

BREAKING NEWS

NEW ZEALAND ORTHOPAEDIC NURSES ASSOCIATION 2007. Issue 2

Hi everyone,
Welcome to this issue of Breaking News. The planning for the conference in Rotorua in November is progressing well. We have Professor Elaine Rush as one of the keynote speakers. Elaine is from AUT and specialises in issues related to obesity. It would be great to have some presentations from other nurses as well. Group presentations are also welcome so please put on your thinking caps.



We would love to hear from you.

Lynley Papadopoulos
Registered Nurse
Orthopaedics
Counties Manukau DHB
LynleyP@middlemore.co.nz

The Orthopaedic nurse maintains current orthopaedic knowledge through formal and informal education.

Orthopaedic Scholarships.

The Ministry of Health is currently offering scholarships for nurses working in Orthopaedics, particularly in the area of elective surgery. (Joint replacements primarily). The scholarships can cover courses of study, conference attendances and site visits. Contact your Director of Nursing office for further information.

Other opportunities.

Auckland University of Technology offers a Speciality Practice paper on Orthopaedic Nursing. This will next be offered in May 2007. This can become part of a course of study that leads to certification as a Nurse Practitioner. This paper is offered on-line. It is a single semester paper.

The University of Auckland also run a Speciality Practice paper in Orthopaedics. This can also lead on to a clinical Masters and Nurse Practitioner certification. This is not currently offered on line. It will next be offered Semester One 2008- it is a double semester paper.

Show and tell:

Do you have anything interesting happening in your area? If so, please share it. Send contributions to this newsletter to LynleyP@middlemore.co.nz

**Report from NZONA Midcentral Educational Meeting.
Sheree Gare.**

Jenny Baty-Myles is a senior physiotherapist who is involved with the diabetic weight loss clinic at Waikato Hospital. She gave us an enlighten encounter with her role in relation to the obese patient. Jenny introduced the topic of what you, the clinician, can do:

- Seize the opportunity
- Feel confident about addressing obesity
- Use clinical, respectful language
- Speak frankly

Obesity predictors were identified as Body Mass Index and Waist Circumference, and Jenny discussed the use of these two measurements and how health professionals can use them as indicators.

Jenny is one of the team involved with the Adult Weight Management Program – Diabetes Service at Waikato Hospital, and is involved with a multi disciplinary team that includes medical staff, nurses, psychologists, dieticians and clerical staff. This program involves both encouragement of exercise, healthy living and dieting.

Weight loss is a difficult task but as clinicians we need to acknowledge the problem and discuss options with the patient.

Our second speaker was John Young, the Orthopaedic Discharge Planning Nurse. He gave an overview of the orthopaedic considerations when nursing the bariatric patient. He explored the mechanical issues of the hospitalised bariatric patient and the desired equipment that should be used. It was also emphasised that nurses are not disposable and that there must be a commitment to safety from both management and nurses. John gave a quick overview of medical complications associated with obesity, and also acknowledged the psycho social considerations when nursing these patients. The main points highlighted again at the end of the slide show was meeting the client's needs, safety of staff and team work.

Our third speaker was Jo Knapp, who is a clinical nurse leader in theatre. She presented problems that theatre staff face with the obese patient in the theatre setting. Again, staff safety and teamwork was emphasised.

Our Midcentral NZONA educational evening was a huge success with colleagues coming from as far as New Plymouth. The meeting concluded with a teleconference of NZONA in preparation for the ANZONA Conference to be held in November at Rotorua.

Website Development.

Liz Blake-Palmer has kindly offered her services to NZONA to set up a website for us. She is meeting with key individuals to discuss what needs to be included. There are many exciting ideas

Upcoming events:

CONA 30th annual conference,
The Fairmount Express Hotel & Victoria Conference Centre
Victoria, British Columbia, Canada
May 12-15 2007

NAON 27th Annual Congress
St Louis, MO
Energising the Future
May 19-23 2007

Some useful websites:

www.orthopaedicnursing.org

www.ona.asn

www.orthonurse.org

Services offered:

TYPING SERVICES

Assignments, Essays, Notes, Thesis, Interviews, Minutes, Reports

Previous Orthopaedic Typing Experience

Contact: Heather Almao PH 021 478 846

Article of interest:

Giangregoriop,L., Fisher,O., Papaioannou,A. & Adachi,J. (2007).
Osteoporosis Knowledge and Information Needs in Healthcare
Professionals Caring for Patients with Fragility Fractures. *Orthopaedic
Nursing, 26(1), 27-35*

Osteoporosis is a skeletal disorder characterised by compromised bone strength, increasing the risk of fracture.

This article seeks to evaluate osteoporosis knowledge and learning needs among healthcare professionals. The study was undertaken in Canada.

