



## Bruno “Bytes”

April, 2019

From Dr. Richard L. Bruno, HD, PhD  
Bits and Tidbits from the Post-Polio Coffee House

### On the topic of Bone Density and PPS (4/16/2019)

Dr. Bruno’s Original Post: ALL Post-Polio women -- and men -  
- should have bone density studies, whether they have had a  
fracture or not. There are treatments to slow bone loss:

### **After a Hip Fracture, Reducing the Risk of a Recurrence**

Following a fracture, patients should have a bone density test,  
evaluation of calcium and vitamin D levels and, in nearly all cases, medication to protect against further  
bone loss.

By Jane E. Brody  
NY TIMES April 15, 2019

Just as lightning can strike the same target more than once in a given storm, hip fractures can and do happen  
again to the same person. Yet, more often than not, people who fracture a hip do not get follow-up treatment that  
could prevent another fracture.

Studies have shown that after a hip fracture is repaired, patients often fall through the cracks, leaving them at  
risk of a recurrence. The surgeon’s job ends with fixing or, more likely, replacing the broken hip. It’s then up to the  
patient’s personal physician to recommend and prescribe measures to help prevent a second fracture.

However, the typical 15-minute office visit is often focused on current medical issues, like diabetes and high  
blood pressure, rather than on a possible future problem, albeit one that can be life-threatening. In many cases,  
experts say, practicing physicians don’t even know which of their patients have had a hip fracture.

Anyone who breaks a hip, unless from a severe trauma like a car accident, is considered at high risk for further  
fractures, including breaking the other hip. To reduce the risk, orthopedic experts recommend that following a  
fracture, patients should have a bone density test, evaluation of calcium and vitamin D levels and, in nearly all  
cases, medication to protect against further bone loss.

Even without a bone density test, Dr. Douglas C. Bauer, internist at the University of California, San Francisco,  
wrote in [an editorial in JAMA Geriatrics last July](#), “There is almost universal agreement that individuals with  
documented hip or vertebral fracture have established osteoporosis, indicating that they are at high risk of future  
fracture, and appropriate drug therapy should be routinely offered.”

In an interview he said, “Every patient with a reasonable life expectancy who has a hip fracture should be offered  
treatment.” Dr. Bauer was reacting to what he called “really depressing, shocking data” revealing that only a small  
— and steadily declining — fraction of hip fracture patients are being treated with medication that might forestall  
future broken bones.

“Things aren’t getting better, they’re getting worse, despite the fact that there are quite a large number of  
treatments that have been proven effective and are now inexpensive,” he said.

The distressing evidence comes from a [national study of 97,169 patients who fractured a hip](#) from 2004 through  
2015. Published in JAMA Geriatrics, the study, by Dr. Rishi J. Desai, epidemiologist at Brigham and Women’s  
Hospital, and co-authors showed a continuous decline in patients who started taking osteoporotic medications  
after the fracture, from 9.8 percent of patients in 2004 to a dismal 3.3 percent in 2015.

<https://www.nytimes.com/2019/04/15/well/live/after-a-hip-fracture-reducing-the-risk-of-a-recurrence.html?fbclid=IwAR2ST2GycTWeNkHRhDS7NE13CEfllkEva3urZUji4hKrlvyjiOKdldHwr-s>



Follow Up Bone Density Article:

[https://www.nytimes.com/2019/04/09/health/osteoporosis-evenity-bone-amgen.html?fbclid=IwAR3XTs245TS9\\_hZwBslrK7MZCCjCp0ndFkrZ9FZ5OnSeQy-jf5j0lt4p5fA](https://www.nytimes.com/2019/04/09/health/osteoporosis-evenity-bone-amgen.html?fbclid=IwAR3XTs245TS9_hZwBslrK7MZCCjCp0ndFkrZ9FZ5OnSeQy-jf5j0lt4p5fA)

### [On the topic of Throat Issues](#) (4/16/2019)

Original Post: I am wondering if anyone has experienced their throats collapsing. I woke up from a dead sleep unable to breath.

Dr. Bruno's Response: You need a sleep study to look for apnea. If your throat is "collapsing" while eating, a barium swallow study is in order.

