



ISQua's 39th
International Conference

27th- 30th August | COEX Seoul



FACING THE LOW-HANGING FRUIT TO SURVIVE THE POST- EPIDEMIC PERIOD TOGETHER

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FINAL ID

ISQua
2023.

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INTRODUCTION

Osteoporosis-related fractures and complications can significantly impact quality of life and even pose life-threatening risks. According to a survey, the prevalence of osteoporosis in Taiwan is remarkable, with one in five men aged 50 years or older affected, while the proportion among women is twice as high.

METHODS

To promote the combination of Post-Acute Care (PAC) and Fracture Liaison Service (FLS) in Osteoporosis Good Will Hospital is proving beneficial. To promote the combination of Post-Acute Care (PAC) and Fracture Liaison Service (FLS) in Osteoporosis Good Will Hospital is proving to be beneficial. On the one hand, it prevents the occurrence of fractures, and on the other, it actively intervenes in the treatment of fracture patients, especially elderly patients with hip fractures. These patients can be discharged from the hospital after a period of acute bed treatment and transferred to post-acute care with continued health insurance coverage. The promotion of fracture liaison services (FLS) is an effective means of preventing secondary osteoporotic fractures.

Implementation of fracture liaison service (FLS) interventions results in increased rates of bone mineral density testing, osteoporosis medication use, and patient compliance. In addition, it reduces rates of refracture and mortality. Research has shown that the Fracture Liaison Service model is the most cost-effective way to prevent secondary fractures. This systematic approach with a dedicated fracture liaison not only reduces the recurrence of fractures, but also leads to cost savings for the healthcare system and improves patients' quality of life.

RESULTS

To ensure high quality osteoporosis care, the International Osteoporosis Foundation has proposed a common fracture care service based on a case management care model. However, the implementation of this model requires significant human and material resources, leading to implementation bottlenecks.

The advantages of developing an innovative multidisciplinary care model in regional hospitals in the post-epidemic period are obvious. It involves organizing and combining multidisciplinary medical teams to provide primary care to PAC patients with the aim of preventing fractures. The model also includes designing individualized consultation mechanisms and conducting necessary bone density tests for at-risk patients. Fracture patients receive rehabilitation treatment, and the hospital has a robust and comprehensive nursing team. In addition, the hospital demonstrates a strong willingness to accept cases from specialists. Importantly, the hospital integrates the treatment of elderly PAC patients with fragile fractures and provides preventive care through the Fracture Liaison Service (FLS), a unique feature among regional hospitals in Tainan City that cannot be easily replaced.

CONCLUSION

In the post-epidemic period, regional hospitals face challenges in innovating cross-team care models, primarily due to a lack of staffing for human resource managers and health educators to support physicians in developing the Fracture Liaison Service (FLS).

To address these staffing issues and tackle the more manageable tasks in the implementation plan, we aim to use data analytics software to implement medical care and achieve significant improvements.

This approach will test the resilience and adaptability of our colleagues while capitalizing on the opportunities presented by the post-epidemic, multi-impact era. Through deep understanding and analysis, we strive to proactively implement and embrace change during the crisis, transitioning to a new normal that replaces the old with the new.

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