主講題目	DXA Interpretation for Osteoporosis
摘要內容 （100~300 字） 用途：非刊登在大會手冊中,僅用於申請學分用.	1.DXA 應用於骨質疏鬆之診斷 2.DXA 診斷骨鬆之標準 3.測量參考值資料庫 4.骨折風險評估 5.骨質密度追蹤 6.病例討論 7.骨質密度檢查結構式報告 8.骨質密度測量之外：脊椎骨折評估(VFA)、骨樑評分值(TBS)

主講題目	Radiographic classification of Osteoarthritis
摘要內容 （100~300 字） 用途：非刊登在大會手冊中,僅用於申請學分用.	Osteoarthritis is a common disease for elder and post-traumatic patients. Radiography is the first-line modality for assessing osteoarthritis; however, the pitfalls of positioning and radiographic techniques may cause various interpretation in the grading of osteoarthritis, especially the knee. We aim to review the common grading systems for hip/knee osteoarthritis and introduce the common pitfalls in interpretation of common knee and hip osteoarthritis. We also hope that less bias and more mutual understanding during the film interpretation through this lecture.

主講題目	Total body composition
摘要內容 （100~300 字） 用途：非刊登在大會手冊中,僅用於申請學分用.	Introduction of body composition analysis • Different measuring methods • Principles • Pros and Cons Interpretation of body composition analysis Clinical Application: • Obesity • Athletes • Sarcopenia

主講題目	Capture the Fracture: Radiology of Osteoporosis
摘要內容 （100~300 字） 用途：非刊登在大會手冊中，僅用於申請學分用.	The percentage of older patients is steadily increasing and the yearly number of fragility fractures related to deficient bone mass and quality will increase substantially with continued ageing of the population. Approximately 50% of women and 20% of men older than 50 years of age will have a fragility fracture in their remaining lifetime in Caucasian populations with potentially devastating results. Of the individuals who suffer hip fractures 20% will die within the next year and 20% will require permanent nursing home care. Patients with vertebral fractures have less severe complications, but vertebral fractures are much more frequent and only 30% of the vertebral fractures come to clinical attention. Those that come to clinical attention are associated with substantial disability from pain and increased thoracic kyphosis. In addition the presence of 1 vertebral fracture leads to a 10-fold increase in risk of subsequent vertebral fractures; diagnosis and treatment of vertebral fractures is therefore critical. While hip, vertebral, and wrist fractures are the most frequent fractures associated with osteoporosis, the effect of osteoporosis on the skeleton is systemic and there is an increased risk of almost all types of fractures in patients with deficient bone mass and quality. Radiologists need not only be familiar with correctly interpreting signs of fragility fractures but also using all available imaging modalities for this purpose. **This talk will focus on how the support from radiologists plays an essential role to clinical management of osteoporosis by surgeons and specialists.**