CLINICAL RESEARCH & OSTEOPOROSIS NEWSLETTER

A Publication of New Mexico Clinical Research & Osteoporosis Center

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Medicare Cuts Threaten Osteoporosis Care

rastic reductions in Medicare payments for bone density testing begin on January 1, 2007. Additional cuts are scheduled for each year until 2010. These cuts are so severe that most bone density testing centers will soon be forced to close their doors. This is an extremely serious situation that is likely to have a major impact on the care of osteoporosis in the US. Access to bone density testing may become limited to hospitals, the quality of testing may suffer, and comparison with previous tests may not be possible.

This is happening despite other federal initiatives that recognize that osteoporosis is underdiagnosed and undertreated. The US Surgeon General's Report on Bone Health and Osteoporosis encourages the use of bone density testing to diagnose osteoporosis before the first fracture occurs. More bone density testing rather than less is what is needed. Please consider contacting your legislators to tell them how you feel.

New Mexico Congressional Delegation

Senate Online: www.senate.gov

Senator Pete V. Domenici 328 Hart Senate Office Building Washington, D.C. 20510-3101 DC Phone: 202-224-6621 DC Fax: 202-228-3261

Senator Jeff Bingaman

703 Hart Senate Office Building Washington, D.C. 20510-3102 DC Phone: 202-224-5521 DC Fax: 202-224-2852

House of Representatives Online: www.house.gov

Representative Heather A. Wilson

(First Congressional District) 318 Cannon House Office Building Washington, D.C. 20515-3101 Phone: (202) 225-6316 Fax: (202) 225-4975

Representative Steve Pearce

(Second Congressional District) 1607 Longworth House Office Bldg Washington, D.C. 20515-3102 DC Phone: 202-225-2365 DC Fax: 202-225-9599

Representative Thomas Udall

(Third Congressional District) 1414 Longworth House Office Bldg Washington, D.C. 20515-3103 DC Phone: 202-225-6190 DC Fax: 202-226-1331

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Clinical Research

Our clinical research program is recruiting patients to participate in studies to test new medications and evaluate new uses for currently available drugs. By participating in a study you will have the opportunity to use one of these medications, have free examinations and tests. and receive reimbursement for your time and travel. If this interests you, please take a few minutes to read the major criteria for participation.

If you think you may qualify for a study, ask for Valerie White, the Research Manager or call the Research Dept. at (505) 923-3232.

Feel free to pass this newsletter to a friend or relative who may be interested. The drug study information will be updated quarterly, since we are continually starting new studies and closing out old ones. If there is nothing for you now, there may be next time.

Birth Control

This is a 12-month research study evaluating an investigational birth control pill. Subjects will receive either the investigational birth control pill or an approved birth control pill.

You may qualify for this study if:

This is a 59-week, open label, long

term safety study of an investiga-

tional treatment for moderate to

moderately severe pain associated

with osteoarthritis.

- You are a sexually active female between the ages of 18 and 50
- Are willing to use a birth control pill for 12 months
- In general good physical and mental health

Osteoarthritis

You may qualify for this study if:

- you suffer from osteoarthritis in at least one joint
- are between the ages of 45 and 80

2292

Senior Hypertension

This is a 36-week, randomized, double-blind, parallel group, active-controlled, optional titration study comparing an aliskirin-based regimen to a ramipril-based regimen in patients over the age of 65 with systolic essential hypertension.

You may be eligible to participate in this study if:

- You are over the age of 65
- Have been diagnosed with hypertension

2289

Hypertension

This is an 8 week study to evalu- • ate the efficacy of Telmisartan in combination with Ramipril in patients with Stage I or II hyperten- • sion.

You may qualify for this study if:

- You are 18 years of age or older
- You must be able to discontinue current hypertension medication.
- You must not be a night shift worker and awake from
- 12am-4am on a regular basis You must be able and willing to comply with the study for its duration

2277

Have pain and/or discomfort in

your upper abdomen for at least

Have a documented history of

Able and willing to comply

with the study for its duration

one week for the past month

functional dyspepsia

Functional Dyspepsia

This is a 16-week clinical research • study to assess the effect of a medication versus placebo in the treatment of functional (non-ulcer) • dyspepsia.

