

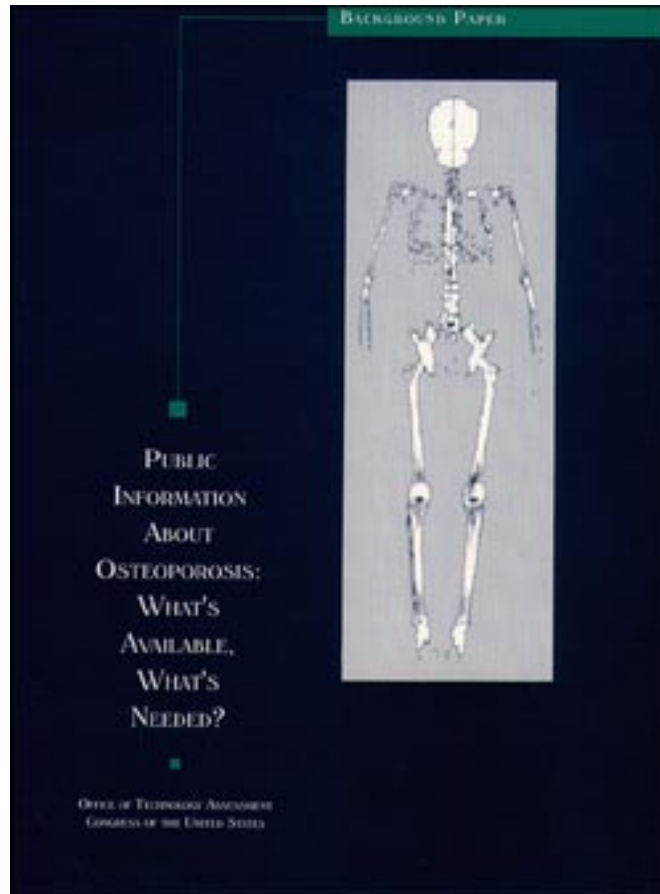
*Public Information About Osteoporosis:
What's Available, What's Needed?*

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Foreword

Many people have or are at risk of osteoporosis. Older white women are most likely to have osteoporosis, but younger women, men, and ethnic minority persons are also at risk. Although public awareness of osteoporosis has grown in recent years, most people are not knowledgeable about the disease.

Knowledge about osteoporosis is important because some proposed methods of prevention and treatment involve lifestyle behaviors, such as calcium intake and exercise, that require awareness and understanding for compliance. Other proposed methods of prevention and treatment involve the use of medications that may be recommended by a physician or other health care professional, but individuals must decide initially whether to contact a health care professional about osteoporosis and then whether to comply with the recommendations they receive. Public information is needed to help people make informed decisions about alternate methods of prevention and treatment.

This background paper describes the existing public information about osteoporosis and discusses problems that limit its usefulness, including problems in the dissemination and targeting of information to different types of people who have or are at risk of the disease. It also discusses problems that arise because of the way research findings are presented in the mass media and the widespread dissemination of information about medications that are available on the market but have not been approved by the FDA for osteoporosis. In 1993, Congress mandated the establishment of a national resource center on osteoporosis and related bone diseases. The analysis of problems with existing public information in this document suggests ways in which the new resource center and other organizations interested in the prevention and treatment of osteoporosis can increase public knowledge about the disease.

This background paper is one of four documents resulting from OTA's study of policy issues in the prevention and treatment of osteoporosis. Another background paper, *Hip Fracture Outcomes in People Age 50 and Over*, is also being issued in July 1994. Two other documents, one on the costs and effectiveness of screening for osteoporosis and the other on research and training issues in osteoporosis, will be issued later this year.



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Note: OTA appreciates the valuable assistance provided by the advisory panel members. The panel does not, however, necessarily approve, disapprove, or endorse this background paper. OTA assumes full responsibility for the background paper and the accuracy of its contents.

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