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Executive Summary

Osteoporosis (porous bones) increases the risk of breaking a bone after a slight bump or fall, the wrists, spine and hip are most commonly affected. 1 in 2 women and 1 in 5 men over 50 will suffer at least one fragility fractures in their lifetime. Hip fractures account for around 87% of government spending on fractures, costing an estimated £2.1 billion. This is not surprising considering that hip fractures invariably require hospitalisation and operative intervention and around 25-75% of patients do not recover their pre-injury functional status. Prevention through education has been the charities rubric since its inception in 1992. Osteoporosis Dorset has relentlessly campaigned for the last two decades to improve bone health in the County. The charity has played a key role in raising awareness, it has a track record of providing health care professionals and the public with 'free' high quality evidence based information via a concerted programme of 'activity'. This has played a key role in raising awareness and increasing public interest in falls and bone health. Our peer support programmes have the potential to heighten motivation, improve function, adherence to treatment, resulting not just in better clinical outcomes but the development of a network of social support and lifelong friendship. Much of the push in the local Health Community to improve services for falls and fragility fractures has come from the voluntary sector i.e. Osteoporosis Dorset. In this era of restricted healthcare budgets, in the next five years, as in the previous two decades much change must be driven 'bottom up' by the charities clinical lead. There are imminent opportunities i.e. a specific Quality and Outcomes Framework standard for bone fragility will go into the GP contract for 2012-13; and threats i.e. decreased NHS funding with which the charity has to contend. The charity is in a unique position of being able to rise to this challenge and benefit not only individual patients, but the Dorset Health Community.

Over view and background

Osteoporosis literally means porous bones. It is a disease characterised by low bone mass and deterioration in the micro-architecture of bone tissue, leading to an increased risk of breaking a bone after a slight bump or fall. These are known as fragility fractures and occur most frequently in the vertebrae (spine), wrist and hip. One in two women and one in five men aged over 50 will suffer at least one fragility fracture¹ in their lifetime.

In England in 2008-09 there were 210,000 fragility fractures, around 80,000 of which were hip fractures². Fragility fractures account for two million hospital bed days in the UK; a figure larger than in any other disease area including diabetes, ischaemic heart disease and chronic obstructive pulmonary disease³. The annual cost associated with fragility fractures is estimated to be £2.1 billion⁴⁵ with around 87% attributable to hip fracture care. In excess of 95% of all hip fractures occur as the result of a sideways fall directly on the hip, but for all these statistics falls and fractures happen to individuals, usually older people.

As half of all patients presenting with a hip fracture have suffered a previous i.e. 'signal' fracture, they represent an opportunity to intervene to reduce the risk of further fracture. For a fragility fracture at any site is associated with a twofold risk of further fracture, 80% of which occur in the first year following the initial fracture⁶. Although funding for the NHS has been protected in real terms it represents 'flat funding' after ten years in which the NHS has seen a real-terms income growth of around 5% per annum. While an ageing population, rising prevalence of long term conditions and increasing treatment costs, the potential financial gap over the next three years could be around £15-20 billion². One answer could be a greater focus on fracture prevention; Osteoporosis Dorset's rubric since its inception in 1992. Around 80% of the NHS budget will be given to clinical commission groups, GPs leading these groups will be accountable to the NHS commissioning board to deliver against a range of outcome indicators and quality standards e.g. "living well with a long term condition".

The Quality and Outcomes Framework (QOF) contains a range of performance indicators linked to financial incentives in the GP contract. A specific QOF standard for bone fragility will go into the GP contract for 2012-13; it could prove a powerful lever to improve the identification of those with bone fragility or fractures and the prescription of preventive treatment.

Adherence with both oral bisphosphonates and oral strontium ranelate is poor – typically <50% at nine months. This is unsatisfactory, considering that the optimum adherence for fracture prevention is >80% for five years. Adherence entails three behaviours on the part of the patient: starting the treatment, following the instructions for using it and persisting with it over time⁷. If patients with osteoporosis cannot tolerate or remember to take their oral medication, intravenous or subcutaneous treatments can be administered in the GP practice, thereby reducing the need for frail, elderly people to travel to hospital, as well as

saving the associated costs of treatment in an acute trust. The majority of chronic disease management in primary care is carried out by the practice nurse with support from a lead GP. Our experience shows that practice nurses are: keen to improve their knowledge of Osteoporosis, are a stable 'workforce'; once trained they remain in post for many years and are useful 'named' contacts for patients.

