



## Strong Voices for Strong Bones Advocacy Training Meeting

Learn how government policies can make a difference for those at risk for or with osteoporosis and build and strengthen your successful advocacy skills at this free training sponsored by NOF (National Osteoporosis Foundation) and AZOC (Arizona Osteoporosis Coalition).

You are invited to attend  
**Strong Voices for Strong Bones**  
Free Advocacy Training Workshop  
Friday, June 6, 2008  
8:30 AM – 3:45 PM  
Fiesta Inn, Tempe  
<http://fitbones.org>

### Who should attend this meeting?

- Anyone with an interest in health issues, women's health or aging, such as senior center staff, volunteers or social workers.
- Health care professionals with an interest in osteoporosis and bone health across the life span, such as researchers, doctors, nurses, nurse practitioners, health educators, physical therapists, and recreation professionals, and public health staff.
- Women and men who suffer from osteoporosis and their family or friends

### Why should you attend this meeting?

- Learn how government policies can make a difference for those at risk for or with osteoporosis and women's health issues.
- Become more informed about osteoporosis public policy achievements and initiatives.
- Build and strengthen your successful advocacy skills so that you can communicate more effectively with lawmakers.
- Learn 4 keys to successful advocacy.
- Learn factors that influence and build long term relationships with elected officials.
- Discuss current NOF goals and objectives on Capitol Hill.
- Learn what you can do to keep osteoporosis legislation moving forward in Congress and how you can influence osteoporosis policy in your state.



A panel of state and regional experts will address barriers to prevention and osteoporosis health care and programs and policies that seek to overcome these hurdles.

Registration is **REQUIRED** by **May 27** for this **free** workshop including lunch. Complete registration form and agenda online at <http://fitbones.org> Call NOF at 1-800-231-4222 to register for the June 6<sup>th</sup> workshop.

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### May is Osteoporosis Prevention Month

**P**lan an event or display at your local worksite, place of worship or community center. Get the word out that osteoporosis is preventable and treatable.

### New Clinical Guidelines from NOF

**W**ashington, DC (February 21, 2008) – The National Osteoporosis Foundation (NOF) is releasing its new Clinician's Guide to Prevention and Treatment of Osteoporosis representing a major breakthrough in the way healthcare providers evaluate and treat people with low bone mass or osteoporosis and the risk of fractures. NOF's new Clinician's Guide introduces guidelines beyond Caucasian postmenopausal women to include African-American, Asian, Latina and other postmenopausal women, and addresses men age 50 and older for the first time.

Osteoporosis is a major public health problem that has both a medical and economic impact in the U.S. Fractures caused by either osteoporosis or low bone mass can lead to chronic pain, disability and even death, as well as psychological symptoms, including depression. Each year broken bones due to low bone mass or osteoporosis cause over 432,000 hospital admissions, almost 2.5 million medical office visits and about 180,000 nursing home admissions.

"NOF's new Clinician's Guide dramatically alters the approach to assessing fracture risk and treatment," said Bess Dawson-Hughes, M.D., chair of the Clinician's Guide Development Committee and past president of NOF. "The Guide provides evidenced-based recommendations to help healthcare providers better identify people at high risk for developing osteoporosis and fractures and assures that those at highest risk are recommended for treatment to lower that risk."

In this new Clinician's Guide NOF states that postmenopausal women or men over 50 with a T-score of -2.5 or lower at the hip or spine or with a prior hip or spine fracture should be treated.

For a complete copy visit their website at [www.nof.org](http://www.nof.org)

### Drinking Milk May Help Ease the Pressure

**N**ew study suggests fat-free milk may offer protection against hypertension – a rising risk for women in this country.

Women who drank more fat free milk and had higher intakes of calcium and vitamin D from foods, and not supplements, tended to have a lower risk for developing hypertension or high blood pressure, according to a new study published in the American Heart Association journal, *Hypertension*.

