FRACTURES from OSTEOPOROSIS ARE MORE COMMON THAN HEART ATTACK, STROKE, AND BREAST CANCER COMBINED.

EACH YEAR IN CANADA THERE ARE ABOUT 30,000 HIP FRACTURES AND MANY MORE CANADIANS SUFFER OSTEOPOROTIC FRACTURES AFFECTING THE SPINE, WRIST, SHOULDER & PELVIS.
**Osteoporosis Canada (OC)** was the first national organization for osteoporosis in the world and is the only national charitable organization dedicated to serving Canadians who have, or are at risk of, osteoporosis and osteoporosis-related fractures. We work to educate, empower and support individuals and communities on the importance of bone health and in the risk reduction and treatment of osteoporosis.

**Our Mission**

To improve the quality of life of Canadians by preventing osteoporotic fractures, Osteoporosis Canada:

- Educates Canadians about osteoporosis
- Advocates for optimal osteoporosis care
- Invests strategically in osteoporosis research
1 in 5 men & 1 in 3 women will suffer from an osteoporotic fracture during their lifetime.

50% of Canadians who suffer a fragility fracture and do not receive treatment for their underlying osteoporosis.

80% reduction in future fracture risk by effective drug treatments for patients presenting with fragility fractures.
Dear Friends and Supporters

Thanks to all of our generous supporters, volunteers and staff, we are excited to be celebrating yet another successful year at Osteoporosis Canada. Some highlights of our many successes in striving for a Canada without osteoporotic fractures include:

- Through the development of Canada’s first Fracture Liaison Services (FLS) Registry, Osteoporosis Canada recognized 25 Canadian hospitals offering Fracture Liaison Services. This registry will be a live tool, used to showcase Canadian hospitals who have demonstrated a commitment to the principles of identification, investigation and initiation of treatment which will ensure fracture patients will receive the care they need to help prevent future fractures.

- In the fall of 2015, new recommendations for fracture prevention in long-term care were published in the Canadian Medical Association Journal. These integrated recommendations target a specific population that is not usually considered in the development of treatment strategies and include valuable tools and resources for professionals providing care for long-term care residents.

In order to guide the priority of our effort over the next three years, a strategic planning review was undertaken that reaffirmed our need to focus on those Canadians at the highest risk for osteoporotic fractures. And to give Osteoporosis Canada sufficient organizational flexibility to react to opportunities and changing circumstances, the Board has adopted a new set of governing policies that provide greater freedom of action to the CEO and her team while still setting overall direction and ensuring responsible oversight.

But we could not have done any of this without the support of all of you. We would like to thank our thousands of passionate volunteers, educators, healthcare professionals, researchers and partners. Their phenomenal and unwavering dedication and commitment ensure that osteoporosis education, patient support and fundraising activities are implemented in communities across Canada.

Special recognition and thank you also go out to all of our partners and donors, whose confidence and generosity provide much needed support to the organization, allowing us to work towards realizing our vision of a Canada without osteoporotic fractures.

While we can all be proud of the accomplishments highlighted in this year’s annual report, we know that even greater achievements are on the horizon.

We are poised for even greater success; together we will achieve our vision of a Canada without osteoporotic fractures.
a STRONGER future for those diagnosed with osteoporosis

2 MILLION CANADIANS ARE AFFECTED BY OSTEOPOROSIS

By providing educational resources and tools to help manage the disease, those diagnosed can lead healthier, happier and stronger lives with osteoporosis.
WHAT WE DO
Making #BetterBoneHealth a priority for Canadians

COMMUNICATE

COPN (Canadian Osteoporosis Patient Network)
COPN, founded in 2004, is a national network of people living with osteoporosis. With close to 9,000 members and growing it is the patient arm of Osteoporosis Canada. Sharing. Supporting. Inspiring.

Coping
Members of COPN receive an e-newsletter – Coping. This bi-weekly digital publication includes content on critical matters which include understanding medication side effects, using assistive devices to help prevent falls and fractures and practical tips for living well with osteoporosis. Personal stories are also featured to encourage and inspire those diagnosed with the disease.