You may be eligible to partici- • pate if you are:

• Are 18-75 years of age

Treatment of Postmenopausal Hot Flashes

A 26-week research study in healthy postmenopausal women suffering from vasomotor syptoms (Hot Flashes). There are three different treatment phases: Blinded titration for 7 days, open-label treatment for 15 weeks and blinded tapering over 2 weeks.

You may qualify for this study if you are:

- Postmenopausal female
- Suffer from at least 7 hot flashes in a 24 hour period.
- Able and willing to comply with the study for its duration.

2294

2281

Irritable Bowel Syndrome

This is a an 8-week study to evaluate the safety and efficacy of an investigational medication compared with an FDA approved drug versus placebo for the relief of abdominal pain or discomfort in patients with IBS

You may qualify for this study if you are:

- At least 18 years of age and diagnosed with IBS
- Recurrent abdominal pain or discomfort occurring for the first time at least six months ago
- Able and willing to comply with the study for its duration. 2286

Type 2 Diabetes

This study is being undertaken to compare the effect of inhaled insulin in combination • with basal insulin therapy versus a premix of intermediate acting and rapid acting insulin. • You may qualify for this study if you:

- Have been diagnosed with diabetes for at least two years Are currently receiving a pre-/ self mixed insulin therapy 2-3
- times daily Non-smoker between the ages of 18 and 80

2280

Osteoporosis Foundation of New Mexico

Free Educational Presentations

2nd Thursday of every month: Rehabilitation Hospital of New Mexico (formerly St. Joseph's Rehabilitation Hospital) 505 Elm St NE Albuquerque, NM 87102 1:30 - 3:00PM

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January 11, 2007 Steven Wong, M.A. "Improving Balance with Tai Chi"

February 8, 2007 Barbara Thorpe, CNP `Investigation of Sunlight Exposure-Vitamin D"

March 8, 2007 George Frazer "Strength Training Do's & Don'ts"

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The support group is open to the public. It is a great opportunity to talk to osteoporosis experts for as long as you want.

Consider attending if:

You have osteoporosis, You have a loved one with osteoporosis, or You are interested in learning more about osteoporosis.

> To RSVP your attendance call 338-6333

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Woman То Woman By Julia Chavez, CNP

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KEEPING OUR NEW YEAR'S RESOLUTIONS

The average person keeps their New Year's resolutions for two weeks or less.

If your resolution involves health habits such as exercising or weight loss, I encourage you to continue until it becomes habit. It is a wellknown fact that to create a new habit you have to go through the process at least 21 days in a row.

If you make some health lifestyle changes, you can de-|| crease your risks for heart atl tacks, strokes and diabetes. I You will also look and feel better. In our society, a large percentage of us are overweight or obese. Watching what we eat and exercising will help.

Let's make this the year that we "get health".

Happy 2007!

Looooooooooooooooooo

Do You Have the Flu?

- This is a one month research study to assess the outcomes of • patients presenting within 48
- hours of developing flu symp- toms:

You may qualify for this study is you are:

- Over the age of 18
- Have flu symptoms for no more than 48 hours
- Willing and able to comply with the study for its duration

2296

Male Osteoporosis

This is a one year clinical re- • search study testing ibandronate • for treatment of osteoporosis in men.

- A male between 30 and 79
- Have a diagnosis of Osteoporosis
- Able and willing to comply with the study for its duration

2283

You may qualify for this study if you are:

Severe Osteoporosis

This is a one-year clinical re- • search trial testing an investigational treatment for severe osteoporosis in postmenopausal • women.

You may be eligible to par- • ticipate if you are:

- Are post-menopausal female between 45-89 years of age
- Have been diagnosed with severe osteoporosis
- Able and willing to comply with the study for its duration 2293

Osteopenia

This is a one year, double You may be eligible to particiblinded, research study to assess pate if you are:

- the effects, safety and tolerabil- ity of Vitamin D analog on bone mineral density in postmeno- •
- pausal women with osteopenia

- A post-menopausal female between 55-80 years of age
- Diagnosed with Osteoponia
- Are able and willing to comply with the study for its duration.

