

Dr. Wanda Nicholson Chair, U.S. Preventive Services Task Force 5600 Fishers Lane Mail Stop 06E53A Rockville, MD 20857

Re: USPSTF Draft Guidelines on Screening for Osteoporosis to Prevent Fractures

Dear Dr. Nicholson and members of the U.S. Preventive Services Task Force,

As an organization focused on ensuring all women have access to affordable, comprehensive preventive care and screenings, the Alliance for Women's Health and Prevention (AWHP) commends the U.S. Preventive Services Task Force (USPSTF) for its commitment to osteoporosis screening to prevent fractures among women.

Osteoporosis disproportionately affects women, as <u>over a quarter (27.1%) of women age 65 or older and 19.6% of women age 50 and over</u> have the disease. Bone loss is also closely tied to menopause, a key stage for health and well-being among women, <u>with about 20% of bone loss in women occurring in the five to seven years after menopause</u>. Given this extensive impact on middle-aged and older women, we believe that osteoporosis is a key women's health issue that requires attention.

Luckily, several screening methods, including bone density testing, are effective in prevention and early detection of osteoporosis. USPSTF's new draft recommendations, which updates and remain generally consistent with its 2018 recommendation on the same issue, continue to recommend osteoporosis screening among all women age 65 and older and among postmenopausal women younger than age 65 years who are at increased risk for an osteoporotic fracture as estimated by clinical risk assessment. AWHP supports this continued commitment to screening access and coverage.

However, we also believe that USPSTF missed a key opportunity to further enhance its screening recommendations. We would encourage the Task Force to consider the Bone Health & Osteoporosis Foundation's guidelines, which include screenings for anyone who has broken a bone over 50, including men, as well as all men age 70 and older. While AWHP is focused on women's health, we also firmly believe that positive health outcomes among men are key and ultimately uplift the health of the women in their lives and communities.

Finally, AWHP also supports USPSTF's call for increased research on the efficacy and limitations of risk assessment and screening tools used for osteoporosis screening. Given that the evidence for these tools is based on clinical trial studies that are both several decades old and lacked critical racial and ethnic representation — particularly Black and Hispanic individuals — there is a potential underestimate of osteoporosis risk among these populations. Diverse representation in clinical trials is essential to achieve equitable health outcomes among all women.

Given its influence on insurance coverage of preventive screenings and services, USPSTF holds a tremendously important role in advancing women's preventive health across the nation. AWHP is grateful that USPSTF leverages its role in a way that will continue to advance women's access to osteoporosis screenings, thereby preventing countless fractures and extensive pain among women nationwide, and encourages it to further expand its screening recommendations to include men.

Sincerely,

Millicent Gorham CEO, Alliance for Women's Health and Prevention