Bone Matters
Osteoporosis Canada hosts Bone Matters, a series of virtual public education forums with presentations by recognized experts in the field of osteoporosis. Members of COPN and the public at large have access to the live streaming and archived sessions. Topics include travelling with osteoporosis, osteoporosis and osteoarthritis and getting the most out of your doctor’s appointment.

Beyond the Break
Osteoporosis Canada, in partnership with Women’s College Hospital in Toronto, hosts Beyond the Break, a series of virtual health professional forums. Topics include the role of vitamin D in nutrition, bone health and osteoporosis, in addition to presentations on Osteoporosis Canada’s Long-Term Care Guidelines.

National e-Newsletter
An e-publication to communicate with Osteoporosis Canada stakeholders, to inform on current news and to provide calls-to-action.

Volunteers
Committed individuals help advocate, educate and support Osteoporosis Canada initiatives by donating their time as 1-800 volunteers, office support staff and in local chapters in communities across the country.
From April 2, 2015 to March 31, 2016 over 6,200 volunteer hours were completed resulting in numerous public engagements including 342 educational events, 76 fundraisers, and 53 local communications resulting in a total reach of over 1.2 million people across Canada.
WHAT WE DO

Making #BetterBoneHealth a priority for Canadians

EDUCATE

CME (Continuing Medical Education)
Development of CME modules for pharmacists, which were implemented in Shoppers Drug Mart and PharmaPrix pharmacies across Canada.

Exercise and Osteoporosis Resources

Video Series
Development of a video series on exercise and osteoporosis in partnership with the University of Waterloo and Geriatric Education and Research in Aging Sciences Centre, in follow-up to Too Fit to Fracture. The focus of the video series is to provide ideas for safe and effective exercise and physical activity and also includes stories of four very different individuals with osteoporosis, showing their innovative solutions to keep healthy and active.

One-Page Guide
Publication of a one-page, two-sided guide called Too Fit to Fall or Fracture. The guide contains a brief summary of the Too Fit to Fracture Exercise Recommendations. This one page guide is packed with useful information to get individuals thinking about ways to safely and effectively exercise. Also included in the guide are real-life examples of exercises individuals can do and which ones should be avoided.

Bone Fit™

Encouraging Safe Exercise Prescription
Bone Fit™ is an evidence-informed exercise training workshop. Bone Fit™ Basics is geared to community fitness professionals and Bone Fit™ Clinical is for clinical exercise professionals.
Participants are taught the most appropriate, safe and effective methods to prescribe and progress exercise for people with osteoporosis to maintain bone health and prevent the risk of fracturing. All participants are taught simple transitional movements, activities of daily living and recreational pursuits adaptable for people with osteoporosis.
EDUCATE

Bone Fit™ Workshops
From April 2015 to March 2016, nine Bone Fit™ collaborative workshops continued with community fitness professionals and clinical exercise professionals teaching overlapping content in a combined workshop across Ontario, training 95 community fitness professionals and 155 clinical health professionals.

In March 2016, one Bone Fit™ combined workshop took place in Saskatchewan, training nine community fitness professionals and 14 clinical health professionals.

Recommendations for Preventing Fracture in Long-Term Care
Osteoporosis Canada released, its first-ever national guidelines in the Fall of 2015 on preventing fractures in long-term care where fractures are significantly more common than among seniors in the community.

The guidelines, entitled Recommendations for Preventing Fracture in Long-Term Care, offer healthcare professionals, residents of long term care facilities and their families guidance to help them take measures to reduce immobility, pain, and hospital transfers, and to improve the quality of life for residents in long-term care.

They include an integrated falls and osteoporosis assessment, as well as various treatment strategies to prevent fractures including vitamin D and calcium intake, hip protectors, exercise, multifactorial interventions to prevent falls and osteoporosis medications.