Osteoporosis Dorset has relentlessly campaigned for the last two decades to improve bone health in the County. The charity has played a key role in raising awareness, it has a track record of providing health care professionals and the public with 'free' high quality evidence based information via a concerted programme of 'activity' (see appendix A). This has played a key role in raising awareness and increasing public interest in falls and bone health. Our peer support programmes have the potential to heighten motivation, improve function, adherence to treatment, resulting not just in better clinical outcomes but the development of a network of social support and lifelong friendship (see Appendix B). Much of the push in the local Health Community to improve services for falls and fragility fractures has come from the voluntary sector i.e. Osteoporosis Dorset. In this era of restricted healthcare budgets, in the next five years, as in the previous two decades much change must be driven 'bottom up' by the charities clinical lead. If we successfully rise to this challenge, we will benefit not only individual patients, but whole NHS systems.

Osteoporosis Dorset will use its independent charitable status to fund the work programme regardless of NHS income (see Appendix C for forecast projections).

References

1. US Department of Health and Human services. Bone health and osteoporosis a report of the surgeon general. Rockville, MD: USDHHS, 2004;
2. Falls, fragility and fractures: lessons from the last decade and opportunities for the next. D Oliver and K Willett. Osteoporosis Review: Vol 19: Winter 2011;
3. Cooper AL. Expert opinion (2009) 'new guidelines for the treatment of osteoporosis', [online] available from www.mims.co.uk/news/879819/Expert-opinion-new-guidelines-treatment-osteoporosis (date accessed 03.01.12);
4. Department of Health (2009) 'Prevention package for older people resources', [online] available from www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_103146 (date accessed 03.01.12);
5. Oliver D. Development of services for older patients with falls and fractures in England, successes, failures, lessons and controversies. *Ach Gerontol Geriatr* 2009,49 (suppl2): S7-S12;
6. Langridge CR, McQuillan C, Watson WS et al. Refracture following fracture liaison service assessment illustrates the requirement for integrated falls and fracture services. *Calcif Tissue Int* 2007, 81:85-91;
7. Jackson C, Horne R. Improving adherence to osteoporosis therapies. *Osteoporosis Bulletin*, Summer 2010.

Work Programme 2012 onwards

Area covered



NHS Foundation Trusts covered by the charity

Dorset County Hospital NHS Foundation Trust
Dorset Healthcare University NHS Foundation Trust
The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust
Poole Hospital NHS Foundation Trust

Community Hospitals covered by the charity

Blandford Community Hospital
Bridport Community Hospital
St Leonards Community Hospital
Swanage Community Hospital
Weymouth Community Hospital
Yeatman Community Hospital

