

Skeletal effects of hypoparathyroidism (HypoPT); data from the Canadian National Hypoparathyroidism Registry (CNHR)



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INTRODUCTION

The CNHR registry was established in 2014 with the objectives of identifying the etiology, presentation, natural history, and current treatment of hypoPT. (1) The population of the cohort is fairly representative of the HypoPT population in Canada .

METHODS

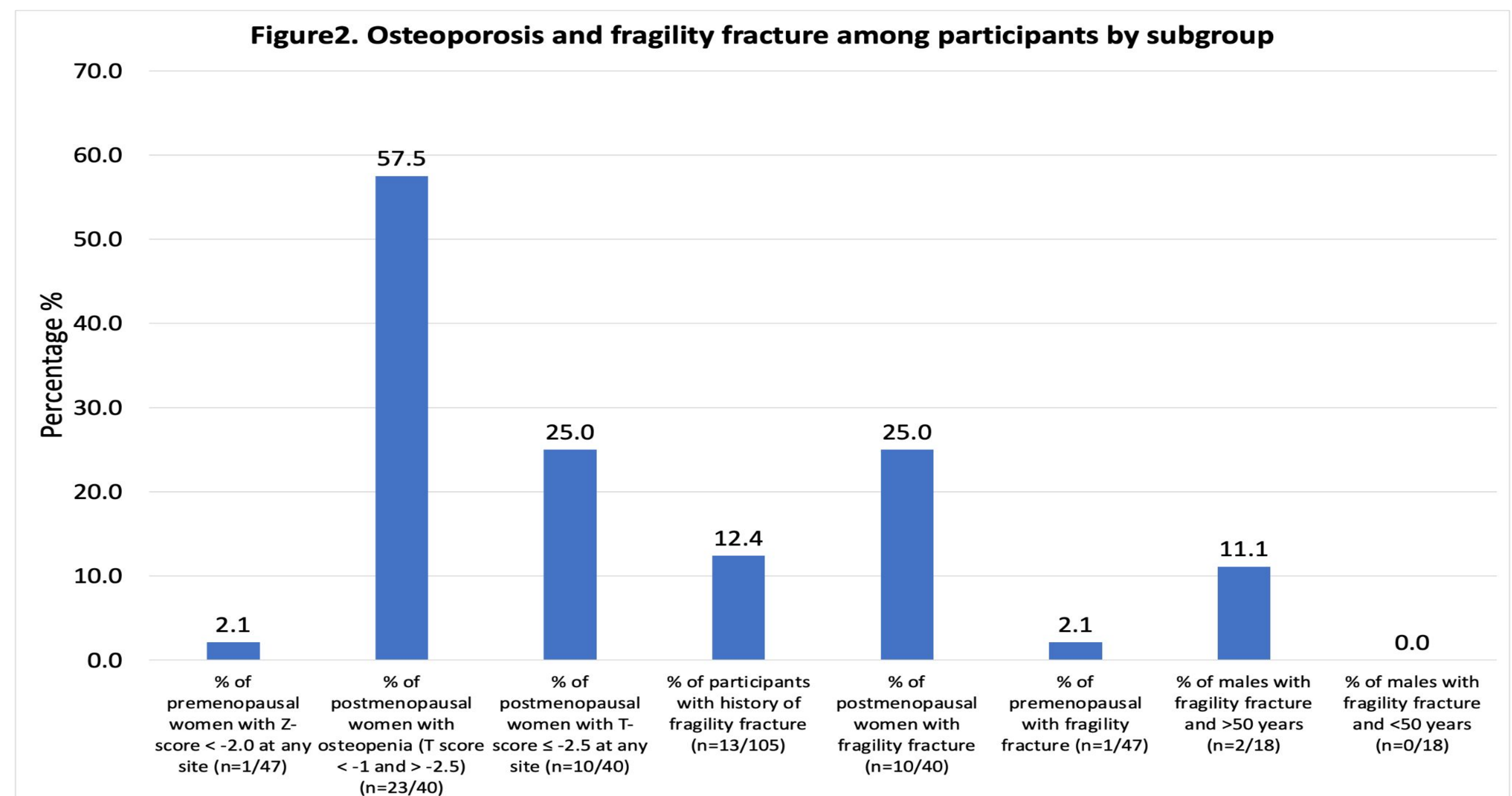
105 patients with hypoPT were included in this prospective study. Patients completed baseline assessments, including 3-site bone mineral density (BMD), trabecular bone score (TBS), fracture risk assessments, and bone biomarkers. Among these, only BMD and fragility fractures are presented in this analysis.

CONCLUSION

The effects of hypoPT on bone strength are not fully understood at this time. (2) We observed in postmenopausal women a significant prevalence of osteopenia (57.5%), osteoporosis by BMD criteria (25%), or with a prior fragility fracture (25%) as assessed clinically and by 3-site BMD.

RESULTS

Parameter	Value
Participants (n)	105
Age, mean (SD)	51.9 Y (16.4)
Age of the disease, mean (SD)	39.7 Y (17.3)
Duration, mean (SD)	11.3 Y (8.6)
BMI kg/m ² , mean (SD)	28.9 (7.8)
Male, n (%)	18 (17%)
Female, n (%)	87 (83%)
Premenopausal female, n (%)	47 (54%)
Postmenopausal female, n (%)	40 (46%)
Postsurgical hypoparathyroidism, n (%)	75 (71%)
Non-surgical hypoparathyroidism, n (%)	30 (29%)



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DISCLOSURES

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