The guidelines, published in CMAJ (Canadian Medical Association Journal), were developed with input from residents of long-term care facilities and their families as well as researchers and health professionals. The Recommendations for Preventing Fracture in Long-Term Care were developed using the GRADE approach.

The GRADE approach (Grading of Recommendations, Assessment, Development and Evaluation) is a method of grading the quality of evidence and the strength of recommendations in guidelines.

The lead author is Dr. Alexandra Papaioannou, Professor of Medicine, McMaster University, a geriatrician with Hamilton Health Sciences, Hamilton, Ontario. Other Scientific Advisory Council members who lent their expertise include Dr. A. Cheung, Dr. R. Crilly, Dr. S. Feldman, Dr. L. Giangregorio, Dr. S. Jaglal, Dr. R. Josse, Dr. S. Morin, Dr. H. Weiler and Dr. S. Whiting.
Osteoporosis Canada’s FLS Website and Registry

Completion of the FLS website created to address the need for easier access to FLS tools, resources, news and information in Canada. This website is the most comprehensive Canadian FLS online resource and is available in both English and French.

Currently in development, is the first ever Canadian Osteoporosis Canada FLS Registry which is near completion. The online tool will feature a map profiling FLS programs across Canada, which meets Osteoporosis Canada’s Essential Elements of Fracture Liaison Services. The Registry will allow insight into the breadth and location of FLS across the country and will serve as a vital tool to assist with Osteoporosis Canada’s efforts to foster the implementation of effective FLS across Canada.

Each year, hundreds of thousands of Canadians needlessly experience debilitating fractures because the underlying cause of their broken bones — osteoporosis — was undetected and untreated. Across Canada, fewer than 20% of people who suffer a fracture are assessed for osteoporosis. Without appropriate diagnosis and treatment, fracture patients remain at substantial risk for recurrent, debilitating and life threatening osteoporotic fractures at great cost to our healthcare system.
IF ALL CANADIAN FRACTURE PATIENTS RECEIVED FLS BEGINNING IN 2015 - 20,000 HIP FRACTURES AND 10,000 NON-HIP FRACTURES WOULD BE AVERTED BY 2023. THE CANADIAN HEALTHCARE SYSTEM WOULD SAVE OVER $413 MILLION IN AVERTED HIP FRACTURE COSTS ALONE BY 2023.
COMMUNITY
Expanding Our Reach

SAY IT. WRITE IT. TWEET IT. LIKE IT.
Whatever way you choose to do it – become part of the conversation.

507,187 (ENGLISH)
+ 166,928 (FRENCH)
= 674,115

679,349 (ENGLISH)
+ 196,914 (FRENCH)
= 876,263

UNIQUE WEB VISITORS

WEB HITS

UNIQUE WEB VISITORS

WEB HITS

24,322

LIKES

ENGAGEMENTS

POST REACH

6,360

8,708

269,704
HUMAN COSTS

1 in two hip fracture patients will suffer another fracture within 5 years.

20% THE RISK OF SUFFERING A SECOND SPINE FRACTURE WITHIN THE YEAR FOLLOWING THE FIRST ONE.

23 DAYS

54% THE PERCENTAGE OF PEOPLE DISCHARGED FROM THE HOSPITAL FOR A HIP FRACTURE THAT DO NOT RETURN HOME.

17% GO TO LONG-TERM CARE FACILITIES.

27% GO TO REHABILITATION CARE.

10% GO TO ANOTHER HOSPITAL.

