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Title

OSTEOPOROSIS SCREENING: Bridging the gaps in Knowledge and Quality

Priority 1 (Research Category)

Screening, prevention, and health promotion

Presenters

Jharna Katara, MPH, BDS, Clarissa Hoff, MD, MPH

Abstract

Context: Bone Mineral Density Screening rates are extremely low even though they form an integral part of the USPSTF recommendations for Osteoporosis screening (using a Central DEXA scan in women over 65 years of age), amounting to only 20.1% within two years of hip fracture. This study stratifies individuals based on race, age and if they have undergone a Central DEXA scan at least once in their lifetime, with the aim of informing the rates of screening that reflect upon the gaps in knowledge which inform the need for intervention screening programs conducted by faculty and residents of seven clinics across Louisiana.

Objectives: Increasing the rates of Osteoporosis Screening in the patients attending seven clinics across the State of Louisiana and improving the quality of screening programs conducted by the faculty and residents of these seven clinics, thereby bridging the gaps in knowledge and enhancing linkage to care for increased numbers of people in these clinics. Study Design: Before-after Comparative Educational Study. Dataset: Both the pre and post intervention datasets were filled out by faculty/residents of seven hospitals using Qualtrics Surveys, which were designed by the Department of Family and Community Medicine at Tulane. Population Studied: Patients attending each of the Primary care clinics in seven clinics across the state of Louisiana as screened by most faculty and residents.

Intervention/Instrument: Pre-intervention rates of Osteoporosis screening were recorded in the form of Qualtrics surveys, after which interventional methods in the forms of educational posters for the patients and pocket cards for physicians were employed for review before they were asked to complete the postintervention surveys. The physicians were also shown pre-intervention comparative screening data showing the difference in the rates of screening between residents and faculty, the differences in the rates of screening between clinics and then the same Qualtrics surveys were filled out by the physicians, showing a statistically significant increase in the rates of Osteoporosis screening.

Outcome Measures: Increased rates of screening when stratified by race, by Faculty/Resident position, Clinic site, knowledge of the doctors.

Results: Statistically significant increase in the rates of Osteoporosis Screening when stratified by race($p < 0.001$), by clinic site ($p < 0.05$), faculty/residents($p < 0.008$), knowledge of USPSTF recommendations($p < 0.005$).