GP Surgeries covered by the charity

139 GP Surgeries in Dorset

Services the charity provides

Osteoporosis Dorset
prevention through education

the hub of a service

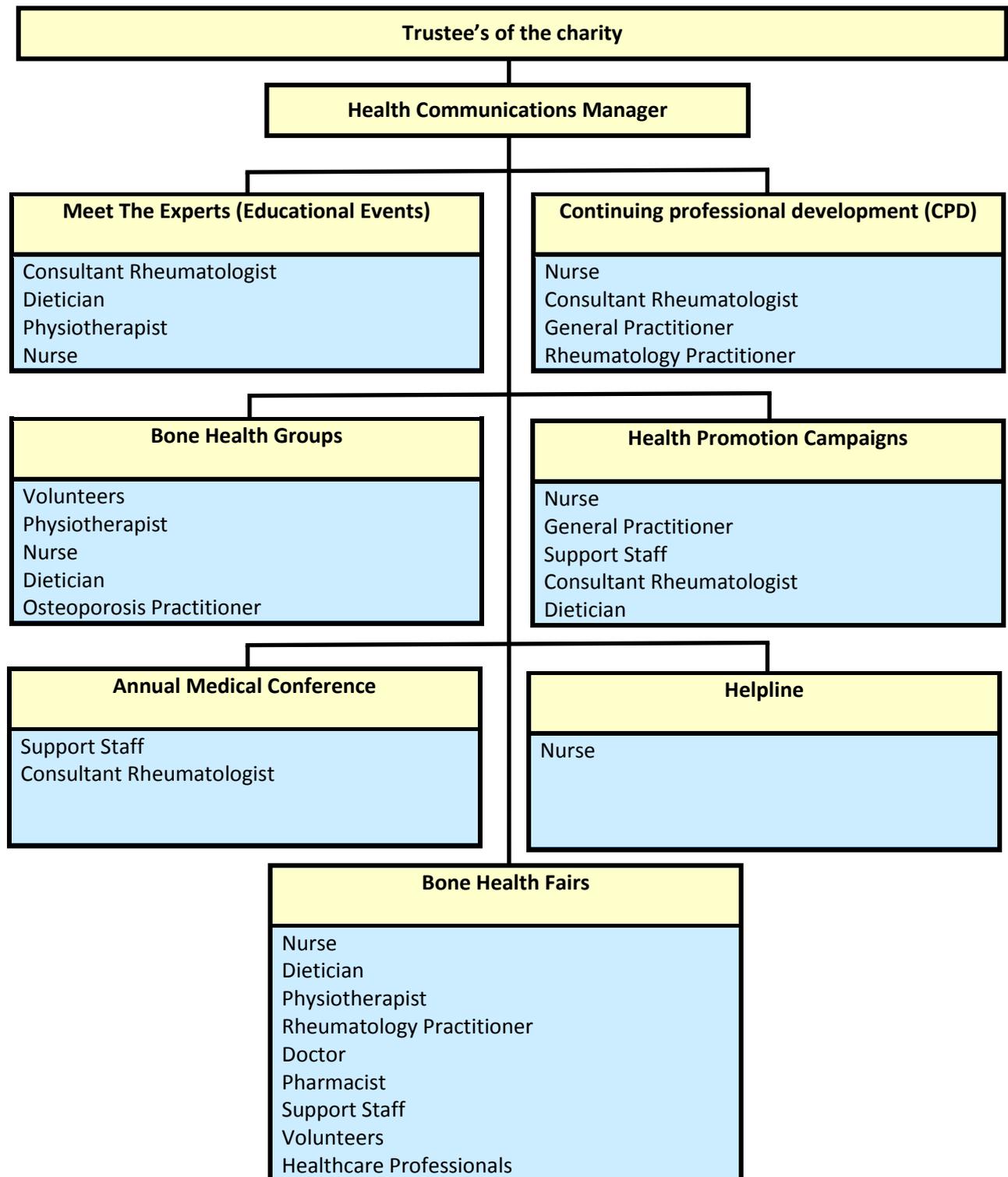
NHS Foundation Trusts	Community Hospitals	GP Surgeries	Patient
<ul style="list-style-type: none">• Meet The Experts (Educational Events)• Continuing professional development (CPD)• Annual Medical Conference (CPD)• Health Promotion Campaigns• Bone Health Fairs• Bone Health Groups• Helpline• Acts as a resource base	<ul style="list-style-type: none">• Meet The Experts (Educational Events)• Continuing professional development (CPD)• Annual Medical Conference (CPD)• Health Promotion Campaigns• Bone Health Fairs• Bone Health Groups• Helpline• Acts as a resource base	<ul style="list-style-type: none">• Meet The Experts (Educational Events)• Continuing professional development (CPD)• Annual Medical Conference (CPD)• Health Promotion Campaigns• Bone Health Fairs• Bone Health Groups• Helpline• Acts as a resource base	<ul style="list-style-type: none">• Meet The Experts (Educational Events)• Health Promotion Campaigns• Bone Health Fairs• Bone Health Groups• Helpline• Acts as a resource base

Evaluate service via survey – at time of delivery of service and follow at 6 months

Who benefits

Benefiting NHS organisations	
NHS Foundation Trusts Doctor's, Physiotherapists, Occupational Therapists, Pharmacists, DXA radiographers (Value added supporting the "jobbing" radiographer service), Orthopaedic Surgeons, Nurses	Dorset County Hospital NHS Foundation Trust Dorset Healthcare University NHS Foundation Trust The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust Poole Hospital NHS Foundation Trust
Community Hospitals Community Nurses, Doctor's, Physiotherapists, Occupational Therapists, Pharmacists, Nurses	Dorset Healthcare University NHS Foundation Trust Blandford Community Hospital Bridport Community Hospital St Leonards Community Hospital Swanage Community Hospital Weymouth Community Hospital Yeatman Community Hospital
GP Surgeries Practice Nurses, GP's, Pharmacists	139 GP Surgeries in Dorset
Patient	Dorset County Hospital NHS Foundation Trust Dorset Healthcare University NHS Foundation Trust The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust Poole Hospital NHS Foundation Trust Blandford Community Hospital Bridport Community Hospital St Leonards Community Hospital Swanage Community Hospital Weymouth Community Hospital Yeatman Community Hospital 139 GP Surgeries in Dorset

