

A Multidisciplinary Approach to Diagnosing and Managing Osteoporosis in Elderly Patients: Collaboration across Healthcare Disciplines for Comprehensive Care in Saudi Arabia

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Abstract

Osteoporosis is a prevalent condition among the elderly population in Saudi Arabia, leading to an increased risk of fragility fractures and associated complications. Managing osteoporosis in this age group requires a multidisciplinary approach involving collaboration among various healthcare disciplines. This article explores the roles of different healthcare professionals in providing comprehensive care for elderly patients with osteoporosis in Saudi Arabia, focusing on the importance of a coordinated and patient-centered approach. The article discusses the contributions of radiologists in diagnosis, pharmacists in medication management, laboratory technicians in assessing bone health, physiotherapists in developing exercise programs, nurses in patient education and care coordination, and health information technicians in documentation and information sharing. By highlighting the significance of interprofessional collaboration and a holistic approach to osteoporosis management, this article aims to provide insights into improving the quality of care and outcomes for elderly patients with this condition in Saudi Arabia.

Introduction:

Osteoporosis is a chronic condition characterized by decreased bone mass and deterioration of bone microarchitecture, leading to increased bone fragility and susceptibility to fractures (Ensrud & Crandall, 2017). In Saudi Arabia, the prevalence of osteoporosis among the elderly population is high, with studies reporting rates of up to 44.5% in women and 33.2% in men aged 50 years and above (Sadat-Ali et al., 2012). The aging population in Saudi Arabia, coupled with lifestyle factors such as low physical activity, vitamin D deficiency, and inadequate calcium intake, has contributed to the increasing burden of osteoporosis in the country (Alwahhabi, 2015).

The Saudi healthcare system, despite its modern facilities and advanced technology, faces challenges in providing comprehensive care for the growing elderly population with osteoporosis (Khaliq, 2012). Fragility fractures resulting from osteoporosis can have severe consequences, including pain, disability, reduced quality of life, and increased mortality risk (Sattui & Saag, 2014). Given the substantial impact of osteoporosis on the elderly population, it is crucial to adopt a multidisciplinary approach to diagnose and

manage this condition effectively.

This article aims to explore the roles of various healthcare disciplines in providing comprehensive care for elderly patients with osteoporosis in Saudi Arabia. By highlighting the importance of collaboration and coordination among these professionals, we seek to emphasize the need for a patient-centered, holistic approach to osteoporosis management.

Radiologist's Role in Osteoporosis Diagnosis:

Radiologists play a critical role in the diagnosis of osteoporosis, as they interpret imaging studies that assess bone mineral density (BMD) and identify fractures. The gold standard for measuring BMD is dual-energy X-ray absorptiometry (DXA), which is used to diagnose osteoporosis and assess fracture risk (Link, 2012). In Saudi Arabia, access to DXA scans has improved in recent years, with a study reporting that 73.1% of hospitals in Riyadh have DXA machines (Alwahhabi, 2015).

Radiologists interpret DXA scans and provide reports that include BMD measurements, T-scores, and Z-scores. These scores compare the patient's BMD to that of a young adult reference population and an age-matched population, respectively (Link, 2012). Radiologists also assess for the presence of vertebral fractures, which are common in osteoporosis but often go undiagnosed. Vertebral fracture assessment (VFA) can be performed using DXA machines or lateral spine radiographs (Ensrud & Crandall, 2017).

In addition to DXA and VFA, radiologists may use other imaging modalities to evaluate patients with suspected osteoporosis or fractures. Computed tomography (CT) and magnetic resonance imaging (MRI) can provide detailed images of the bone structure and help identify fractures that may not be visible on plain radiographs (Link, 2012).

Radiologists in Saudi Arabia need to be well-versed in the interpretation of BMD measurements and fracture assessment, as their reports form the basis for diagnosis and treatment decisions. They should also be aware of the unique challenges faced by the elderly population, such as the presence of degenerative changes or artifacts that may affect BMD measurements (Link, 2012).

Pharmacist's Role in Osteoporosis Medication Management:

Pharmacists play a vital role in the management of osteoporosis by ensuring appropriate medication use, monitoring for side effects, and providing patient education. The most common medications used to treat osteoporosis are bisphosphonates, which work by inhibiting bone resorption and increasing BMD (Pavone et al., 2017). Other medications include denosumab, raloxifene, and teriparatide, each with its own mechanism of action and potential side effects (Pavone et al., 2017).

In Saudi Arabia, pharmacists are responsible for dispensing osteoporosis medications and providing patients with information on proper administration, potential side effects, and the importance of adherence. They should be aware of the cultural and linguistic barriers that may affect medication adherence and work to address these issues through patient education and counseling (Alqahtani & Alghamdi, 2021).

Pharmacists also play a crucial role in monitoring patients for side effects and adverse reactions to osteoporosis medications. They should be familiar with the common side effects of each medication class and be able to recognize and manage these issues promptly. For example, bisphosphonates are associated with gastrointestinal side effects, such as esophageal irritation and ulceration (Pavone et al., 2017). Pharmacists can counsel patients on proper administration techniques and recommend strategies to minimize these side effects.