The article identifies education as an important element in managing the osteoporotic patient.

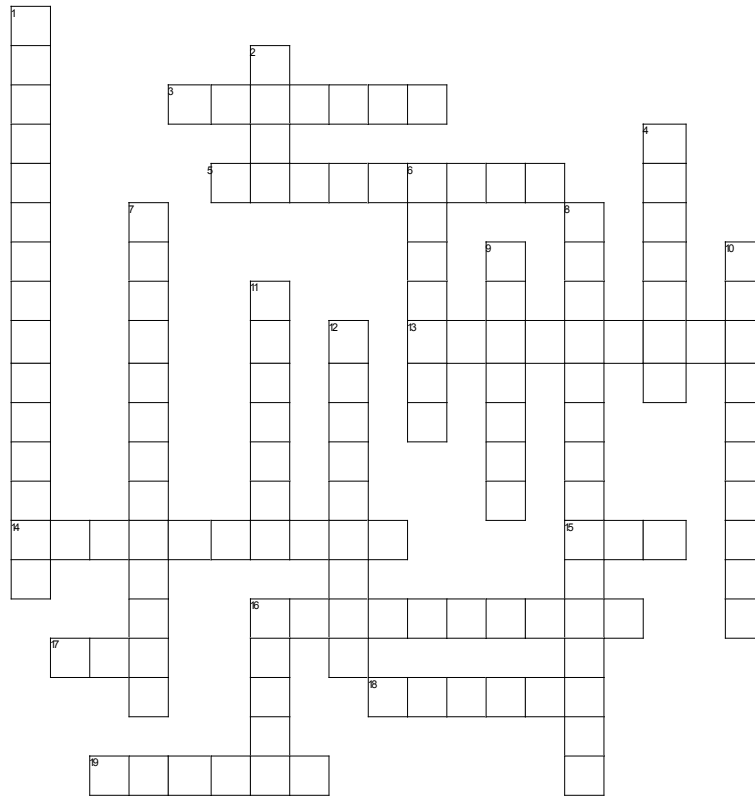
129 people Agreed to participate out of 179 staff. Nurses comprised the

most in the group which also included physios, dieticians, pharmacists, social workers and others. This article discusses the importance of a multidisciplinary approach when managing patients with fragility fractures. A questionnaire was completed by the group. This was to assess osteoporosis knowledge. The results showed a knowledge deficit among health professionals working in this area. The principal areas of knowledge deficit were related to health promotion and management of patients with osteoporosis. Among nurses and nursing students it was identified that there was a deficit in nutrition related items such as recommended calcium intake, what age bone loss begins, best preserver of bone in women. Among the study group 40% indicated a family history of osteoporosis so these results have a personal relevance to some as well.

With our aging population, osteoporosis and fragility fractures are not going to go away. Health professionals need to have good knowledge in order to provide the best outcomes for patients. Osteoporosis is often referred to as the "silent epidemic" and a patient may not know they have it until a fracture occurs. Health promotion activities are an important part of the education provided by the nurse. As appears apparent, nurses have a key role in the management of this disease, especially in the area of health promotion.

Puzzle for the month:

Osteoporosis



www.CrosswordWear.com

ACROSS

- 3 Lifestyle activities such as _____ and excessive alcohol intake can contribute to the development of osteoporosis
- 5 _____ fractures appear in 30% of women aged 70-79 years.
- 13 Premature _____ is a risk factor
- 14 Osteoporosis represents a major cause of _____ and loss of function in older people
- 15 Among Caucasian women the risk of developing a _____ fracture is higher than the risk of developing breast cancer
- 16 Osteoporosis begins during the _____ years during a time of critical bone growth and development
- 17 25% of _____ are affected by osteoporosis
- 18 Fractures of the spine from osteoporosis can lead to loss of _____
- 19 Osteoporosis is sometimes referred to as the _____ epidemic due to the absence of symptoms until a fracture occurs

DOWN

- 1 Prolonged use of thyroid hormone and _____ increases risk
- 2 _____ mass is the primary measurable indicator of osteoporosis
- 4 An important dietary element is _____
- 6 _____ and anorexia nervosa cause an imbalance of calcium and hormones such as oestrogen, thus decreasing bone density
- 7 _____ exercise such as walking is an important prevention strategy that is not costly
- 8 Drugs that reduce the incidence of vertebral and hip fracture
- 9 Maximal bone _____ is achieved by the time an individual reaches 30 years.
- 10 Osteoporosis has been described as a _____ disease with a geriatric outcome
- 11 _____ abuse causes loss of calcium, magnesium and zinc.
- 12 Patient _____ is an essential component of effective osteoporosis prevention and management
- 16 _____ or white ethnicity is a primary risk factor associated with osteoporosis

Last month's answers.

Orthopaedic history