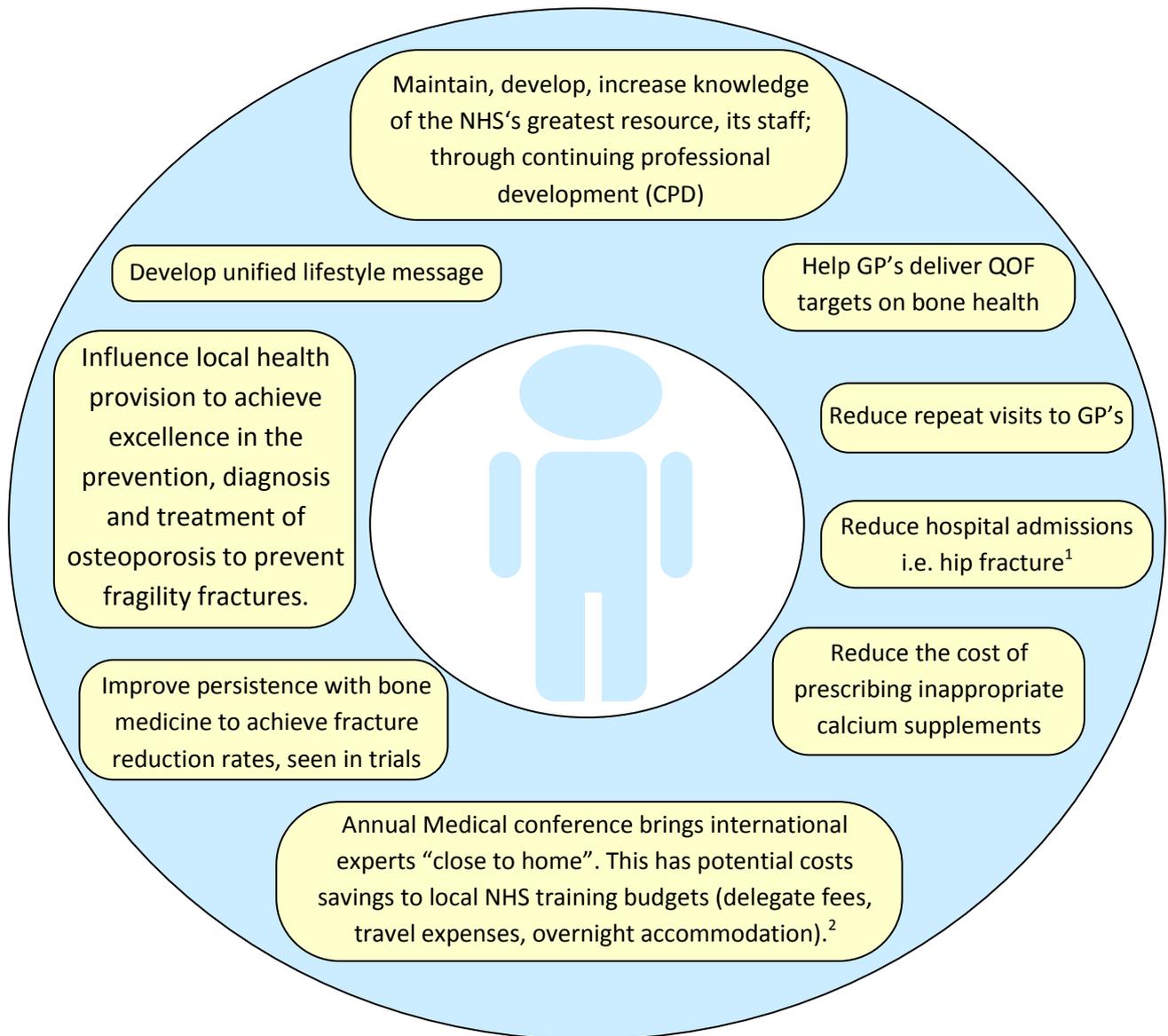
Project Management Structure



Plan for 2012

January	9 th Poole Bone Health Group
	17 th Verwood Bone Health Group
February	6 th Poole Bone Health Group
	8 th Meet The Experts (Educational Event) , Bournemouth
	21 st Verwood Bone Health Group
March	5 th Poole Bone Health Group
	15 th CPD training Weymouth
	20 th Verwood Bone Health Group
	22 nd CPD training Sherborne
	27 th CPD training Falls Team
	29 th Meet The Experts (Educational Event) , Poundbury
April	2 nd Poole Bone Health Group
	16 th CPD training Dorchester
	17 th Verwood Bone Health Group
	26 th West Dorset Bone Health Group
May	14 th Poole Bone Health Group
	15 th Verwood Bone Health Group
	23 rd Meet The Experts (Educational Event) , Bournemouth
	24 th West Dorset Bone Health Group
	CPD training Bournemouth (Pharmacists)
June	11 th Poole Bone Health Group
	18 th CPD training St Leonards
	19 th Verwood Bone Health Group
	28 th West Dorset Bone Health Group
July	2 nd Poole Bone Health Group
	17 th Verwood Bone Health Group
	26 th West Dorset Bone Health Group
	CPD training Swanage
August	6 th Poole Bone Health Group
	21 st Verwood Bone Health Group
	23 rd West Dorset Bone Health Group
	Meet The Experts (Educational Event) , Bournemouth
	CPD training St Leonards
September	3 rd Poole Bone Health Group
	18 th Verwood Bone Health Group
	27 th Meet The Experts (Educational Event) , Poundbury
October	1 st Poole Bone Health Group
	16 th Verwood Bone Health Group
	25 th West Dorset Bone Health Group
	28 th Annual Medical Conference, Bournemouth (CPD)
	29 th Annual Medical Conference, Bournemouth (CPD)
November	5 th Poole Bone Health Group
	20 th Verwood Bone Health Group
	22 nd West Dorset Bone Health Group
	Meet The Experts (Educational Event) , Bournemouth
December	3 rd Poole Bone Health Group

Potential benefits to the NHS

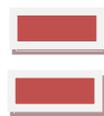


1. Broken bones caused by hip fracture are hugely expensive to treat and care for; the combined annual cost of hospital and social care for patients with a hip fracture in the UK is approaching **£2billion** per year.

