

Response to Controversial Editorial in the British Medical Journal (BMJ)



You may have heard about an inflammatory editorial that appeared in the BMJ on 26 May 2015 titled “Overdiagnosis of bone fragility in the quest to prevent hip fracture” [1]. In this deliberately provocative article, Teppo Järvinen and colleagues argue that “Being labelled as at risk of fracture imposes a psychological burden. ... Hip fractures are caused predominantly by falls in frail older adults.” and conclude: “The dominant approach to hip fracture prevention is neither viable as a public health strategy nor cost effective. Pharmacotherapy can achieve at best a marginal reduction in hip fractures at the cost of unnecessary psychological harms, serious medical adverse events, and forgone opportunities to have greater impacts on the health of older people. As such, it is an intellectual fallacy we will live to regret.”

The article distorts and grossly misrepresents the osteoporosis burden, which remains severely underdiagnosed and undertreated [2-4]. In an unprecedented move, one of the original reviewers of the paper (Dr Kassim Javaid), who had actually rejected it on the basis that “the data presented and conclusions drawn were false and would mislead patients, clinicians and academics”, publicly called for clarification on the BMJ editorial review process in the interests of transparency and that “BMJ share not only my review but those of other reviewers, who must have clearly accepted the paper without changes as the published paper bears a striking resemblance to the one I reviewed and rejected so clearly”.

The outcry from individuals, professional groups and scientific organizations involved in the care of patients with osteoporosis can be followed online at the BMJ rapid response postings: <http://www.bmj.com/content/350/bmj.h2088/rapid-responses> With the permission of the International Osteoporosis Foundation (IOF), we are providing a link to a rebuttal editorial “Overdiagnosis of osteoporosis: fact or fallacy?” authored by Prof. Juliet Compston, Chair of the National Osteoporosis Guideline Group and IOF EU Osteoporosis Consultation Panel, that provides comprehensive arguments to prove recent suggestions that osteoporosis is overdiagnosed are completely misguided: <http://link.springer.com/article/10.1007/s00198-015-3220-0/fulltext.html>

References

1. [Järvinen Teppo LN, Michaëlsson Karl, Jokihaara Jarkko, et al. Overdiagnosis of bone fragility in the quest to prevent hip fracture. BMJ 2015; 350:h2088.](#)
2. Lewiecki EM, Laster AJ, Miller PD, Bilezikian JP. More bone density testing is needed, not less. J Bone Miner Res. 2012; 27(4):739-42.

3. Eisman JA1, Bogoch ER, Dell R, Harrington JT, McKinney RE Jr, McLellan A, Mitchell PJ, Silverman S, Singleton R, Siris E; ASBMR Task Force on Secondary Fracture Prevention. J Bone Miner Res. 2012; 27(10):2039-46. Making the first fracture the last fracture: ASBMR task force report on secondary fracture prevention.
4. Kanis JA, Svedbom A, Harvey N, McCloskey EV. The Osteoporosis Treatment Gap. J Bone Miner Res. 2014; 9:1926–1928.

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- See more at: http://www.iscd.org/scan-newsletter/scan-newsletter-august-2015/?utm_source=SCAN+Membership+List&utm_campaign=4096ff9909-ISCD_August_SCAN7_30_2015&utm_medium=email&utm_term=0_f722256ff2-4096ff9909-119796321#PresidentsMessage

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