

Editor's Note

THE INCREASING PROBLEM of hip fractures in the elderly is a strong inducement to start emphasizing hip fracture prevention. Two major pathways for hip fracture prevention are preventive measures and early treatment for osteopenia, and mechanical attenuation and dissipation of force energy from a fall.

The literature dealing with osteopenia is extensive, but information on prevention of hip fractures with hip protectors is scant (1, 2). Of note is a recent article in the *New England Journal of Medicine* by Kannus P. et al. (3) which corroborates earlier studies on the effectiveness of hip protectors in preventing hip fracture from a fall. Although one might take issue with the contention that most hip fractures result from a sideways fall directly onto the trochanter, the statistics in three different studies are compelling. Hip protectors do give considerable protection against hip fractures.

Two major problems have been noted in trying to use hip protectors for hip fracture prevention. The first is that there is poor compliance in using the device, with one study showing that only 24% of the treatment group wear

the protector regularly. The other problem is that, at this time, the hip protectors are not commercially available in the United States. This is extremely hard to understand, since in these days of cost containment, the prevention of only one hip fracture would more than pay for one hundred hip protectors.

It has been estimated that the use of hip protectors by eight at-risk patients would prevent one hip fracture. We would be well advised to place more emphasis on prevention and try to devise and manufacture simple, inexpensive, effective and user-friendly hip protectors.

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References

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