The National Hip Fracture Database, National Report 2011

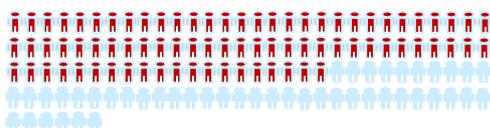


1 hip fracture

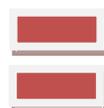


£37,423

2. Cost savings to NHS training budget, to attend our annual medical conference is **£26,251.20** (this doesn't include travel expenses, overnight accommodation)



80 Doctors and GP's, 46 Healthcare professionals

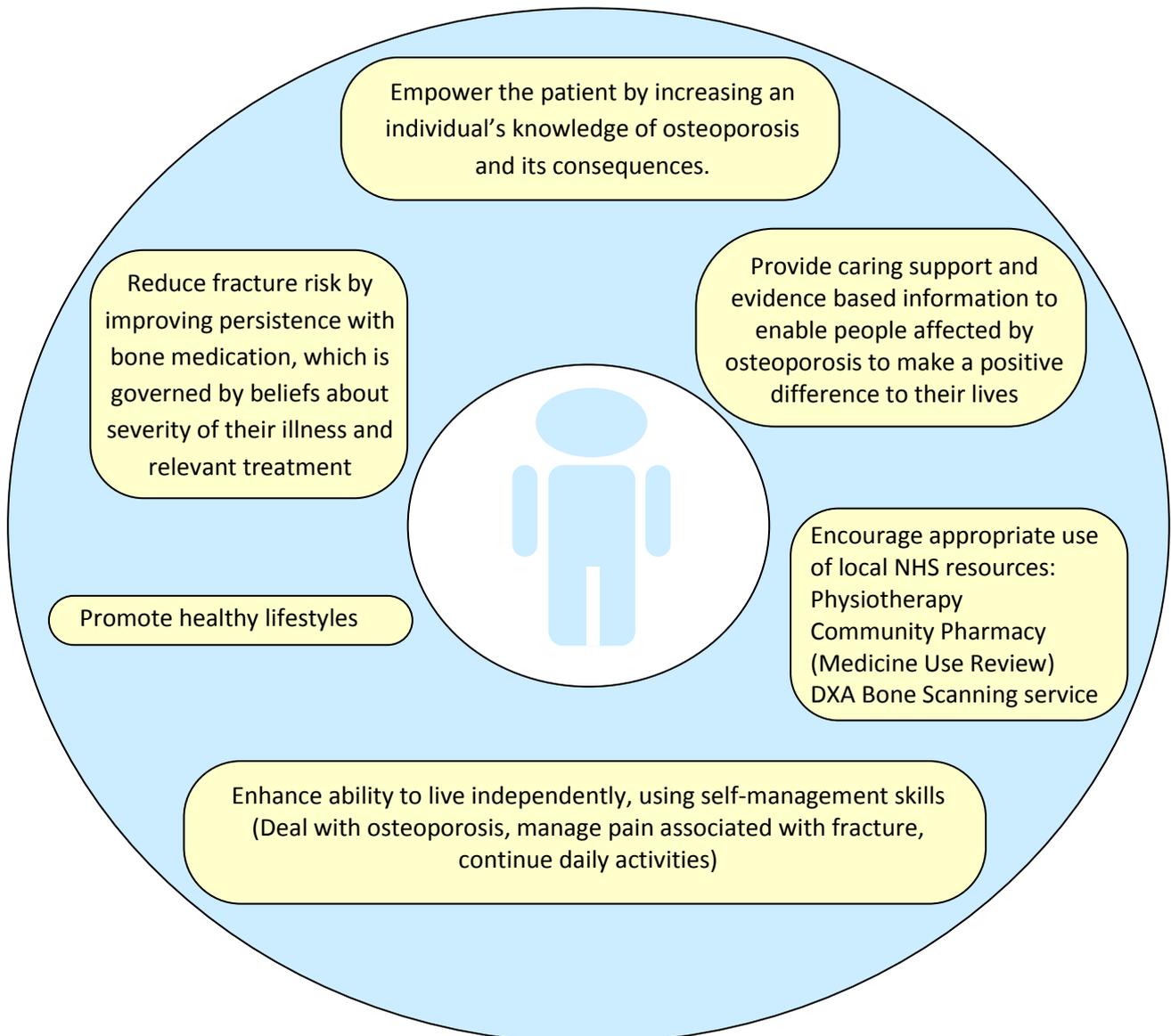


£26,251.20

Potential challenges for individuals with osteoporosis

- Lack of awareness/education regarding osteoporosis resulting in misconceptions, i.e. if they are a man, that they are suffering from a 'women's illness';
- Fear, anxiety regarding diagnosis and prognosis – 'feel they are going to shatter';
- 'Yet another condition', osteoporosis is secondary to another disorder, i.e. breast cancer and the individual is so emotionally overwhelmed that they do not treat osteoporosis as a priority;
- Difficulty with compliance with osteoporosis medication usage due to competing health problems, i.e. problems with digestion;
- Pain, associated with underlying condition, i.e. rheumatoid arthritis or fragility fracture;
- Impact of fragility fracture(s) on personal care (dressing), household and community activities (shopping);
- Financial, frequently on a fixed income, i.e. pension which could have an impact on lifestyle choices;
- Lack of self-esteem, due to changes in appearance (dowager's hump), which impacts on communication with GP, other healthcare professionals and the ability to access information and additional resources, i.e. benefits when required.

Potential benefits to the patient



Appendix A

2011 Educational and CPD programmes

Meet The Experts (Educational Event)



Osteoporosis Dorset
prevention through education

Over 1000 patients have attended one of our free educational events in 2011

How To Improve Your Bone Health

MEET THE EXPERTS

Wednesday 28th September
Heathlands Hotel, The New Forest Suite, Grove Road, Bournemouth, Dorset, BH1 3AY
Time: 2:00pm - 4:30pm

Programme Chair: Mrs Ruth Bussey, Trustee, Osteoporosis Dorset

2:00pm Welcome
Mrs Ruth Bussey, Trustee, Osteoporosis Dorset

2:05pm Why it pays to look after your bones
Mrs Carol Jones, Osteoporosis Dorset

2:30pm Healthy eating for stronger bones
Lisa Perkins, Community Dietitian

3:00pm Questions to Carol and Lisa

3:10pm Comfort Break

3:20pm Exercise for your bones and balance
