WHAT IS THE FLS DATABASE?

The Fracture Liaison Service Database (FLS-DB) established in 2020 is an online portal which collects and monitors data on what care fragility fracture patients are currently receiving, which areas of the country have/haven’t a FLS and how successful each FLS is at delivering secondary fracture prevention when compared against global best practice standards as outlined by the International Osteoporosis Foundation.

WHAT IS A FRACTURE LIAISON SERVICE?

A Fracture Liaison Service (FLS) is a system of healthcare whereby people who have suffered a fracture resulting from a low level of trauma (termed ‘fragility fracture’) are identified proactively, assessed and treated for osteoporosis and falls risk. This is called ‘secondary fracture prevention’ after the first fracture.

FLS are proven to reduce future fracture risk and are cost-effective services that have been adopted globally to help tackle the marked rise in fragility fracture numbers as our population ages.

WHAT IS OSTEOPOROSIS?

Osteoporosis is characterised by reductions in bone mineral density and quality, leading to disruption of the normal bone architecture, increased bone fragility and greater propensity to fracture. Osteoporosis is extremely common and affects approximately 300,000 people in Ireland, resulting in more than 30,000 fragility fractures every year. (Irish Osteoporosis Society, 2022).

Osteoporosis is often described as a silent disease, as most people do not know that they have the condition until they suffer the pain of a fracture, most commonly of the forearm, hip or spine. These fractures, termed fragility fractures, usually result from relatively minor injuries, including simple falls, twists and turns, and occasionally occur spontaneously without any degree of force.

IF YOU HAVE ANY QUERIES OR COMMENTS PLEASE CONTACT US AT
fls@rcsi.ie

KEY RECOMMENDATIONS

RECOMMENDATIONS FOR HOSPITALS/CLINICIANS

- Hospitals that currently do not have a FLS or are not contributing to the FLS Database need to establish same to improve patient care which will ultimately reduce demands on acute services through reduced fragility fracture numbers.

- All FLS should review how they are capturing fragility fractures, to ensure equitable service provision to a greater number of fragility fracture patients.

RECOMMENDATIONS FOR THE HEALTH SERVICE EXECUTIVE

- The HSE in conjunction with the Department of Health needs to continue to support the work of all stakeholders in the implementation of Recommendation 15 of “A Trauma System for Ireland” (2018) and the establishment of a national FLS. This can be done by incorporating data from all 16 hospitals which manage patients with trauma.

- The HSE should ensure the long-term management and funding of the FLS Database is secured.

RECOMMENDATIONS FOR NATIONAL CLINICAL PROGRAMME FOR TRAUMA AND ORTHOPAEDIC SURGERY

- NCPTOS should continue to advocate for adequate resourcing of a national FLS and database thus improving patient outcomes and quality of life.

SANDRA’S STORY

“As a member of the FLS Steering Group I am hoping that by being a patient representative and telling my story it may help bring the message to those who have the power to change things and that ALL patients in the future will be as lucky as I was and have access to an FLS service irrespective of where they live”

Sandra Daly, Patient and Public Interest Representative
**THE KEY HIGHLIGHTS**

- 2,147 non-hip fragility fractures in 2021
- 8 of the 16 existing hospitals managing trauma patients participated
- 1,732 (81%) female, 415 (19%) male
- Median age 70 years [range 50-100] (female), 71 years [range 50-97] (male)
- 1,042 (48.5%) of patients were admitted to hospital
- 42% were recommended osteoporosis treatment of whom just 18% confirmed starting it by 4 months
- Only 26% of the expected number were identified

**THE MOST COMMON SITES OF FRACTURE (EXCLUDING HIP FRACTURES) FROM THIS DATABASE WERE:**

- Forearm 36%
- Spine 22%
- Humerus 14%
- Lower limb 16%
- Other 12%

**4-MONTH**