



Rheumatoid arthritis: fracture risk assessment

NICE indicator

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Indicator

The percentage of patients aged 50 to 90 years with rheumatoid arthritis who have had an assessment of fracture risk using a risk assessment tool adjusted for RA in the preceding 27 months.

Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our <u>menu of indicators</u>.

To find out how to use indicators and how we develop them, see our <u>NICE indicator</u> process guide.

Rationale

Assessing for risk of fracture is an important part of holistic primary care for people with rheumatoid arthritis (RA) over 50 years old. There are a number of therapies and treatments available for preventing fragility fractures in people who are thought to be at risk. This indicator requires assessment of fracture risk using risk assessment tools adjusted for rheumatoid arthritis to aid decision making on who will benefit from preventative therapies and treatment.

Source guidance

- Rheumatoid arthritis in adults: management. NICE guideline NG100 (2018, updated 2020)
- Osteoporosis: assessing the risk of fragility fracture. NICE guideline CG146 (2012, updated 2017) recommendations 1.4, 1.7, 1.11 and 1.12

Specification

Numerator: The number of patients in the denominator who have had an assessment of fracture risk using a risk assessment tool adjusted for RA in the preceding 27 months.

Denominator: The number of patients aged 50 to 90 years on the rheumatoid arthritis register.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions:

- Patients on the rheumatoid arthritis register with a diagnosis of osteoporosis for more than 27 months.
- Patients on the rheumatoid arthritis register with a dual-energy X-ray absorptiometry (DXA) scan result of osteoporotic or with an associated T score of -2.5 or less recorded more than 27 months ago.
- Patients on the rheumatoid arthritis register prescribed a bone sparing agent more than 27 months but less than 33 months ago.

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

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