In addition to dispensing medications and monitoring for side effects, pharmacists in Saudi Arabia can contribute to osteoporosis management by identifying patients at risk for the condition and referring them

for BMD testing and evaluation. They can also collaborate with other healthcare professionals, such as physicians and nurses, to ensure that patients receive comprehensive care and follow-up.

Laboratory Technician's Role in Assessing Bone Health:

Laboratory technicians play an essential role in assessing bone health and monitoring patients with osteoporosis. They are responsible for performing and interpreting various biochemical tests that provide insight into bone metabolism and overall health status.

One of the most important tests for assessing bone health is the measurement of serum 25-hydroxyvitamin D (25[OH]D) levels. Vitamin D deficiency is a common problem in Saudi Arabia, with studies reporting prevalence rates of up to 81% in the general population (Habib et al., 2014). Vitamin D is essential for calcium absorption and bone mineralization, and deficiency can lead to osteoporosis and increased fracture risk (Habib et al., 2014). Laboratory technicians should be skilled in performing 25(OH)D assays and interpreting the results, taking into account factors such as age, gender, and seasonal variations.

Other biochemical markers of bone turnover, such as serum procollagen type 1 N-terminal propeptide (P1NP) and serum C-terminal telopeptide of type 1 collagen (CTX), can provide valuable information about bone formation and resorption rates (Kuo & Chen, 2017). These markers are useful for monitoring the response to osteoporosis treatment and identifying patients at high risk for fractures (Kuo & Chen, 2017). Laboratory technicians in Saudi Arabia should be familiar with the performance and interpretation of these assays, as well as their limitations and potential confounding factors.

In addition to bone-specific tests, laboratory technicians also play a role in assessing the overall health status of patients with osteoporosis. They may perform tests such as complete blood counts, renal function tests, and liver function tests to identify any underlying conditions or risk factors that may contribute to bone loss or affect treatment choices (Kuo & Chen, 2017).

Given the high prevalence of vitamin D deficiency in Saudi Arabia, laboratory technicians can also contribute to public health efforts by raising awareness about the importance of vitamin D testing and advocating for routine screening in high-risk populations, such as the elderly.

Physiotherapist's Role in Developing Exercise Programs:

Physiotherapists are essential members of the multidisciplinary team caring for elderly patients with osteoporosis in Saudi Arabia. They are responsible for developing and implementing exercise programs that improve bone health, reduce fracture risk, and enhance overall functional capacity.

Exercise is a key component of osteoporosis management, as it helps maintain bone mass, improve muscle strength, and reduce the risk of falls (Gómez-Cabello et al., 2012). Physiotherapists in Saudi Arabia should be knowledgeable about the types of exercises that are most effective for elderly patients with osteoporosis, taking into account their individual needs, preferences, and limitations.

Weight-bearing exercises, such as walking, jogging, and dancing, are particularly beneficial for maintaining bone mass in the elderly (Gómez-Cabello et al., 2012). Physiotherapists can design walking programs that gradually increase in duration and intensity, ensuring that patients start at a level appropriate for their fitness and progress safely over time.

Resistance training is another important component of osteoporosis exercise programs, as it helps improve muscle strength and balance, reducing the risk of falls (Gómez-Cabello et al., 2012). Physiotherapists can teach patients how to perform resistance exercises using weights, elastic bands, or body weight, focusing on major muscle groups such as the legs, hips, and back.

In addition to prescribing exercises, physiotherapists in Saudi Arabia should also educate patients about

proper posture, body mechanics, and fall prevention strategies. They can teach patients how to perform daily activities, such as lifting and bending, safely and efficiently to minimize the risk of fractures.

Physiotherapists should also be aware of the cultural and social factors that may influence exercise participation among elderly patients in Saudi Arabia. They should work to address any barriers to exercise, such as lack of access to safe exercise facilities or cultural beliefs that discourage physical activity in older adults.

Given the importance of exercise in osteoporosis management, physiotherapists in Saudi Arabia should collaborate closely with other healthcare professionals, such as physicians and nurses, to ensure that exercise programs are integrated into the overall treatment plan and that patients receive consistent messages about the benefits of physical activity.

Nurse's Role in Patient Education and Care Coordination:

Nurses are vital members of the multidisciplinary team caring for elderly patients with osteoporosis in Saudi Arabia. They play a key role in patient education, monitoring for complications, and coordinating care among the various healthcare professionals involved in osteoporosis management.

Patient education is a critical component of osteoporosis care, as it empowers patients to take an active role in their own health and treatment. Nurses in Saudi Arabia should provide patients with information about the nature of osteoporosis, its risk factors, and the importance of lifestyle modifications such as exercise, nutrition, and fall prevention (Alqahtani & Alghamdi, 2021). They should also educate patients about the proper use of medications, including how to take them, potential side effects, and the importance of adherence.

Nurses should be sensitive to the cultural and linguistic barriers that may affect patient education in Saudi Arabia. They should use culturally appropriate materials and communication strategies to ensure that patients understand and retain the information provided (Alqahtani & Alghamdi, 2021).

