

Call for Evidence

The **All-Party Parliamentary Group on Osteoporosis and Bone Health** is conducting an inquiry into preventing predictable bone loss and fractures among people at increased risk because of particular treatments, therapies or care circumstances.

The inquiry is being conducted with the support of the **APPG on Prostate Cancer**, the **APPG for Stem Cell Transplantation and Advanced Cellular Therapies**, and the **Adult Social Care APPG**.

It will examine how health and social care services identify, assess and manage people whose risk of osteoporosis or fracture can be foreseen, and what earlier action could prevent avoidable fractures, improve quality of life and reduce costs.

While significant attention has rightly been given to preventing further fractures after a first fracture, many people face predictable risk beforehand because of treatment, medication, frailty, reduced mobility, falls, poor nutrition or other known factors.

The inquiry will focus on:

1. **Prostate cancer**, particularly androgen deprivation therapy and survivorship pathways.
2. **Stem cell transplantation and advanced cellular therapies**, including treatment-related risks and long-term follow-up.
3. **Social care**, particularly adults living in residential or nursing care homes and those receiving domiciliary care.

Respondents may answer in relation to one or more areas.

We welcome evidence from health and social care professionals, clinical experts, Royal Colleges, professional societies, patient organisations, charities, academics, NHS bodies, local authorities, care providers, commissioners and others with relevant expertise.

The APPG would particularly welcome evidence on:

- how effectively people at predictable risk are identified, informed and supported
- whether they receive timely fracture risk assessment, DXA, treatment, monitoring or specialist referral
- whether responsibilities and pathways are clear across specialist services, primary care, community services and social care
- how well bone health is embedded within prostate cancer, stem cell transplantation, survivorship and long-term follow-up pathways

- how fracture risk is identified and managed in residential, nursing and domiciliary care, including falls, mobility, nutrition and possible spinal fractures
- whether treatment and follow-up continue reliably when people move between services or care settings
- whether staff have sufficient awareness, guidance and routes for seeking clinical assessment
- variation between areas or services, including inequalities in access
- examples of effective practice, and policy, commissioning, guidance, audit or accountability changes that could support earlier action

A separate survey will gather lived experience, while Freedom of Information requests will seek evidence from NHS bodies and local authorities.

Responses should be no more than **1,000 words** and do not need to address every point.

Please submit responses as a PDF or Word document to **APPG@theros.org.uk**.

Submissions may be published in full or in part.

Closing date: Monday 16 November