NICARAGUA

OVERVIEW

Due to the absence of statistical data, it is difficult to summarize the situation of osteoporosis in Nicaragua. Osteoporosis is not considered an important problem for the Nicaraguan government. The Nicaraguan Association of Menopause (ANCYM) was founded 11 years ago, and its six board members have developed projects related to prevention, detection and management of osteoporosis. Through lectures, symposia, television, radio and newspapers, ANCYM strives to provide the public with information about the diagnosis, prevention and treatment of osteoporosis.

Through the years, ANCYM has been successful in educating the public, and can see how patients now know that there is a silent disease that affects mostly women and their quality of life. Many patients, during consultation, request DXA examinations and want more information about preventing osteoporosis.

In summary, osteoporosis is not a priority for the national health system in Nicaragua. There is no central database to compile information collected from clinical tests. ANCYM has been working only a short time, but has been able to educate the public about osteoporosis. There is considerable interest in the disease amongst the Nicaraguan public, both in terms of personal diagnosis and desire for increased understanding. Osteoporosis must become a priority for the Ministry of Health of Nicaragua.

KEY FINDINGS

Population growth statistics

The present population of Nicaragua is estimated to be 5.7 million, of which 13% (733,000) is 50 years of age and older and 2.9% (165,000) is 70 years and over. By 2050, it is estimated that the total population will rise to 7.2 million, of which 38% (2.8 million) will be 50 years and older and 11% (806,000) will be 70 years and older1 (fig 1).

Epidemiology

There is a dearth of epidemiological data for osteoporosis in Nicaragua. ANCYM reports that the Nicaraguan female population aged 40 years or older, has prevalence rates of 45% osteopenia, 15% osteoporosis, and 40% with normal bone density.

Hip fracture

No available information.

Vertebral fracture, other fragility fractures

No available information.

Diagnosis

In Nicaragua, there are five DXA machines2 allowing for one DXA per 1.1 million inhabitants, and there are 30 ultrasound scanners allowing for one ultrasound per 200 000 inhabitants. All DXA equipment is located in the main city (Managua), and no machines are available in public hospitals. Of the exams performed, 90% are performed in the Hospital Metropolitano Vivan Pellas, and the other 10% are performed in other private institutions. Information regarding the average length of wait for a DXA scan is not available.

FIGURE 1 Population projection for Nicaragua until 2050

SOURCE US Census Bureau
Reimbursement policy

The cost of a DXA scan is 120 USD, and the cost of an ultrasound scan is 40 USD. DXA exams are not reimbursed within the public health system. Sixty-five per cent of the total population is covered by the public health system, 25% by social security and 10% are privately insured.

Calcium and vitamin D

Calcium and vitamin D supplements are available in Nicaragua, but fortified foods are not.

PREVENTION, EDUCATION, LEVEL OF AWARENESS

In Nicaragua, osteoporosis is not recognized as a major health problem and there are currently no government public awareness programmes covering prevention, diagnosis or management of osteoporosis. There is no governmental health professional training and there are currently no approved governmental guidelines for osteoporosis treatment or prevention. ANCYM organizes one annual congress and two patient awareness conferences every year. Physicians provide information about osteoporosis and patient education information.

Patient support groups do exist in Nicaragua. Public health awareness programmes are supported via helplines, public lectures and other various public awareness activities through the local society, ANCYM.

RECOMMENDATIONS

• DXA machines should be accessible to the entire population rather than just to those within the private health industry.

• Create a central statistical database to provide a robust and objective analysis about osteoporosis throughout the region.

• Every osteoporosis related association must continue to improve dissemination of information to the public and physicians of varying specialties.

• Invite a wide range of specialists to be incorporated into the various national societies.

REFERENCES

1. U.S. Census Bureau, International Data Base 2011
2. Kanis JA, Data on file 2011