**Bursary Report for the British Association of Hand Therapists**

**[iCatherine Rolls]**

**[Bone Research Society Oxford Clinical Training Course In Osteoporosis and Other Metabolic Diseases 2024]**

**[25-27 March 2024]**

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| **Introduction:** My name is Catherine Rolls, I am a senior hand therapist and am currently undertaking a full time PhD into the relationship between physical activity and obesity on bone health and fracture risk in mid-life. I am in the first year of my PhD and I applied for a BAHT course bursary to attend the Bone Research Society Oxford Clinical Training Course In Osteoporosis and Other Metabolic Diseases 2024 in order to deepen my understanding of the pathophysiology of metabolic bone conditions and the mechanisms by which current treatments work. |
| **Topic:** The Bone Research Society Oxford Clinical Training Course In Osteoporosis and Other Metabolic Diseases 2024 is a three day residential course in Oxford aimed at trainees in rheumatology, orthogeriatrics and metabolics , as well as GPs and non-medics. The course material covers everything from basic biology of bone, treatments of osteoporosis to genetic testing for rare metabolic conditions.I applied for a grant to attend this course as I wanted to further my understanding of the pathophysiology of osteoporosis as this is a key part of my PhD. I also wanted to learn more about the medical and non-medical management of osteoporosis. In my clinical role I regularly work with patients, commonly women, who have sustained their first fracture and who are concerned about whether this signifies that they have poor bone health, and who want advice and guidance on how to optimise their bone health.Dr Tash Masud, consultant rheumatologist did an early session on the current osteoporotic drugs as well as when they should and shouldn’t be recommended. Having never worked in rheumatology this was interesting and I now have a far better understanding of the difference between anti-resorptive therapies from bisphosphonates to Denosumab, to the anabolic treatments such as Teriparatide and under what circumstances these are used. There was a fantastic session from a GP with a specialist interest in the Menopause (Dr Kate Barber) on the impact of menopause on bone health and the role of HRT. I also found the session on the non-medical management of bone health to be informative, and good to see the role of physiotherapy being promoted in optimising bone health. It did highlight that we still have a long way to go in really understanding what the best lifestyle advice is to patients following a fracture, and there were interesting group discussions about how to promote exercise for bone health to patients who are already anxious about bone fragility because of a diagnosis of osteoporosis, or who have already sustained a fracture. There was no real conclusion to this discussion, but as physical activity and fracture is a key part of my Doctoral work it was reassuring to hear that this work is perceived as necessary and will have an impact in this field.As a residential course there was the added benefit of this being a good networking opportunity and a chance to promote our specialism. While there were only a handful on allied health professionals in attendance it was a good opportunity to hear about how other services manage their fraction liaison clinics, and fracture clinics from a non-medical perspective.I would highly recommend this course to anyone with an interest in osteoporosis and other metabolic disorders. It is a great crash course in everything bone health related. |