### [On the topic of "Polio-Like" Virus](#) (4/19/2019)

Dr. Bruno's Original Post: **Virus linked to polio-like illness is *not* a poliovirus.**

Associated Press  
April 19, 2019

Researchers at the University of Minnesota and the U.S. Centers for Disease Control and Prevention say a virus appears to be the cause of a polio-like illness that caused paralyzing symptoms in some Minnesota children last fall, including one girl who remains hospitalized after losing all motor function.

The researchers say they found Enterovirus-D68 in the spinal fluid of one of six children who suffered acute flaccid myelitis, a mysterious and sometimes deadly paralyzing illness. Minnesota had 10 of the 228 confirmed AFM cases in 2018.

The university's lead researcher, Dr. Heidi Moline, says the fact they were able to identify the EV-D68 virus as the cause of paralysis in one of the Minnesota patients suggests it's a probable cause of other recent AFM cases.

### [On the topic of Dr. Bruno's Articles](#) (4/20/2019)

Original Post: Dr. Bruno, have you considered publishing a collection of your articles?

Dr. Bruno's Response: You can find ALL of my updated and newly published work in the **Encyclopedia of Polio and PPS**. Just go to my website: [postpolioinfo.com](http://postpolioinfo.com) and "click" on the Encyclopedia logo. It will take you to my articles, Bruno Bytes, books and videos.

### [On the topic of Shoulders and Strengthening](#) (4/23/2019)

Original Post: Our group has been talking about shoulder problems and the need to strengthen arms and hands to keep them viable. We would appreciate any ideas on gentle exercises for upper, lower arms and hands.

Dr. Bruno's Response: Strengthening arms and hands will not "keep them viable" but only make them weaker and will not cure shoulder problems.

Shoulder problems and weak arms and hands are SYMPTOMS of OVERUSE! Each polio survivor needs assessment of WHY shoulders have problems, not assume that arm and hand exercise is the cure for *any* problems. "Conserve to Preserve" remaining, poliovirus-damaged neurons is the treatment for PPS.

## On the topic of PPS Diet (4/27/2019)

Original Post: Change the way you eat and feel better...this IS good info. The Post Polio Diet. [Eat Well Be Well](#).

Dr. Bruno's Response: There are two additional articles in the [Encyclopedia of Polio and PPS under the topic "Diet"](#).

## On the topic of Exercise Causing Permanent Paralysis (4/28/2019)

Original Post: If you are overusing your muscles, would that lead to eventually paralysis of those muscles, or does overuse lead to more and more pain/weakness but never paralysis?

Dr. Bruno's Response: After nearly 40 years and 7000+ polio survivors I have never seen overuse cause permanent paralysis. In the first survey we did of polio survivors in 1985, the leading cause of muscle weakness was exercise and overuse.

Additional Question: The next question to is "to what degree do muscles weaken"? Is it "I could bench 200 lbs one day and only 100 lbs a year later," or is it more significant (200 lbs down to 20 lbs)?

Dr. Bruno's Additional Response: It's more like you could always stand up on your own, then you had to use your arms to get out of a chair and then, even when you got out of the chair using your weakening arms, your legs won't hold you up.

Additional Post: I have shot bows and arrows all my life. In the 90s I was shooting a bow with a draw weight of 64 lbs, stronger than most able-bodies archers. A few years ago I began shooting a bow at 50 lbs, because I couldn't handle the stronger bow. Now, at 70, I'm shooting a 40 lb bow because that's all I can handle with accuracy. In the 90s I won or placed in every tournament I entered and I have a room full of trophies. I won several state and regional championships and placed in the world longbow championship, twice. The last time I entered a tournament I was an "also ran." That's how the progressing weakness has affected me.

I'm just hoping to be able to keep shooting the 40 lb bow. I used to be able to keep myself in venison with my bow, but my freezer has been empty for the last two seasons. I'll give it another try this year, but I'm thinking my bow-shooting days are about done.

Additional Bruno "Bytes" are available for you to share in the Encyclopedia of Polio and Post-Polio Sequelae.

Go to: <http://www.papolionetwork.org/bruno-bytes.html>

Scroll down the page (through the Current Month posts).

Previous months are located there, in easily printable PDF format and are available by "clicking" on them,

Would you like to see Dr. Bruno in "action"? Check out the [Video Library](#).

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