



Birdshot Uveitis Society Factsheet

DEXA (DXA) scan – measuring bone density

Please use this factsheet as background information to help discussion with your doctors. Individual cases may vary enormously and so the best information will always come from your doctors. The information in this sheet has been checked for accuracy by leading uveitis specialists.

Introduction

Osteoporosis is a condition where the bones lose density – they become thinner – which makes them more likely to break. People taking corticosteroids (steroids) by mouth have an increased chance of developing osteoporosis. If you are likely to be taking steroids for some time, or if you have other conditions which make osteoporosis more likely, your GP or consultant should assess your fracture risk. As part of that assessment, your doctor may want to arrange for the density of your bones to be measured with a DEXA (DXA) scan. Repeat scans may be performed, generally every one or two years, to monitor the state of your bones. You may have to ask your doctor to arrange bone density scanning for you, as this does not happen automatically.

What is a bone density scan?

A bone density scan is a form of X-ray that is used to measure the strength of your bones. Dual energy X-ray absorptiometry scanning (DEXA; also called densitometry x-ray or DXA) has become the most widely used method for measuring bone mineral density because it is quick, easy, reliable and uses very little irradiation. DEXA scanning is most often performed on the lower spine and hips.

How does a DEXA scan work?

It works by using two X-ray beams of different energies. These are absorbed in different ways by the body's tissues and, from this, the machine can calculate the density of your bones.

What do I need to know before having a DEXA scan?

Tell your doctor if you have recently had a barium X-ray examination or have been injected with contrast material for any other X-ray. If you have had either of these, you may have to wait 10 to 14 days before having a DEXA scan. Women should always inform their doctor or X-ray technician (radiographer) if there is any possibility that they are pregnant.

You should wear loose, comfortable clothing, with no metal such as zippers, belts or buckles. You will need to remove all items from your pockets for the scan. You will also have to remove any metal body piercings.

What happens when you have a DEXA scan?

A DEXA scan is performed as an outpatient procedure. You will be asked to lie on an examination table for a short time while the scanning machine arm passes over your body as it takes measurements. It is important that you stay as still as possible during the procedure to ensure a clear, useful image.

The DEXA scan is usually completed within 5 to 20 minutes, depending on the equipment used and the parts of the body being scanned. The test is painless and no injections are involved. You will not be placed in a tunnel and so will not feel enclosed. The X-ray technician will remain with you throughout the scan.

Who interprets the results and how will I get them?

A radiologist (a doctor specifically trained to supervise and interpret X-rays) will analyse the images and send a report to your GP or referring doctor, who will then discuss the results with you.

Your test result is generally given in the form of a T score which compares the density of your bones with that of healthy young adults. If your T score is greater than -1.0, your bone density is said to be normal. If your T score is between -1.0 and -2.5, then you are said to have osteopenia (lower than normal bone density). If your T score is less than -2.5, you are said to have osteoporosis. Less often, you might see the term Z score, which is a comparison of your bone density with that of other people of your age. A particularly low Z score might alert the doctor to perform further tests.

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Osteopenia is really very common. It affects about one in six young people, and affects more of us as we get older. It does not mean that you are unwell. If your scan results show that you have osteopenia, your GP will usually suggest some lifestyle changes to increase your bone density, such as including more calcium in your diet, stopping smoking, cutting down on alcohol intake and taking regular weight-bearing exercise such as brisk walking or running. If you are not already taking a vitamin D supplement, your GP may also advise you to do so, as this helps calcium to be absorbed into the body to strengthen the bones. Unless you are taking steroids, you will not normally be prescribed any additional medication if you have osteopenia. If your scan shows you have osteoporosis, your GP or referring doctor will discuss treatment options with you.

BUS (the Birdshot Uveitis Society) provides information and support to anyone with Birdshot. We are setting up a Birdshot patient database and Biobank to help Birdshot scientists and researchers.

Membership of BUS is free of charge. It allows you access to Birdshot Days held in the UK, where professionals and patients come together to exchange information.

Useful Birdshot Uveitis Society links

Email address: <mailto:info@birdshot.org.uk>

Website: <https://birdshot.org.uk>

Address: Birdshot Uveitis Society, PO Box 64996,
London SW20 8PT

Facebook support group: <https://facebook.com/groups/Birdshot/>

Twitter: <https://twitter.com/birdshotcharity>

YouTube channel: <https://www.youtube.com/user/Birdshot100/videos>

This leaflet was originally written by patient, Rea Mattocks, and was originally checked for medical accuracy by Dr J Armitstead, Associate Specialist, St Mary's Hospital, London

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