Bone-density tests
When you need a test and when you don’t

A bone-density test is a way to measure the strength of your bones. The test, called a DEXA scan, is a kind of X-ray.

Many people get a bone-density test every few years. The main reason to have the test is to find and treat serious bone loss. But most men, and women under age 65, probably don’t need the test. Here’s why:

**Most people do not have serious bone loss.**
Most people have no bone loss or have mild bone loss (called osteopenia). Their risk of breaking a bone is low. They do not need the test. They should exercise regularly and get plenty of calcium and vitamin D. This is the best way to prevent bone loss.

**The bone scan has risks.**
A bone-density test gives out a small amount of radiation. But the harmful effects of radiation can add up, so it is best to avoid it when you can.

**The drugs used to treat bone loss have risks.**
The most common drugs to treat bone loss are Fosamax (generic alendronate), Boniva (generic ibandronate), and Actonel (generic risendronate). These drugs have many risks. Common side effects include upset stomach, difficulty swallowing, and heartburn. Rare side effects include bone, eye, joint, and muscle pain, cracks in the thighbones, bone loss in the jaw, and heart rhythm problems. Other drugs used to treat bone loss also have risks, including blood clots, heart attacks, strokes, and serious infections.
The treatments have limited benefits. Many people are given drugs because they have mild bone loss. But, there is little evidence that these drugs help them. And, even if the drugs do help, they may only help for a few years. So, you may want to consider them only if you have serious bone loss. Serious bone loss is called osteoporosis.

The test can be a waste of money. A DEXA scan costs about $132, according to HealthcareBlueBook.com. And if your doctor prescribes a drug when you only have mild bone loss, you spend a lot more. A month’s supply of generic alendronate costs $38 to $70. Fosamax, the brand-name of the same drug, costs $125 to $148 per month.

Who should get a bone scan? Women should get a bone scan at age 65. Men age 70 and up may want to talk with their doctors about the risks and benefits before deciding. Younger women, and men ages 50 to 69, should consider the test if they have risk factors for serious bone loss. Risk factors include:

- Breaking a bone in a minor accident.
- Having rheumatoid arthritis.
- Having a parent who broke a hip.
- Smoking.
- Drinking heavily.
- Having a low body weight.
- Using corticosteroid drugs for three months or more.
- Having a very low vitamin D level.

You may need a follow-up bone-density test after several years. That depends on the results of your first test.

Advice from Consumer Reports

How can you keep your bones strong?

The following steps can help you build bone:

**Exercise.** The best exercise for your bones is exercise that makes your bones carry weight. When you walk, your bones carry the weight of your whole body. You can also lift weights. Aim for at least 30 minutes of weight-bearing exercise a day.

**Get enough calcium and vitamin D.** They help you keep your bones stronger.

- Aim for at least 1,200 mg of calcium a day. Eat foods high in calcium, such as low-fat dairy products, leafy green vegetables, and canned sardines and salmon. You may need a calcium pill each day.
- Consider taking vitamin D if you are a woman in menopause or you get little sun. Take 600 IU a day.
- Take 800 IU if you are 70 or older.

**Avoid smoking and limit alcohol.** Smoking and drinking alcohol can speed up bone loss.

- Try a stop-smoking program. Ask your doctor about a nicotine patch.
- Limit yourself to one drink a day for women, and two drinks a day for men.

**Try to avoid certain drugs.** Some drugs can damage bones. These include corticosteroids, proton pump inhibitors used to treat heartburn, and some of the newer antidepressants. If you take one of these drugs, ask your doctor about switching to another drug.