



Príomhoifigeach Cliniciúil
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BY EMAIL ONLY

Deputy Mairéad Farrell
Dáil Éireann
Leinster House
Kildare Street
Dublin 2

19th November 2024

PQ36464/24- To ask the Minister for Health the reason he spent so much on Covid when a similar number of patients fractured or suffered a fracture-related death during the same time period.

Dear Deputy Farrell,

Thank you for your representation.

The coronavirus disease 2019 (COVID-19) pandemic was a global outbreak of coronavirus – an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). Cases of novel coronavirus (nCoV) were first detected in China in December 2019, with the virus spreading rapidly to other countries across the world. This led WHO to declare a Public Health Emergency of International Concern (PHEIC) on 30 January 2020 and to characterise the outbreak as a pandemic on 11 March 2020. On 5 May 2023, more than three years into the pandemic, the WHO Emergency Committee on COVID-19 recommended to the Director-General, who accepted the recommendation, that given the disease was by now well established and ongoing, it no longer fit the definition of a PHEIC.

In relation to the question about fracture related deaths, The National Clinical Programme for Trauma and Orthopaedic Surgery (NCPTOS) was established in 2011 to improve and standardise the quality of care nationally for all orthopaedic patients. The delivery of cost-effective, evidence-based healthcare is in the best interests of all stakeholders.

The NCPTOS has a strong interest in bone health and is an advocate for fracture liaison services to manage patients who present following their first fragility fracture. The NCPTOS in their *Model of Care (2015: 44 – 46)* advocated for the establishment of a Fracture Liaison Service (FLS) as a secondary fracture prevention service for the treatment of osteoporotic patients. Their model of care emphasises the importance of early diagnosis, health promotion, fracture risk assessment, fracture prevention through the establishment of a Fracture Liaison Service (FLS) and development of a skilled interdisciplinary workforce.

The Trauma Steering Group in their Report - *A Trauma System for Ireland (2018: 11, 64 – Recommendation 15)* –recommended that “The HSE should develop a comprehensive Fracture Liaison Service to provide high quality, evidence-based care to those who suffer a fragility



fracture with a focus on achieving the best outcomes for recovery, rehabilitation and secondary prevention of further fracture". The implementation of an FLS was also highlighted in the *"Strategy to Prevent Falls and Fractures in Ireland's Ageing Population", 2008*. The National Fracture Liaison Service Programme (NFLSP) Steering Group was established in 2018 to implement this recommendation. The Fracture Liaison Service (FLS) Pathway was one of 37 prioritised for implementation through the HSE's Strategic Programmes Office Modernised Care Pathways initiative. FLS promotes preventative community-based care, as opposed to a reliance on reactive medicine. The implementation of this HSE FLS pathway promotes hospital avoidance through a reduction in fragility fracture presentations.

This creates capacity within the system to meet scheduled orthopaedic care requirements and better utilise already limited in-patient bed capacity. This FLS service brings immeasurable gains to the people who would otherwise go on to have a painful, and potentially life threatening second fragility fracture. FLS is globally acknowledged as the gold standard means of reducing fracture numbers in the population. The HSE's FLS pathway and its services promote early intervention into disease management, reduce/decrease avoidable hospital fracture admissions, promote patient health & wellbeing and provide a person-centred, integrated approach to care. FLS services are for all adults aged 50 years or older who experience a fragility fracture. Indeed, it is important to highlight that suitable patients for the HSE's FLS pathway comprise: 1. Patients over 50 years 2. Patients with a history of osteoporosis 3. Patients with a fragility fracture.

I hope this provides you with assistance.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Sharon Hayden', written over a thin horizontal line.

Sharon Hayden
General Manager
Office of the Chief Clinical Officer