

A Multidisciplinary Take on Bone Disease

HOW A NEW CENTER IS RESPONDING TO THE GROWING NEED FOR COORDINATED CARE.

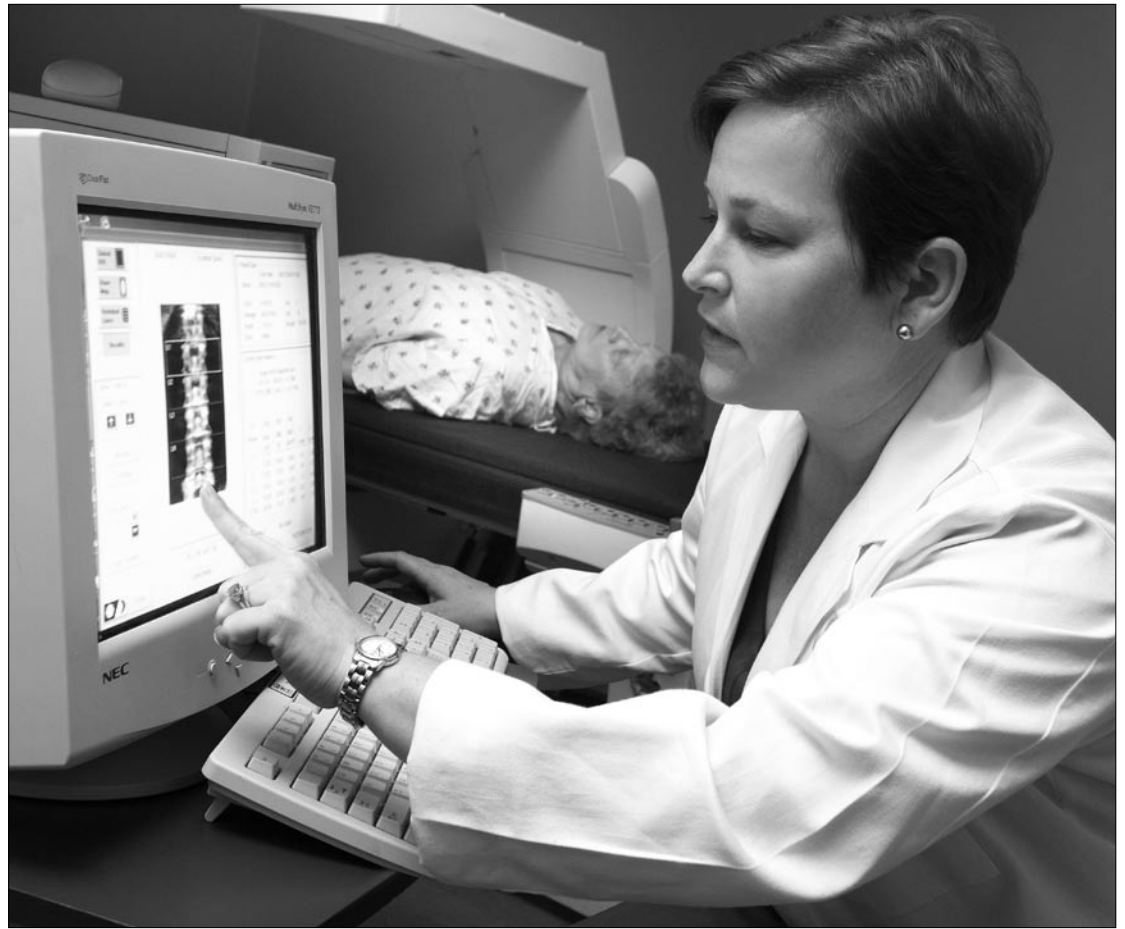
Asking a person with severe osteoporosis or a fractured hip to make multiple trips between The Johns Hopkins Hospital and Bayview Medical Center for tests and treatment never sat well with Suzanne Jan de Beur.

Instead, Jan de Beur envisioned a single clinic where her patients—each one suffering from some form of metabolic bone disease—could come and meet with all of the physicians and specialists they needed in one visit. All their tests and treatments, the bone density scans, the blood work, the X-rays and the medication infusions, could be performed on the same day, in the same appointment, by a team of providers all working on the same page. “I was seeing a huge need among patients with metabolic bone disease,” says Jan de Beur, chief of endocrinology at Bayview.

And so, in keeping with the multidisciplinary model that has quickly become the favored mode of care at Hopkins Hospital

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and its affiliates, Jan de Beur, an endocrinologist, with the support of the Department of Medicine, decided to open the Johns Hop-



Suzanne Jan de Beur runs a bone density scan on a patient.

kins Metabolic Bone Center.

To assist with the center’s development, Jan de Beur and geriatrician Michele Bellantoni recruited Debbie Sellmeyer, a Hopkins-educated endocrinologist who had opened and run a similar clinic at the University of California in San Francisco. Meanwhile, bone-scanning and testing equipment, such as a DEXA-scanner, was installed at the center’s clinic, which opened in September 2008, on the Bayview campus. Now, Sellmeyer says, patient care is organized under a single umbrella.

In the past, Sellmeyer explains, metabolic bone disease patients were being seen all over the place by any number of physicians who often didn’t communicate or collaborate with each other. Then there were the patients coming to the Emergency Department with fractures, being treated and then

sent home. The problem was that, once those patients had received treatment and recovered from their illnesses or fractures, many seemed to fall into oblivion, making follow-up care difficult, sometimes impossible. Such failures can be detrimental to the patients. “They get their acute fractures taken care of in the hospital and then they go to rehab services and then they vanish,” Sellmeyer says. “We don’t know where they’re going, but nationally there are very low rates of them getting bone density tests and getting treatment to prevent future fractures. They’re our highest risk group, but they’re also the hardest to hang on to.”

That no longer has to be the case, Jan de Beur says. “The goal of this place is to have a single site where people can have their orthopedic care, endocrine care,

geriatric care, nutrition consultations, physical rehabilitation evaluations and anything else they need organized and performed,” she says. “They can get their bone densities done and their medication infusions, and we can keep track of their progress.”

Since launching last fall, the center has seen a steady influx of patients, and the available appointment openings are filling more and more quickly. Jan de Beur says it’s important that physicians in other departments consider referring patients with fractures or those most at risk for osteoporosis, such as postmenopausal women, patients taking steroids, or malnourished patients. “There aren’t many physicians who specialize in metabolic bone disease,” Jan de Beur says, “and that’s why we know we can make such a difference for patients.” ■