In addition to patient education, nurses in Saudi Arabia also play a crucial role in monitoring patients for complications and adverse events related to osteoporosis and its treatment. They should be familiar with the signs and symptoms of common complications, such as fractures, and be able to recognize and respond to these issues promptly.

Nurses are also responsible for coordinating care among the various healthcare professionals involved in osteoporosis management, such as physicians, pharmacists, physiotherapists, and laboratory technicians. They should ensure that all members of the team are aware of the patient's treatment plan, progress, and any changes in their condition.

To facilitate effective care coordination, nurses in Saudi Arabia should maintain accurate and up-to-date patient records, including medication lists, BMD test results, and exercise programs. They should also communicate regularly with other team members and participate in multidisciplinary meetings to discuss patient care and treatment decisions.

Given the chronic nature of osteoporosis, nurses in Saudi Arabia should also focus on promoting long-term adherence to treatment and lifestyle modifications. They should regularly follow up with patients to assess their progress, address any concerns or barriers to adherence, and provide ongoing support and encouragement.

Conclusion:

Osteoporosis is a significant public health concern in Saudi Arabia, particularly among the elderly population. Managing this complex condition requires a multidisciplinary approach that involves collaboration and coordination among various healthcare professionals, including radiologists, pharmacists,

laboratory technicians, physiotherapists, nurses, and health information technicians.

Radiologists play a critical role in diagnosing osteoporosis and assessing fracture risk using imaging modalities such as DXA scans and VFA. Pharmacists ensure appropriate medication use, monitor for side effects, and provide patient education to promote adherence. Laboratory technicians perform and interpret biochemical tests that provide insight into bone health and overall health status. Physiotherapists develop and implement exercise programs that improve bone health, reduce fracture risk, and enhance functional capacity. Nurses educate patients, monitor for complications, and coordinate care among the multidisciplinary team.

To effectively manage osteoporosis in elderly patients in Saudi Arabia, it is essential to foster a culture of collaboration and communication among these healthcare professionals. This can be achieved through regular multidisciplinary meetings, joint training sessions, and the use of standardized protocols and guidelines for osteoporosis care.

Furthermore, there is a need to address the unique cultural, social, and linguistic factors that may influence osteoporosis prevention, diagnosis, and treatment in Saudi Arabia. Healthcare professionals should work to develop culturally sensitive educational materials and communication strategies to engage patients and promote adherence to lifestyle modifications and treatment plans.

References:

1. Alqahtani, G. M., & Alghamdi, A. M. (2021). Assessment of osteoporosis knowledge among adult Saudi females attending the family medicine department at Security Forces Hospital, Riyadh, Saudi Arabia. *Journal of Family Medicine and Primary Care*, 10(3), 1209–1214. https://doi.org/10.4103/jfmpe.jfmpe_1810_20
2. Alwahhabi, B. K. (2015). Osteoporosis in Saudi Arabia. Are we doing enough? *Saudi Medical Journal*, 36(10), 1149–1150. <https://doi.org/10.15537/smj.2015.10.11939>
3. Ensrud, K. E., & Crandall, C. J. (2017). Osteoporosis. *Annals of Internal Medicine*, 167(3), ITC17–ITC32. <https://doi.org/10.7326/AITC201708010>
4. Gómez-Cabello, A., Ara, I., González-Agüero, A., Casajús, J. A., & Vicente-Rodríguez, G. (2012). Effects of training on bone mass in older adults: a systematic review. *Sports Medicine*, 42(4), 301–325. <https://doi.org/10.2165/11597670-000000000-00000>
5. Habib, F. M., Al-Motairi, W. A., & Al-Mutairi, W. M. (2014). Vitamin D deficiency: Knowledge and practice among adult Saudi females. *Global Advanced Research Journal of Medicine and Medical Sciences*, 3(4), 95-101.
6. Khaliq, A. A. (2012). The Saudi health care system: a view from the minaret. *World Health & Population*, 13(3), 52–64. <https://doi.org/10.12927/whp.2012.22875>
7. Kuo, T. R., & Chen, C. H. (2017). Bone biomarker for the clinical assessment of osteoporosis: recent developments and future perspectives. *Biomarker Research*, 5, 18. <https://doi.org/10.1186/s40364-017-0097-4>
8. Link, T. M. (2012). Osteoporosis imaging: state of the art and advanced imaging. *Radiology*, 263(1), 3–17. <https://doi.org/10.1148/radiol.12110462>
9. Pavone, V., Testa, G., Giardina, S. M. C., Vescio, A., Restivo, D. A., & Sessa, G. (2017). Pharmacological Therapy of Osteoporosis: A Systematic Current Review of Literature. *Frontiers in Pharmacology*, 8, 803. <https://doi.org/10.3389/fphar.2017.00803>
10. Sattui, S. E., & Saag, K. G. (2014). Fracture mortality: associations with epidemiology and osteoporosis treatment. *Nature Reviews Endocrinology*, 10(10), 592–602. <https://doi.org/10.1038/nrendo.2014.125>