Osteoporosis (2nd Edition)

Gavin Clunie and Richard Keen, eds. Oxford: Oxford University Press, 2014, 176 pages, $33.25 US

Since the last edition, there is significantly increased content in this book, with additional chapters particularly related to advances in the diagnosis of osteoporosis as well as management and surgical aspects of the disease. In reviewing key references, some chapters in *Osteoporosis* are updated with books and articles published in 2013. There is an extremely useful chart regarding epidemiology of osteoporotic fractures as well as an updated chapter on the diagnosis of osteoporosis.

The chapter on osteoporotic risk factors is presented in a very elegant way by experts in the field, putting significant weight on a 10-year fracture risk assessment rather than bone density measurements only. The chapter on the diagnosis of osteoporosis is particularly useful for those who are involved directly in the diagnosis and have access to the following: dual X-ray absorptiometry (DEXA), quantitative ultrasound, magnetic resonance imaging, computed tomography, and bone scintigraphy. This chapter will allow a better understanding of the diagnosis of osteoporosis not only for trainees in rheumatology and endocrinology, but also for radiologists at any level of their education. This chapter indicates the necessity for standardization of diagnostic tests and interpretation with regular quality control of existing techniques, particularly the most common one (DEXA).

There is significantly increased information about the management of osteoporosis, particularly with the use of denosumab. Promising results indicate that this medication will be used in nearly every clinical situation; 90% of the therapies used to date are bisphosphonates. Denosumab therapy will prevent osteoporosis in patients with chronic kidney disease as well as those taking glucocorticoids. This is particularly important information for rheumatologists as well as general internal medicine physicians.

I recommend *Osteoporosis* to general internal medicine physicians but particularly to rheumatologists, endocrinologists, and radiologists involved in the diagnosis of osteoporosis.

W.P. OLSZYNSKI, MD, PhD, FRCP(C), CCD, Clinical Professor of Medicine, University of Saskatchewan; Director, Saskatoon Osteoporosis and Arthritis Infusion Centre; Postgraduate Program Director, Division of Rheumatology. Address: Division of Rheumatology, University of Saskatchewan, Royal University Hospital, 103 Hospital Drive, Saskatoon, Saskatchewan S7N 0W8, Canada. E-mail: wpolszynski@sasktel.net

J Rheumatol 2015;42:3; doi:10.3899/jrheum.141495