After examining the diets of nearly 30,000 middle-aged and older women, Harvard researchers found that women who consumed more low-fat milk and milk products and had diets higher in calcium and vitamin D from foods were better protected against high blood pressure. When the researchers investigated the benefits of milk specifically, they found women who drank two or more servings of fat free milk each day reduced their risk for high blood pressure by up to 10 percent compared to those who drank fat free milk less than once a month. The same was not found for higher fat milk and milk products or calcium and vitamin D supplement users.

One in three American adults has high blood pressure, and an increasing number of women are living with undiagnosed hypertension, according to a second study published in the journal *Circulation*. The last decade has seen significant increases in uncontrolled high blood pressure for women across the nation, a condition that puts them at serious risk for cardiovascular disease, stroke and even kidney failure.

Yet despite a vast body of research linking diet changes to blood pressure control, most Americans are still missing the mark on their diets. According to new research published in the Archives of Internal Medicine, Americans are ignoring the DASH (Dietary Approaches to Stop Hypertension) Diet, the therapeutic eating plan recommended by the National Heart Lung and Blood Institute that emphasizes low-fat dairy, fruits and vegetables to help reduce blood pressure levels.

Previous research has linked the DASH diet and lowfat or fat free milk to blood pressure benefits - one reason why the U.S. Dietary Guidelines for Americans recommend drinking three glasses of lowfat or fat free milk each day. Milk provides nine essential nutrients, including calcium, vitamin A, vitamin D, protein and potassium.

Source: [www.eurekalert.org/pub\\_releases/2008-02/wsw-dmm022008.php](http://www.eurekalert.org/pub_releases/2008-02/wsw-dmm022008.php)

## Bone Mass at Risk During Weight Loss

Overweight Americans are told to lose weight for better health. “Whatever it takes, lose the weight!” So the message goes. Often overlooked, however, is potentially serious bone loss that occurs along with some approaches to weight loss.

In general, overweight and obese people have stronger bones than their lower-weight counterparts of similar age. In fact, obese people generally have about 20 percent more bone mineral content than the average person. Consequently, those carrying some extra weight have less risk of developing osteoporosis and crippling bone fractures of the spine, hip, and wrist as they age.

Question: What happens to bones during weight loss?

Answer: It depends on how you lose the weight. A study conducted at the Washington University School of Medicine in St. Louis monitored two groups of people who lost a little more than one pound per month for a year. Half of them lost the weight by eating fewer calories, and the other half lost by increasing their physical activity. Despite the gradual rate of weight loss, the dieters lost bone mineral density from their spines and hips. The exercisers lost weight but not bone mass.

Question: Is it common for bone loss to accompany weight loss?

Answer: There is growing evidence that bone loss occurs in dieters. Rapid weight loss from cutting calories appears to be the hardest on bones. Some researchers consider this weight loss/bone loss association to be a serious and emerging problem that often follows the increasingly common types of obesity surgery.

Question: How can weight loss be done without bone loss?

Answer: First, don't aim for a specific goal body weight. Rather, seek to find the stable weight at which you function best – physically and mentally. If you are physically active, maintaining a stable weight, eating a balanced diet and without other risk factors for chronic diseases, your weight could be right for your genetics – even if it doesn't get you on the cover of a fashion magazine.

If you really do need to lose weight, do it with bone health in mind. Eat a balanced diet and burn more calories rather than cutting calories too much. Meet all

your nutrient needs – especially calcium and vitamin D. If you need to cut calories in your diet, mainly cut the fat calories, keep protein intake adequate and consider a multivitamin/mineral supplement.

Discuss your concerns about bone loss with your doctor and request an evaluation of your bone density before and during your weight loss so you know how your bones are doing. Don't let a bone fracture be the first sign of osteoporosis.

Source: Alan Titchenal, Ph.D., C.N.S. and Joannie Dobbs, Ph.D., C.N.S., University of Hawaii-Manoa and UH (University Health Services), *Honolulu Star-Bulletin*: 3/8/2008.