Theresa Rowett, Physiotherapist, Poole Community Therapy Team

3:50pm All about osteoporosis
Dr Paul Thompson, Consultant Rheumatologist, Poole Hospital NHS Foundation Trust

4:20pm Questions to Paul and Theresa

4:30pm Finish

If you would like a **free** place at this meeting, please contact
Osteoporosis Dorset on 01202 443064

11 Shelley Road, Bournemouth, BH1 4JQ, www.osteodorset.org.uk, registered charity No:102350



Osteoporosis Dorset

prevention through education

a different perspective

Over 100 GP's had CPD training in 2011

NHS

In collaboration with:
Dorset County NHS Foundation Trust;
Poole Hospital NHS Foundation Trust;
The Royal Bournemouth and Christchurch Hospitals
NHS Foundation Trust

In surgery lunchtime or evening workshops led by experts, are being offered by Osteoporosis Dorset in collaboration with your local NHS acute trusts, to provide updates in osteoporosis and medication care guidelines. Refreshments will be provided.

If you would be interested in a workshop, please contact Osteoporosis Dorset on **01202 443064** or email mail@osteodorset.org.uk which is your preferred time and dates.

Speaker and refreshments provided by:

11 Shelley Road, Bournemouth, BH1 4JQ
www.osteodorset.org.uk
Registered charity No:1023507

gsk GlaxoSmithKline

DRM1455 April 2011

Managing Osteoporosis
CONFERENCE 2011
 Education Centre, Bournemouth • 17 October

126 Delegates attended (80 Doctors & GP's, 46 Healthcare Professionals)

A **free** medical meeting for staff working in the South West

VENUE: Education Centre, Bournemouth Hospital,
 Castle Lane East, Bournemouth, BH7 7DW
DATE: 17 October 2011
TIME: 8:50am - 4:50pm (registration from 8:15am)

CPD approved 6 Credits
 GP Tutor Accredited Education (Code:)

The following companies have given funding towards the cost of the conference but have no input into the agenda or content. Staff from these companies will be present at the conference and may have a stand promoting their products:

Osteoporosis Dorset
 prevention through education

www.osteodorset.org.uk/health_professionals

Managing Osteoporosis CONFERENCE 2011

Education Centre, Bournemouth • 17 October

126 Delegates attended

(80 Doctors & GP's, 46 Healthcare Professionals)

08:00 Registration In Reception And Coffee In Exhibition

08:30 Welcome / Introduction

Dr Neil Hopkinson, Consultant Rheumatologist, The Royal Bournemouth Hospital, Bournemouth

