Dudley Metropolitan Borough Council

THE SELECT COMMITTEE ON GOOD HEALTH

22 March 2005

Osteoporosis Service in Dudley

Report of Scrutiny Officer – Good Health

1.0 **PURPOSE**

1.1 To bring to the attention of members a letter from Mr K Strike, Chairman, Dudley and District (National Osteoporosis Society) Support Group, setting out the present situation in Dudley for osteoporosis and making proposals for development of services.

2.0 **BACKGROUND**

2.1 Mr Strike and Mrs Holden attended the January 2005 meeting of the Committee and spoke briefly about osteoporosis. They will be present at the meeting to answer any questions members may have.

3.0 **PROPOSALS**

3.1 The Select Committee is asked to consider in what ways it can influence the development of a dedicated osteoporosis service in Dudley.

4.0 **FINANCE**

4.1 There are no direct financial implications arising from this report at this stage.

5.0 **LAW**

5.1 The relevant statutory provisions regarding the Council's Constitution are contained in Part 11 of the Local Government Act, 2000, together with Regulations, Orders and Statutory Guidance issued by the Secretary of State.

6.0 **EQUAL OPPORTUNITIES**

6.1 This report complies with the Council's equality and diversity policy.

7.0 **RECOMMENDATIONS**

7.1 That the proposals set out in paragraph 3.1 above be approved.

| 8.0 | BACKGROUND PAPERS |
|---|--------------------------|
| 8.1 | Letter from Mr K Strike. |
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| Seán Ward Scrutiny Officer – Good Health | |

4th February 2004.

The Chairman,
Dudley MBC Select Committee
On Good Health.
The Council House,
Priory Road,
Dudley,
West Midlands DY11HF.

Dear Sir,

Re: Osteoporosis in Dudley

We thank you for the invitation to attend the Select Committee on Good Health on Thursday 27th January 2005 and also for the opportunity given, of addressing the Committee with our concerns.

The opportunity that was granted to us, followed the illustrated address given by Mr Richard Coverdale of Beacon & Castle PCT on the Orthopaedic Project for Dudley.

A report of our address was requested and we hereby enter said report and we trust that it meets with your approval. If, as was indicated this becomes an Agenda Item for the March Meeting of the Committee it would be appreciated if we could be given an opportunity of illustrating said presentation, giving a very brief background of the condition called osteoporosis and some of the work already carried through by the N.O.S. and the Dudley Osteoporosis Working Party under the guidance of Alison Tennent - Pharmaceutical Specialist and Dr Andrew Whallett - Rhumatologist Specialist. A report from this Working Party is due to be completed in the next week or two.

It was pointed out during the presentation by Richard Coverdale and his colleague that the incidence of Hip Replacements had doubled in the last year and a similar increase had been recorded on Knee Replacements in the same period and we therefore would request serious attention should be given to supporting our campaign to set up a properly constructed and constituted Osteoporosis Service for the Borough of Dudley, linked with the Falls Strategy. This strategy as prescribed in Standard Six of the N.S.F for Older people due to be completed by April 1st 2005.

the NHS Group of Hospitals, the two PCT's, and Social Services, if major savings are to be made in future budgets in all areas. If action were to be taken now, not only would savings be made but the pain and suffering and sometimes death, inflicted by this all too common disease could be reduced considerably. The latest figures issued by the World Health Authority indicated that the incidence of osteoporosis has increase dramatically in the last 10 years and now reads 1 in 2 women and 1 in 5 men over the age of 50 will suffer from the disease with the increased drain on resources doubling over the next few years.

The N.O.S have a series of guidelines in place, now augmented by the release of the National Institute for Clinical Excellence (NICE) Guidelines on Osteoporosis (26th January 2005) for the selection of members of the public 'at risk' and given the proper pathway doctors can guide their patients to where the most appropriate treatments can be given. The NICE Guidelines indicated that PCT's have to have a service in place within 90 days.

The treatment for those at 'high risk' includes the installation of a DEXA Scanner in the Borough, which gives an accurate reading of the density of the bone, particularly in the spine and hips. We would be pleased, if given the opportunity, to show an illustration of this machine at the meeting.

The estimated cost of setting up an Osteoporosis Service in Dudley is set at about £100,000.00. and could be addressed by contributions from all the NHS Trusts and Social Services where the most benefit could be achieved.

The above Group has endeavoured to work with the Health Services over the past 7 years and serves on the NHS Working Party, has direct links, including a web site connected with the Health Promoting Schools Project. We have addressed numbers of school assemblies, numerous church and other groups with the message of information, lifestyle and exercise. To this end we organise 5 self-supporting specialist Exercise Groups for the members of the local population throughout the Borough, which cater for those who are disabled and less mobile.

hi addition we raise considerable amounts of money for the National Osteoporosis Society to help them in raising awareness of the problem nationally, and towards the cost of research, which is now beginning to bare fruit. Thank you once more for the opportunity of addressing the Committee.

Yours sincerely,

K.M. Strike, Chairman - Dudley & Districts NOS Support Group

Cc: Dawn Williams - Project Manager - Dudley Beacon & Castle PCT.