

Summary of USPSTF **Final** Recommendation

Screening for Osteoporosis to Prevent Fractures

January 2025



What does the USPSTF recommend?



Women 65 years or older:

Screen for osteoporosis to prevent osteoporotic fractures.



Postmenopausal women younger than 65 years with 1 or more risk factors for osteoporosis:

Screening for osteoporosis to prevent osteoporotic fractures.



Men:

The current evidence is insufficient to assess the balance of benefits and harms of screening for osteoporosis to prevent osteoporotic fractures in men.



To whom do these recommendations apply?

These recommendations apply to adults 40 years or older without known osteoporosis or history of fragility fractures. They do not apply to persons with secondary osteoporosis due to an underlying medical condition (eg, cancer, metabolic bone diseases, or hyperthyroidism) or chronic use of a medication (eg, glucocorticoids) associated with bone loss.



What's new?

- For the current recommendation, the USPSTF has noted that screening includes dual energy X-ray absorptiometry (DXA) bone mineral density (BMD), with or without fracture risk assessment.
- This recommendation is otherwise consistent with the 2018 USPSTF recommendation on screening for osteoporosis.



How to implement this recommendation?

- Screen women 65 years or older with DXA BMD, with or without fracture risk assessment.
- For postmenopausal women younger than 65 years, the USPSTF suggests first assessing for the presence of 1 or more risk factors for osteoporosis. For women who have 1 or more risk factors, assess for increased risk using a clinical risk assessment tool. For women assessed to be at increased risk, screen for osteoporosis with DXA BMD, with or without fracture risk assessment.
- To achieve the benefit of screening to reduce morbidity and mortality from fractures, women found to have osteoporosis should be further evaluated, counseled, and, if appropriate, receive evidence-based management.
- There is insufficient evidence to recommend for or against screening for osteoporosis in men.
- Clinicians should use their clinical judgment regarding whether to screen for osteoporosis in men.



Why is this recommendation and topic important?

- Osteoporotic fractures are associated with psychological distress, subsequent fractures, loss of independence, reduced ability to perform activities of daily living, and death. Evidence shows that only 40% to 60% of persons experiencing a hip fracture recover their prefracture level of mobility and ability to perform activities of daily living.
- The age-adjusted prevalence of osteoporosis is 12.6% among community-dwelling US residents 50 years or older. Prevalence of osteoporosis is higher among persons 65 years or older (27.1% in women and 5.7% in men) and in women compared with men.



What are other relevant USPSTF recommendations?

The USPSTF has issued recommendations on interventions to prevent falls in community-dwelling older adults and on the use of vitamin D and calcium to prevent fractures and falls in community-dwelling adults.



What are additional tools and resources?

The National Institutes of Health has information on osteoporosis.



Where to read the full recommendation statement?

Visit the [USPSTF](#) website or the [JAMA](#) website to read the full recommendation statement. This includes more details on the rationale of the recommendation, including benefits and harms; supporting evidence; and recommendations of others.