register of people with a diagnosis of osteoporosis.

**Exclusions: None** 

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

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