1 in 3 hip fracture patients re-fRACTURE AT 1 YEAR.
FINANCIAL COSTS

$2.3 BILLION
THE OVERALL YEARLY COST TO THE CANADIAN HEALTHCARE SYSTEM OF TREATING OSTEOPOOROSIS AND THE FRACTURES IT CAUSES

$3.9 BILLION
THE OVERALL YEARLY COST TO THE CANADIAN HEALTHCARE SYSTEM IF A PORTION OF CANADIANS WERE ASSUMED TO BE LIVING IN LONG-TERM CARE FACILITIES BECAUSE OF OSTEOPOOROSIS

$44,156
THE COST OF A HIP FRACTURE TO THE CANADIAN HEALTHCARE SYSTEM IF THE FRACTURE PATIENT IS INSTITUTIONALIZED

$20,000
THE AVERAGE ACUTE CARE COST PER HIP FRACTURE PATIENT IN HOSPITAL AND REHABILITATION CENTRES
Recognizing Excellence

Strides in Osteoporosis Research

Osteoporosis Canada established the Lindy Fraser Memorial Award in 1993 to recognize individuals who have made an outstanding contribution to the field of osteoporosis research and education in Canada.

Lindy Fraser Memorial Award
2015 Recipient: Dr. Heather Frame

Dr. Heather Frame received her medical education at the University of Manitoba and is a Certificant of the College of Family Physicians of Canada. Practicing in Toronto for two years and now in Winnipeg since 1985, Dr. Frame currently practices Family Medicine at the Assiniboine Clinic as well as working in the Mature Women’s Center Osteoporosis Clinic, Victoria Hospital, Winnipeg. Dr. Frame is a committee member for the Manitoba Bone Density Program.

A member of the Osteoporosis Canada Board of Directors and the Scientific Advisory Council (SAC), Dr. Frame was part of the team to develop the 2005 update to the 2002 Guidelines and officially joined the SAC in 2005. She has worked on a number of publications, has sat on committees including the Guidelines Committee and has been co-chair of the new Knowledge Translation Committee. She has previously served on the Osteoporosis Canada SAC Executive Committee.

Dr. Frame was key in the development of the 2013 paper published in CARJ entitled Improving the Management of Osteoporosis Through Simple Changes in Reporting Fragility Fractures done in conjunction with the CAR. She went on to present a poster at IOFISCD on the same subject.

Currently, Dr. Frame is the Vice Chair of the Osteoporosis Canada Board of Directors which she joined in 2010 and also sits on the Board Development Committee and the Strategic Planning sub-committee. Additionally, Dr. Frame has done multiple CME events for Physicians and Public Forums on Osteoporosis.

A voice for Primary Care and its role in the management of osteoporosis, Dr. Frame has shown immeasurable dedication and determination in the collaborative effort to achieve the common vision of Canada without osteoporotic fractures.

Dr. Heather Frame
Lindy Fraser Memorial Award 2015 Recipient
Recognizing Excellence

Strides in Osteoporosis Research.

Osteoporosis Canada-Canadian Multicentre Osteoporosis Study Fellowship Award 2015 Recipient: Dr. Olga Gajic-Veljanoski

Dr. Olga Gajic-Veljanoski is a post-doctoral fellow at the GERAS Centre and Department of Medicine, McMaster University, supported by the Hamilton Health Sciences Foundation. Her interest in quality of life research led her to work with Dr. Alex Papaioannou.

Together with Dr. Papaioannou and the CaMos investigators, Dr. Gajic-Veljanoski will conduct a research study to examine the patterns of change over time in quality of life and healthcare costs after new or repeat osteoporotic fractures using data from the Canadian Multicentre Osteoporosis Study (CaMoS).

Dr. Olga Gajic-Veljanoski
OC-CaMos Fellowship Award 2015 Recipient
Thank You

Without You - We Could Not Do, What We Do

SHoppers Drug Mart • Dairy Farmers of Canada • Federated Health Charities Corporation • Amgen Canada Inc. • Manitoba Health Seniors and Active Living • Pfizer Consumer Healthcare • Actavis (Warner Chilcott) • Eli Lilly Canada Inc. • Victoria Foundation • Loblaws Inc. • CanadaHelps.org • LCBO • TD Waterhouse Private Giving Foundation • 940412 Ontario Ltd. • Dairy Farmers of Manitoba • The City of Winnipeg Employee’s & Retiree’s Charitable Fund • Jewish Foundation of Manitoba Sobeys Inc. • RBC Foundation • United Way Toronto • Manitoba Liquor & Lotteries • Manitoba Hydro • Saskatoon Community Foundation • Melville and District Donors Choice Appeal • The Winnipeg Foundation • Cenovus Employee Foundation • Bothwell Cheese Inc. • The City of Winnipeg • The Pathfinder Foundation • West Scarborough Neighbourhood Community Centre • Omni Health Care Ltd • Aqueduct Foundation • Canadian Society of Fiji Muslims • Manitoba Hydro Employees’ Charitable Donations Committee • The Calgary Petroleum Club

