

## **Fracture Liaison Service Database publically available data**

### **FLS-DB lay info RE public data:**

The Fracture Liaison Service Database (FLS-DB) reviews the assessments and treatment of people over 50 who have broken a bone after falling from standing height or less.

The information collected by the FLS-DB is based on NICE technology appraisals and guidance on osteoporosis and falls and the NOS clinical standards for FLSs and quality standards for osteoporosis and prevention of fragility fractures.

Patients who have suffered a fragility fracture are at higher risk of breaking another bone; either the same bone again or another bone in the body. Fracture liaison services (FLSs) are teams of nurses, doctors, therapists and administrative staff who identify, assess and treat people (usually aged 50 and over) with fractures to reduce the chance of experiencing another broken bone. This is called secondary fracture prevention (ie preventing the second fracture).

The FLS-DB collects and publishes data about the number of patients:

- assessed by an FLS within 90 days of their fracture
- receiving a DXA scan within 90 days of their fracture
- receiving a falls assessment
- being recommended bone strengthening treatment
- being monitored by the FLS to ensure they are continuing with their treatment.

FFFAP and FLS-DB encourage the use of the publicly available data for research and also NHS service improvement work. If you have any questions please contact [flsdb@rcplondon.ac.uk](mailto:flsdb@rcplondon.ac.uk)

## **Data available for the FLS-DB**

Data analysed for that calendar year, for the annual report (metrics depends on what was reported for the specific year, which may vary). The full summary of the data available is in the data definitions files: [www.rcplondon.ac.uk/projects/outputs/fls-db-transparency-data-0](http://www.rcplondon.ac.uk/projects/outputs/fls-db-transparency-data-0)

Metrics available include:

### **Identification**

Number of cases submitted

- All patients
- All patients split by age (75< and > 75)
- All patients (split by fracture type hip vs spine vs all other fragility fractures)

The estimated case load

### **Assessment**

The number and percentage of patients assessed by 90 days post fracture

The number and percentage of patients recommended a DXA

- All patients
- All patients split by age (75< and > 75)

The percentage of patients who were received a DXA by 90 days post fracture

- All patients
- All patients split by age (75< and > 75)

Falls assessment and interventions

The number and percentage of patients who received or were referred for a falls assessment

- All patients
- All patients split by age (75< and > 75)

The number and percentage of patients who had attended a strength and balance class within 16 weeks of their fracture

- All patients
- All patients split by age (75< and > 75)

### **Treatment recommendation**

The number and percentage of patients with a treatment recommendation

- All patients
- All patients split by age (75< and > 75)

The number and percentage of patients prescribed:

- Oral bisphosphonates
- Zoledronate
- Denosumab
- Raloxifene and other oral therapies
- Teriparatide

The number and percentage of patients who were referred to a GP to decide prescription

The number and percentage of patient who were referred for further clinical opinion

**Monitoring at 12-16 weeks post fracture**

The number of patients eligible for monitoring

- All patients
- All patients (split by fracture type hip vs non-hip)

The percentage of patients recorded with a monitoring assessment

- All patients
- All patients (split by fracture type hip vs non-hip)

The number and percentage of patients who had commenced anti-osteoporosis medication by 16 weeks post fracture

**Monitoring at 12 months post fracture**

The number of patients eligible for monitoring at one year

The number and percentage of patients confirming adherence to a prescribed anti-osteoporosis medication at 12 months post fracture.