## Spring Celebration Orzo

Prep: 5 minutes; Cook: 10 minutes

- 8 ounces uncooked orzo
- 1 pound asparagus spears, cut into 2-inch-long slices (snap off rough ends before slicing)
- 1 cup frozen green peas, thawed
- 3 ounces fresh Parmesan cheese
- 1/2 teaspoon salt (may omit to reduce sodium content)
- 3 tablespoons fresh lemon juice
- 2 tablespoons extra-virgin olive oil
- 1/2 cup thinly sliced fresh basil leaves (about 10)

Cook orzo according to package directions. When 3 minutes of cooking time remain, add asparagus. Cook for 1 minute, then add peas and cook for the final 2 minutes. Drain.

Meanwhile use a vegetable peeler to make 12 curls of Parmesan. Grate remaining cheese and set aside.

Combine salt, lemon juice, and olive oil; whisk together. Toss orzo in lemon-juice mixture; stir in grated cheese and basil. Serve warm or at room temperature with Parmesan curls. Garnish with additional basil leaves, if desired. Yield: Makes 6 servings (serving size: 1 cup).

Nutrition Facts: Calories 281; Fat 10g (sat 3g, mono 5g, poly 1g); Protein 14g; Cholesterol 12mg; **Calcium 191mg**; Sodium 457mg; Fiber 4g; Iron 2mg; Carbohydrate 36g.

Source: *Health*, April 2008.

## Maricopa County News

### Osteoporosis Outreach Opportunity in June

Do you live near an Albertsons grocery store? If yes, can you volunteer several hours to staff an outreach display during the month of June? Bone Builders is joining with the Arizona Osteoporosis Coalition and Albertsons grocery and pharmacy stores to educate people in Maricopa County about their risks of osteoporosis and how to prevent it through nutrition and physical activity. Please contact Sharon at the UA Cooperative Extension at [shday@cals.arizona.edu](mailto:shday@cals.arizona.edu) or 602-470-806, extension 332 or Eva at 602-470-8086, extension 316 if you are interested in helping. The schedule is in process and possible dates include Wednesdays, Fridays, and Saturday mornings or afternoons.

### Volunteer Emails

We need to update volunteer emails on the Bone Builders database. Please let us know if you have a new email. Contact Eva Paz-Ono at 602-470-8086, ext. 316 or email her at [epazono@cals.arizona.edu](mailto:epazono@cals.arizona.edu).

Thanks for your cooperation.

### Volunteer Outreach

We are aware that many of you do outreach in your workplace, church, and community. Please remember we have free materials available to you. However, it is important that you document your outreach activities including event and hours on the enclosed Bone Builders Activity Report. This is essential to obtain funding for continuation of the program.

Thank you so much for all your efforts.

### Quarterly Volunteer Awards

Beginning July 1<sup>st</sup> we are implementing Quarterly Awards for our volunteers. Volunteers reporting their activity hours will be entered into a drawing for gift certificates and other prizes.



Please submit your reports to Eva at [epazono@cals.arizona.edu](mailto:epazono@cals.arizona.edu) after each event to be included in the drawing.

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A handwritten signature in black ink that reads "Sharon Hoelscher Day".

Sharon Hoelscher Day, Extension Agent, Family & Consumer Sciences  
Coordinator, Community Health Programs  
email: [shday@cals.arizona.edu](mailto:shday@cals.arizona.edu)



- Dr. Linda Larkey, Phoenix Area Director, Women's Cancer Prevention Research Initiative and Research Assistant Professor, College of Public Health
- Eva Paz-Ono, Program Coordinator, 602-470-8086, ext. 316, email: [epazono@cals.arizona.edu](mailto:epazono@cals.arizona.edu)
- Elizabeth Schnoll, Health Educator, 602-470-8086, ext. 324, email: [eschnoll@cals.arizona.edu](mailto:eschnoll@cals.arizona.edu)

If you have questions concerning access, wish to request a sign language interpreter or accommodations for a disability, please contact Sharon Hoelscher Day at [shday@cals.arizona.edu](mailto:shday@cals.arizona.edu) or 602-470-8086, ext. 332.