Clinical effectiveness

CLOSING THE GAP IN SECONDARY PREVENTION WITH A FRACTURE LIAISON SERVICE - THE ST PETER’S EXPERIENCE

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Introduction: Osteoporosis is an increasing problem in our aging population. Over 50% of patients presenting with a hip fracture have had a previous fragility fracture. Comprehensive implementation of NICE guidance for secondary prevention of osteoporosis following these “sentinel” fractures will prevent 50% of all future hip fractures.

Method: In 2010, we assessed the effectiveness of a “postal” FLS service whereby patients over the age of 50 with fragility fractures and their GPs were sent letters prompting osteoporosis assessment +/- treatment, following their fracture clinic appointment. Data was gathered between 12/04/10 to 23/07/10. Follow up phone calls were then made to assess whether these patients were assessed or treated for osteoporosis.

In this study, we compared the effectiveness of this service compared to our recently established Fracture Liaison Service (FLS), which has been in operation since November 2012. Data was collected from 12/11/12–11/05/13 (6 months)

Results: In 2010, we managed to contact 99 patients, of which 73% acknowledged the receipt of the letter from the Trust. From this population, 43 (60%) patients subsequently contacted their GP for an appointment and a further 13 patients were contacted by their GP. Total 56 patients had contact with their GP, of which 45 either had an osteoporosis assessment or were initiated on bone protective agents. Total assessed or treated = 45% (45/99)

In 2012-2013, 279 out of a possible 285 (97.79%) outpatients with fragility fractures were assessed by our Fracture Liaison Service and 98% (232/236) of patients were appropriately treated and assessed.

Conclusion: Capture rate for fragility fracture outpatient assessment and investigation has significantly improved with the introduction of a FLS. These figures are comparable to Glasgow data where 95-97% of their patients are assessed by an FLS.