

# Journalcritique assignment

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**ASSIGN  
BUSTER**

Journal Article Critique I chose to read the article, “ Osteoporosis in multiple sclerosis” written by Andrew P Hearn and Eli Silber. It is an understanding about osteoporosis and the connection it might have with multiple sclerosis (MS) compared to patients that do not have multiple sclerosis. Multiple sclerosis is a neurological disability that affects a great amount of young adults. The longer a person has multiple sclerosis, the more the person loses strength in there bones.

Osteoporosis occurs when the body does not absorb the required amount of bone mineral density (BMD), which reduces bone strength. Both men and women have different factors that can increase the risks of getting osteoporosis. This article explains that MS is the second cause of disability (neurological), along with one sixth of white women in their lifetime will have a hip fracture. Diagnosing osteoporosis for men and women along with their risk factors are included in this reading.

This article also contains past results from studies of multiple sclerosis patients with bone mass density. Some risk factor levels are unclear and large-scale studies are needed for clear results and connections. