

## Fracture Liaison Service – Bone Health Assessment

What the NHS should provide for people over 50 who have broken a bone after falling from standing height or less (Fragility fracture)

### What is a Fracture Liaison Service?

People who have suffered a fragility fracture are at higher risk of breaking another bone; either the same bone again or another bone in the body. East Sussex Healthcare Fracture Liaison Service (FLS) consists of a team of nurses, doctors, and administrative staff who provide people with the care that is necessary to reduce this risk.

### What should happen?

After a fragility fracture it is best practice that you receive a bone health assessment. The FLS Specialist Nurses use blood tests, DXA (Bone Density Scans) and assessment tools to calculate your risk of future fracture.

To complete this assessment, you will need to give details by completing and returning a patient questionnaire with details of your age, gender, height and weight, and whether you have certain related conditions.

### When should this happen?

Following your fracture the FLS administration team will send you a questionnaire to complete. Once we have received the completed questionnaire the FLS team will arrange the required blood tests and DXA scans (for patients aged 50-75). When FLS receive all the results FLS will complete the assessment then arrange a telephone appointment with you to discuss the findings and recommendations.

### What are the symptoms that have led to me having this assessment?

Bones should be strong enough to sustain falls from standing height: a fracture can be a warning sign that bone strength may be reduced. The NHS should provide people over 50 who have broken a bone after falling from standing height or less a Bone Health Assessment.

### Why is this important?

A bone health check aims to find out whether you are at risk of osteoporosis or other conditions that can cause reduced bone density and fractures. The aim is to reduce the risk of further fractures, if required treatments to strengthen bones may be recommended to you and your GP.

### What are the expected benefits of the assessment?

- A timely assessment is required as the risk of having a further fracture is increased in the first 2 years in all patients over 50yrs and over.
- Early detection of Osteoporosis and other conditions which reduce bone density will allow you to start treatment earlier to improve your bone health.
- FLS nurses can arrange the right treatments for you - they improve how you will take your medication if required
- Reduce your uncertainty about whether you need treatment to stop another broken bone.

## Information

DXA (dual-energy X-ray absorptiometry) scans for patients aged 50-75.

This is a test that assesses whether you have normal bone density or low bone density and can detect:

- Osteopenia, preferably known as "low bone mass" or "low bone density", is a condition in which bone mineral density is low.
- Osteoporosis is a disease characterized by low bone mass and structural deterioration of bone tissue, with a consequent increase in bone fragility and susceptibility to fracture.

When you have a DXA scan, you will not need to go into a tunnel or have an injection. Instead, you lie on your back on a flat, open X-ray table. You'll need to keep very still during the scan so the images are not blurred. The scan will usually be carried out by a radiographer, a specialist in taking X-ray images (Royal Osteoporosis Society 2021)

DXA scans are not routinely taken for patients over 75yrs old as underlying age related changes to bone can give false high reading of bone density and are therefore less reliable.

## Other sources of information on NHS Bone Health Assessments:

**Royal College of Physicians** - Strong bones after 50 Fracture liaison services explained: A guide for patients, carers and families What the NHS should provide for people over 50 who have broken a bone after falling from standing height or less.

Strong bones after 50 - Fracture liaison services explained

<https://www.rcplondon.ac.uk/guidelines-policy/strong-bones-after-50-fracture-liaison-services-explained>

Royal Osteoporosis Society – information leaflets on Osteoporosis

<https://theros.org.uk/information-and-support/fact-sheets-and-booklets/>

## Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

## Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 (direct dial) or by email at: [esh-tr.patientexperience@nhs.net](mailto:esh-tr.patientexperience@nhs.net)

## Hand hygiene

The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

## Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department:

Tel: 0300 131 4434 – Email: [Esh-tr.accessibleinformation@nhs.net](mailto:Esh-tr.accessibleinformation@nhs.net)

After reading this information are there any questions you would like to ask? Please list below and ask your Fracture Liaison Nurse or GP

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**For advice or information contact: Fracture Liaison or your GP.**

Fracture Liaison Specialist Nurses  
Hastings & Rother – Conquest Hospital Tel: 0300 131 5177  
Eastbourne, Hailsham & Seaford - Eastbourne District General Tel: 0300 131 5177  
Email: [ESHT.fractureliaisonservice@nhs.net](mailto:ESHT.fractureliaisonservice@nhs.net)

**Reference**

The following clinicians have been consulted and agreed this patient information:  
Mr J Buchanan.

**The Clinical Specialty/Unit that have agreed this patient information leaflet:**  
Fracture Liaison Service. Telephone 0300 131 5177

Next review date: June 2024  
Responsible clinician/author: S Goldup, Fracture Liaison Specialist Nurse.

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