

主講題目	Secondary fracture prevention
摘要內容 (100~300字) 用途：非刊登在手冊中，僅用於申請學分用。	In response to Taiwan's aging society, osteoporosis has been an important issue in Taiwan in recent years. According to statistics, osteoporosis has become the second most important epidemiology in the world. The prevalence of osteoporosis among menopausal women over the age of 65 is about 30% in Taiwan. Based on an estimate of the average life expectancy of a Taiwanese woman at 82 years, osteoporotic fractures occur in about a third of her lifetime, such as the spine, hip, or wrist. In patients with fractures, there is more than twice the chance of fractures again, so the use of drugs and correct treatment are important issues.

主講題目	Best partner for primary prevention in osteoporosis
摘要內容	<p>Bisphosphonates prevent fractures in patients with osteoporosis, but their efficacy in elderly with osteopenia is unknown. Most fractures in elderly occur in those with osteopenia, so therapies that are effective in elderly with osteopenia are needed</p> <p>Bisphosphonates are efficacious for primary prevention, reducing the incidence of osteoporotic vertebral fractures and improving BMD values among elderly with osteopenia and osteoporosis. More evidence is needed to determine the efficacy of other pharmacologic regimens in primary prevention of osteoporotic fractures.</p>

主講題目	<b>Management of Acute Phase Responses Following First-time Using Zoledronate</b>
摘要內容 (100~300字) 用途：非刊登在手冊中，僅用於申請學分用。	<p>Infusions of aminobisphosphonates, such as zoledronic acid (Aclasta, ZOL), are now established therapies in osteoporosis, Paget's disease, and the prevention of skeletal-related events in cancer. Their use is associated with fever and musculoskeletal pain in some subjects, especially for those using first time. These symptoms and signs were referred to as the acute phase response (APR).</p> <p>The mechanism of APR induced by aminobisphosphonates is not completely identified. It has been considered to be associated with an increase in levels of tumor necrosis factor (TNF), interleukin 6 (IL-6), and gamma interferon (<math>\gamma</math> IFN), which are produced by activated gamma delta (<math>\gamma</math> <math>\delta</math>) T cells after stimulation of aminobisphosphonates. These systemic acute inflammatory responses have been managed with concomitant use of acetaminophen, non-steroidal anti-inflammatory drugs (NSAIDs), statins, or pre-treatment bisphosphonate or calcitonin. However, most of these early reports only focused on fever as the defining characteristic of APRs and did not present satisfied results.</p> <p>Although the majority of these APRs are generally mild to moderate and occur within the first three days following ZOL administration, it may not only decrease the persistence of medication but also affect the prescription by physicians. Thus, the clinical factors related to APRs and effective prevention and management for APRs will be presented.</p>