2295

All study-specific information is IRB approved. To learn more about any study, call (505) 923-3232.

Old folks are worth a fortune, with Silver in their hair, Gold in their teeth, Stones in their kidneys, Lead in their feet and Gas in their stomachs.

I have become a lot more social with the passing of the years. Some might say I'm a frivolous gal. I'm seeing Five Gentlemen everyday.

As soon as I wake, Will Power helps me get out of bed. Then I go see John. Then Charlie Horse comes along and when he is here, he takes a lot of my time and attention. When he leaves, Arthur Ritis shows up and stays the rest of the day. He doesn't like to stay in one place very long, so he takes me from joint to joint. After such a busy day, I'm really tired and glad to go to bed with Ben Gay. What a Life!

PS: The preacher came to call the other day. He said that at my age, I should be thinking about the Hereafter. I told him "I do, all the time, No matter where I am, in the parlor, upstairs, in the kitchen, in the yard, etc., I ask myself, What am I hereafter?"



Ask Dr. Mike Lewiecki about OSTEOPOROSIS

Dear Dr. Lewiecki– I know that I need calcium to keep my bones healthy, but there are so many kinds in the store that I get very confused. What is the best calcium and how should I take it? *Eva C. Albuquerque*, *NM*.

Dear Eva– You are not alone in being bewildered by the vast assortment of calcium preparations that are widely advertised and on the shelves at many stores. The good news is that it is usually not very complicated. Let me explain what we all need and how we can get it.

Our bodies lose about 1200 mg of calcium each day, mostly in the intestines and urine. If we do not put at least this much back into our bodies, there will be a loss of calcium and eventually a loss of bone. It is probably best to replace this lost calcium with foods that are naturally high in calcium. Dairy products are the best dietary source of calcium. A quart of milk, for example, contains about 1200 mg of calcium and can supply all we need for the day.

Unfortunately, most of us have diets that are calcium deficient, so we need to get the extra calcium some other way. This can be in the form of foods or drinks that are fortified with calcium, or by calcium supplements. The two most kinds common of calcium supplements are calcium carbonate and calcium citrate. Both of these are fine, but no more than 600 mg should be taken at one time, since larger doses will not be well absorbed. Also, keep in mind that it is best to take calcium carbonate with a meal or snack, while calcium citrate can be taken either with food or on an empty stomach. If you have had kidney stones in the past, it might be best to take calcium citrate.

Some people become constipated with calcium. If that is the case, it is worth trying a preparation that combines calcium and magnesium. The laxative effect of the magnesium may counteract the constipating effect of the calcium. A calcium product that contains vitamin D provides some added benefit to help with calcium absorption.

Sincerely,

MORE ON CALCIUM AND VITAMIN D

Since calcium is the main mineral component of bone, it makes sense to take enough of it (about 1200 mg) every day to replace the natural losses. Someone with osteoporosis must take even more (about 1500 mg) to increase the amount in the bones. Vitamin D provides a big boost for absorption of the calcium in the intestines. Research studies have shown increases in bone density and fewer broken bones in patients treated with drugs AND calcium and vitamin D. These drugs may not work as well if there is a deficiency of calcium and vitamin D. It is not necessary to pay premium price for heavily advertised calcium products. Any of the well known brand names from reputable companies are fine.

Most experts now feel that it is better to take vitamin D3 (cholecalciferol) than D2 (ergocalciferol), and that we probably need at least 1000 IU per day to get enough. If there is any question on whether the dose is right, a simple blood test can to done to find out.



Support osteoporosis education in New Mexico. Help to reduce the burden of osteoporotic fractures. The Osteoporosis Foundation of New Mexico is a local non-profit 501(c)(3) foundation. Consider a tax-deductible donation or bequest. Donations may be mailed to Osteoporosis Foundation of New Mexico at 300 Oak St. NE, Albuquerque, NM 87106. For more information, call Yvonne Brusuelas at 505-855-5627.

To participate in clinical research studies, call (505) 923-3232.

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