HOT TOPIC: OSTEOPOROSIS

SESSION ONE CHAIR: DR CIARAN DUNNE, CONSULTANT RHEUMATOLOGIST, CHRISTCHURCH HOSPITAL

09:00 **Pathogenesis of osteoporosis**

(the factors that influence bone remodelling and age-related bone loss)

Dr Pauline Selby, Lecturer and Honorary Consultant Rheumatologist, MRC Lifecourse Epidemiology Unit, University of Southampton, Southampton General Hospital, Southampton

09:30 **Denosumab: a new therapy for osteoporosis**

(a review of the evidence and its place in osteoporosis treatment)

Dr Mike Stewin, Consultant Physician, Llandough Hospital NHS Trust, Penarth

10:00 **FRAX: The new fracture risk**

(the evidence for its use as a risk assessment tool and its place in day to day practice)

Professor Eugene McCloskey, Professor of Adult Bone Diseases, Academic Unit of Bone Metabolism, Metabolic Bone Centre, Northern General Hospital, Sheffield

10:30 **Questions and Discussion (all speakers)**

10:45 **Coffee Break In Exhibition**

SESSION TWO CHAIR: DR KIM WILSON, ASSOCIATE SPECIALIST IN RHEUMATOLOGY, CHRISTCHURCH HOSPITAL

11:15 **DEXA imaging and beyond: how to do better?**

(the role and interpretation of different imaging modalities)

Professor Judith Adams, Consultant Radiologist, Department of Clinical Radiology, Central Manchester University Hospitals NHS Foundation Trust, Manchester

11:45 **What is the optimal duration of bisphosphonate therapy?**

(concerns about long-term safety have been raised in some conditions: oesophageal cancer, ONJ and atypical femoral fractures)

Professor Juliet Compston, Department of Medicine, University of Cambridge School of Clinical Medicine, Cambridge

12:15 **The wider health considerations of bisphosphonate and vitamin D therapy**

(a review of the evidence and the potential for adverse effects on the gut, the immune system and coronary artery disease)

Dr Eileen Marks, Clinical Director of Clinical Oncology, Department of Public Health and Population Science, The Royal Liverpool University Hospital, Liverpool

12:45 **Questions and Discussion (all speakers)**

13:00 **Lunch In Exhibition**

SESSION THREE CHAIR: DR BRIAN QUILTY, CONSULTANT RHEUMATOLOGIST, CHRISTCHURCH HOSPITAL

14:00 **Strontium ranelate**

(the evidence and when to use it)

Dr Richard Keen, Consultant Rheumatologist & Honorary Senior Lecturer, Metabolic Bone Disease, The Royal National Orthopaedic Hospital, Stanmore

14:20 **Zoledronic acid**

(the evidence and when to use it)

Dr Neil Hopkinson, Consultant Rheumatologist, The Royal Bournemouth Hospital, Bournemouth

14:40 **Parathyroid analogues**

(the evidence and when to use it)

Dr Emma Clark, Consultant Senior Lecturer, Academic Rheumatology, MRC Lifecourse Epidemiology Unit, Avon Orthopaedic Centre, University of Bristol, Bristol

15:00 **Questions and Discussion (all speakers)**

15:15 **HRT and SERM's: is there still a role in the treatment of osteoporosis?**

(a review of the evidence and its place in osteoporosis treatment)

Mr Tim Hillard, Consultant Obstetrician and Gynaecologist, Poole Hospital NHS Foundation Trust, Poole

15:40 **Tea In Exhibition**

SESSION FOUR CHAIR: DR GRAHAM ARCHARD, GP AND CLINICAL GOVERNANCE LEADER, CHRISTCHURCH HOSPITAL, DORSET

16:05 **Improving the management of osteoporosis in primary care**

Dr Alun Cooper, GP in Crawley, West Sussex

16:35 **Questions and Discussion**

16:50 **THANKS AND CLOSE**

Dr Neil Hopkinson, Consultant Rheumatologist, The Royal Bournemouth Hospital, Bournemouth

Appendix B

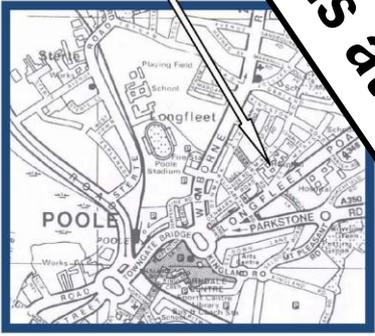
2011 Bone Health Group programmes

Bone Health Group (Poole)

hard to find a space.
Health Clinic's pay and
St Mary's Road) – will
cost about £1.40
for two hours.

