8.05 Osteoporosis Assessment in COPD/ACOS Patients: A Retrospective Audit of DEXA and FRAX Usage in Peamount and Tallaght University Hospitals

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Background: Patients with Chronic Obstructive Pulmonary Disease (COPD) and Asthma-COPD Overlap Syndrome (ACOS) are at an elevated risk of osteoporosis, exacerbated by factors such as corticosteroid use, physical inactivity, and vitamin D deficiency. Despite established guidelines recommending osteoporosis assessment and management, adherence to these protocols in clinical practice remains unclear. Methods: We conducted a retrospective review of 40 patients diagnosed with COPD/ACOS across Peamount Hospital and Tallaght University Hospital. Data on demographics, corticosteroid use, vitamin D deficiency, calcium supplementation, history of fractures, and DXA scan results were collected. The use of the FRAX tool for fracture risk assessment and pharmacological treatments were also evaluated. Results: The mean patient age was 70 years. Inhaled corticosteroids were used by 80% of patients, with 62.5% having received oral steroids. Vitamin D deficiency was noted in 37.5%, and 50% were on calcium and vitamin D supplements. Only 30% had a DXA scan within the last five years, and none had FRAX tool assessments. Pharmacological treatment was suboptimal, with only 25% receiving appropriate therapy. Conclusions: Osteoporosis assessment and management in COPD/ACOS patients are inadequate, with significant gaps in guideline adherence. Systematic implementation of screening tools and treatment protocols is crucial. **Disclosures:** The authors declare that they have no conflict of interest.