Osteoporosis Canada is grateful to all corporations, foundations and associations that have generously contributed funds between April 1, 2015 – March 31, 2016.

Listed above are partners who have contributed $1,000 or more.
Osteoporosis Canada had Program Fund revenues of $7,053,794 during the fiscal year ended March 31, 2016 which is consistent with revenues from the prior year. The Program Fund financial operations yielded a surplus of $35,217.

The Reserve fund, excess of revenues over expenditures of $(16,302), ended the fiscal year with a fund balance of $778,672.

The Designated Bequest fund, which represents funds donated for specific activities specified by the donor, ended the fiscal year with a balance of $6,537.

The Research Fund, which is administered by the Finance and Audit Committee of the Board of Directors and is financially segregated from the Program Fund, ended the fiscal year with a balance of $1,597,920. This represents a decline of $76,937 from the prior year. The decline is primarily attributed to a change of fair value of investments of $79,978. The Research Fund provides the financial resources for scientific research projects selected by the Scientific Advisory Council of Osteoporosis Canada.

The balance sheet reflects two significant changes in balances from the prior year. Cash and restricted cash at March 31, 2016 totaled $597,964, a decline of $517,360 from the prior year. In addition, deferred revenue declined $472,068 between 2015 and 2016. The decline in both cash and deferred revenues is primarily due to the timing of funds received in fiscal 2015 for fiscal 2016.

On behalf of the Board of Directors, I would like to take this opportunity to thank the volunteers, staff and management of Osteoporosis Canada for their invaluable contribution to the success of our organization.

Ian MacNair
Treasurer, National Board of Directors
Financial Highlights

Osteoporosis Canada
Year Ended March 31, 2016

### PROGRAM FUND REVENUES

<table>
<thead>
<tr>
<th>Source</th>
<th>F2016</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>GOVERNMENT FUNDING*</td>
<td>4,778,065</td>
<td>68%</td>
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<tr>
<td>INDIVIDUALS (INDIV, BEQUEST, MEMBERSHIPS)</td>
<td>1,430,057</td>
<td>20%</td>
</tr>
<tr>
<td>CORPORATIONS &amp; FOUNDATIONS</td>
<td>696,206</td>
<td>10%</td>
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<tr>
<td>OTHER **</td>
<td>149,466</td>
<td>2%</td>
</tr>
<tr>
<td><strong>TOTAL REVENUES</strong></td>
<td>7,053,794</td>
<td></td>
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</table>

* ONTARIO MINISTRY & OTHER PROVINCIAL FUNDING
** OTHER, PROGRAM MATERIALS AND INTEREST/DIVIDENDS

### PROGRAM FUND EXPENSES

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>%</th>
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</thead>
<tbody>
<tr>
<td>EDUCATION, ADVOCACY &amp; PROGRAM DEVELOPMENT</td>
<td>1,352,901</td>
<td>19%</td>
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<tr>
<td>ADMINISTRATION (INCLUDES GOVERNANCE)</td>
<td>555,587</td>
<td>8%</td>
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<tr>
<td>FUNDRAISING</td>
<td>867,140</td>
<td>12%</td>
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<tr>
<td>ONTARIO STRATEGY</td>
<td>4,242,949</td>
<td>61%</td>
</tr>
<tr>
<td><strong>TOTAL REVENUES</strong></td>
<td>7,018,577</td>
<td></td>
</tr>
</tbody>
</table>
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2015-2016

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