

Osteoporosis – A Tibb perspective



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World Osteoporosis Day is on 20 October. It launches a year-long campaign dedicated to raising global awareness of the prevention, diagnosis and treatment of osteoporosis.

As we grow older, our bones gradually become thinner, weaker and more liable to break. This common condition is called *osteoporosis*. It results from a slow and insidious loss of minerals and protein from our bones, making them more fragile. This leaching of strength is encouraged by natural fluctuations in our hormones as we age.

Osteoporosis is, unfortunately, not curable. The bone we have lost over the years cannot be re-built. However, osteoporosis can be prevented or slowed down by simple changes to our lifestyle, if they are adopted early enough. What's more, the chances of breaking a bone in a fall can be reduced by a number of basic actions.

Osteoporosis can affect any of our bones, but our hips, wrists and spine are particularly vulnerable. It is more common than many think; about one-third of mature women have it, and one in twelve men. It is very prevalent in women after

Osteoporosis has been called "Nature's cruel trick on women".

menopause, due to the shutdown of glands – the ovaries – that make oestrogen hormones, which help to conserve our bone mass and strength.

Those of us who develop osteoporosis may get the occasional aches and pains, but it is usually painless, and there are few, if any, typical symptoms, especially in its early stages. It cannot even be detected by normal X-rays, until it is well advanced. Specialised equipment is needed.

We only become aware that we have it when it is really too late to prevent it. We may have a minor fall, but it may result in a broken hip or wrist, or one of the bones in our spine suddenly crumbles, resulting in severe pain, loss of height and much reduced mobility. The curved spine, typical of severe osteoporosis and dreaded by most of us, will appear.

Following a bone break, our Quality of Life plummets, especially if the bone affected is one of our hip bones. Our general mobility is usually severely restricted, everyday chores become onerous, and we become very dependent on

those close to us. Our domestic, social and job situations turn bleak, and we invariably (and understandably) become depressed.

What can we do about it? Regrettably, it cannot be cured; little can be done to reverse our osteoporosis. We can, however, do quite a lot to slow down its progress. As with many chronic disorders, prevention is much better than cure. The conventional approach is through drugs such as the bisphosphonates (such as *Fosomax*), calcium and vitamin

Some risk factors are a poor diet in childhood, smoking and excessive drinking, slim physique, little physical activity, and a family history of it.

supplementation and various hormone therapies. Their efficacy varies according to the stage of osteoporosis, but their unwanted side effects, especially over the longer-term, can be severe and lead to treatment being curtailed.

Any treatment for preventing or treating osteoporosis should support and encourage self-healing. It certainly should not oppose or counteract it. In Tibb this means Physis, our 'inner doctor'. There are a number of herbs, single or in combination, which can help us here. Lifestyle measures to ensure we take adequate rest, and sleep properly, should be adopted.

Tibb takes a dual approach to preventing osteoporosis from developing, and treating it when it appears. First, Tibb encourages us to take up a positive lifestyle in our adolescence and early adulthood, when bone mass and strength reach their peak, and keep to it through the years. The key to good bone health is the good quality food and drink, especially when we are young. Oily fish such as sardines, tuna and pilchards provide essential calcium and protein, and they should be a regular part of our diet. Fruit, vegetables, nuts and seeds should also be included. All should be taken with plenty of quality drinking water.

Other lifestyle advice includes taking up regular, low-impact, light to moderate physical exercise, such as walking, aerobics, Tai-Chi and jogging. Strenuous, high impact exercises should, however, be avoided. Some people who are bed-ridden for long periods develop osteoporosis, so light physical activity should be encouraged where possible.

To better absorb minerals, whether from our food or from supplements, we should ensure our vitamin D₃ levels are adequate. Fortunately we live in a 'sunshine-blessed' country, and a short exposure (as little as 10 to 20 minutes daily) to sunlight provides us with enough of this vitamin.

There are also some foods which we should avoid, such as high protein red meats, deep fried foods and smoked, pickled or processed foods. Our regular alcohol use (or abuse) should be examined, and reduced if possible. Dairy products, apart from yoghurt, are not recommended: strange, but true.

Second, the risk of our having a fall should be reduced. Many of us are taking prescription drugs for other chronic disorders such as hypertension, arthritis, insomnia and depression. These drugs often drive down our blood pressure, which can lead to confusion and fainting, especially in the early hours, and possibly a broken bone from a serious fall. Herbal therapy is worth considering here, either as a substitute for the drugs, or diminish their side effects.

For the foreseeable future, a major challenge will be the prevention of osteoporosis and its consequences. From the Tibb perspective, the bedrock of prevention is a healthy lifestyle and a meaningful reduction in destructive habits. Ideally this should be adopted in the formative years of childhood and early adulthood for maximum benefit.