Poole Community Health Clinic
Poole, Dorset BH15 2NT - 01202 688888

Venue
Poole Community Health Clinic
Poole, Dorset BH15 2NT - 01202 688888



Osteoporosis Dorset
through education

11
T: 01202 693668
E: mail@osteoporosisdorset.org.uk
W: www.osteoporosisdorset.org.uk

Poole Osteoporosis Peer Support Group 2011

more than just information



Over 480 patients attended the Poole bone health group in 2011

Programme 2011

Time: 2:00pm – 4:00pm (talk 2:15pm)

<p>Monday 10th January</p> <p>Bone Health Update Mrs Carol Jones, Osteoporosis Dorset</p> <p>Monday 7th February</p> <p>Keep Active Mrs Freda Lewis, Fitness League</p> <p>Monday 7th March</p> <p>Making the most of your bone medicines Amanda Inkpen, Community Pharmacist</p> <p>Monday 4th April</p> <p>What the South West Ambulance Service can do for you SW Ambulance Team</p> <p>Monday 9th May</p> <p>Healthy Feet Podiatrist</p> <p>Monday 6th June</p> <p>Tea to celebrate National Osteoporosis Month One to one with Mrs Carol Jones</p>	<p>Monday 4th July</p> <p>Role of co Sheila Maycoo</p> <p>Monday 8th August</p> <p>Keeping Safe Dorset Fire Service</p> <p>Monday 5th September</p> <p>Tax help for older people Carol Pavely</p> <p>Monday 3rd October</p> <p>Keep fit, stay steady Mrs Linda White, BWT Physiotherapy</p> <p>Monday 7th November</p> <p>Role of the Red Cross Jane Hutchings, British Red Cross</p> <p>Monday 5th December</p> <p>Christmas celebration</p>
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For further information please contact
Sylvia Pateman: 01202 693668
Lead for Poole Support Group

Or
Osteoporosis Dorset: 01202 443064



Poole Osteoporosis Peer Support Group



Venue
 Lake Road Surgery
 Lake Road
 Verwood
 BH31 6EH
 T: 01202-822825

Verwood Bone Health Group 2011

more than just information



Osteoporosis Dorset
through education

1: ... South, BH1 4JQ
 T: 0... 065
 E: mail...
 W: www...

Programme 2011

Time: 2:00pm – 4:00pm (talk 2:15pm)

<p>Tuesday 18th January</p> <p>Bone Health For All Mrs Carol Jones, Osteoporosis Dorset</p> <p>Tuesday 15th February</p> <p>Keep Fit, Stay Steady Mrs Linda White, BWT Physiotherapy</p> <p>Tuesday 15th March</p> <p>Medicines Management Amanda Inkpen, Community Pharmacist</p> <p>Tuesday 19th April</p> <p>Role Of Red Cross Jane Hutchings</p> <p>Tuesday 17th May</p> <p>Healthy Eating For Stronger Bones Lisa Perkins Community Dietitian</p>	<p>Tuesday 21st June</p> <p>National Osteoporosis National Falls One to one with Jane Rheumatology Practitioner</p> <p>Tuesday 19th July</p> <p>Tax Help For Older People Carol Pavely</p> <p>Tuesday 16th August</p> <p>Summer Social</p> <p>Tuesday 20th September</p> <p>What The South West Ambulance Service Can Do For You SW Ambulance Team</p> <p>Tuesday 18th October</p> <p>Exercise To Music Toni Potterton, EXTEND</p> <p>Tuesday 15th November</p> <p>Christmas celebration</p>
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For further information please contact

Osteoporosis Dorset
 T: 01202 443064
 E: mail@osteodorset.org.uk



Verwood Bone Health Group

West Dorset Bone Health Group

more



Over 120 patients attended the West Dorset bone health group in 2011

Programme 2011

Time: 2:00pm – 4:00pm

Instead of giving one talk per meeting, we have decided to set up a forum for you to come along and ask questions. See below dates:

Thursday 3 rd March	Assistive Technology Pilates Rheumatology Team, Dorchester Osteoporosis Dorset's Team
Thursday 2 nd June	Dietician Dorset Fire Service Rheumatology Team, Dorchester Osteoporosis Dorset's Team
Thursday 1 st December	Tax help for older people Role of the Red Cross Rheumatology Team, Dorchester Osteoporosis Dorset's Team

Venue
Room 1, Frederick Treves House, St Johns Way,
Poundbury, DT1 2FD

Osteoporosis Dorset
prevention through education
T: 01202 443064 E: mail@osteodorset.org.uk
W: www.osteodorset.org.uk

If you would like to ask a question at the forum, please contact Osteoporosis Dorset on 01202 443064.



11 Shelley Road, Bournemouth, Dorset, BH1 4JQ
 www.osteodorset.org.uk
 E: mail@osteodorset.org.uk
 T: 01202 443064
 Registered Charity Number: 1023507