

Implementation of Care for Osteoporosis Patients in The Netherlands: The Dutch Network of Fracture Liaison Services

A Survey on Fracture Liaison Services in the Netherlands

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Background

The fracture liaison service (FLS) is advocated for the prevention of secondary fractures, but its implementation varies between hospitals and countries. The present survey applied the standards proposed by the International Osteoporosis Foundation (IOF) to evaluate the implementation of FLSs in non-university hospitals in the Netherlands.

Materials & Methods

A questionnaire based on the IOF FLS standards was used in this study, requesting the selection, evaluation and treatment data of patients older than 50 years with a recent fracture.

Results

Of 90 invited hospitals, 24 (27%) fully responded, providing data of 24,468 consecutive patients, corresponding with 25% of fracture patients in the Netherlands in the year 2012. After excluding skull and toe fractures and patients exceeding the upper age limits applied by individual hospitals, 11,983 patient data were available for analysis. The data showed high compliance (>90%) for fracture patient identification, invitation for FLS, timing of assessment, identification of vertebral fractures, application of national guidelines, evaluation of secondary osteoporosis, drug initiation when indicated, communication with the general practitioner, application of follow-up strategy, and 70% for fall prevention. However, response rate of invited patients was only 49% on average.

Capture the Fracture® Best Practice Standards

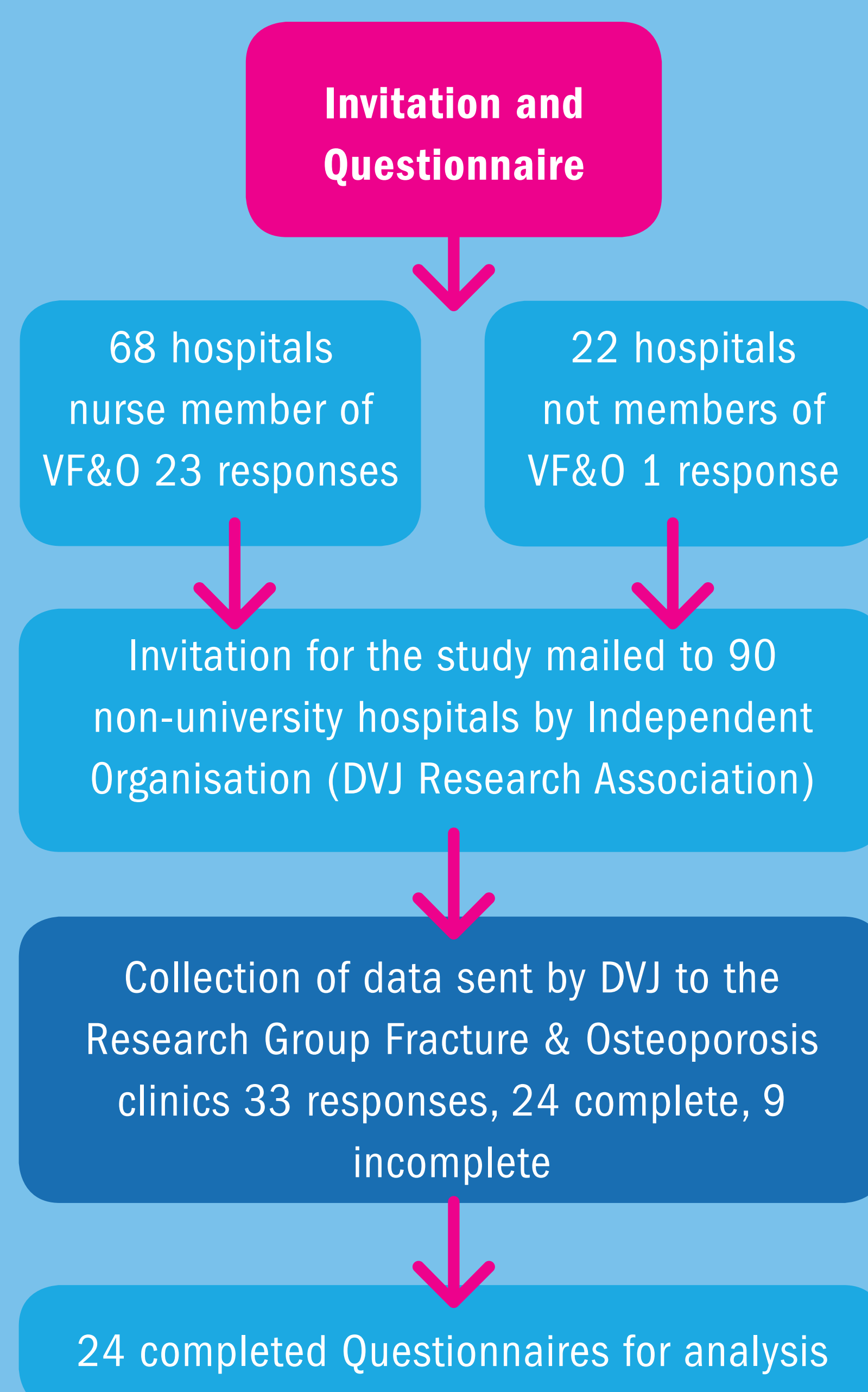
- 1 Patient identification Standard
- 2 Patient evaluation Standard
- 3 Post-fracture Assessment standard
- 4 Vertebral Fracture Standard
- 5 Assessment Guidelines Standard
- 6 Secondary Causes of Osteoporosis Standard
- 7 Fall Prevention Services Standard
- 8 Multifaceted health and lifestyle risk factor Assessment Standard
- 9 Medication Initiation Standard
- 10 Medication Review Standard
- 11 Communication Strategy Standard
- 12 Long-term Management Standard
- 13 Database Standard



Conclusions

The available data showed that patients attending the FLS were evaluated, treated and followed in high compliancy with IOF Best Practice Standards (CtF®). The major shortcoming in FLS practice was that patients invited to attend the FLS showed a low response rate. None of the hospitals achieved the optimal IOF standard patient response rate of over 90% .

Flowchart of inclusion of analysed FLSs



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