



Health **Help**

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// Is it normal to get shorter in height with age?

While losing a little height as you get older can be normal, height loss can also be a sign of osteoporosis, a condition characterised by the loss of bone density.

This leads to weak, brittle bones that can easily be fractured with a minor fall, or even with coughing, sneezing or bending over. People over 50 are at higher risk of osteoporosis-related spinal fractures, particularly women. Osteoporosis is also associated with early menopause, smoking and being overweight.

The most common osteoporosis-related fracture is a compression fracture in one of the vertebrae (bones) in the upper or lower back. This is where the vertebral body has decreased at least 15 to 20 percent in height due to small breaks or cracks. The vertebrae can collapse under excess pressure and occasionally bone fragments can collapse into the spinal canal and cause spinal cord compression. In addition to height loss, compression fractures can cause a curving of the back or a hunched-over appearance.

The main symptoms of an osteoporosis-related spinal fracture include:

- back pain that typically worsens with activity and is somewhat relieved by rest; and
- weakness, numbness or tingling sensations in the lower limbs, resulting in difficulty walking and changed bowel or bladder function; these typically only occur with compression of the spinal cord.

If you notice height loss or experience back pain or these other symptoms, consult a doctor. They may order x-rays of the vertebrae and an MRI scan to see if there is a fresh fracture, to check for any compression or associated ligament injury, and to make sure there are no other causes of the fracture, such as underlying cancer. Osteoporosis itself is usually evaluated by a bone mineral density (BMD) test, and blood tests to measure calcium and vitamin D.

For osteoporosis-related spinal fractures, treatment usually begins with pain management and a back brace. In more severe cases, minimally invasive procedures can be considered. Procedures known as vertebroplasty or kyphoplasty, where cement is injected into the fractured bone to stabilise it, can often be done as outpatient procedures with a quick recovery. In rare cases with unstable fractures or compression of the spinal cord, more extensive surgery may be required.

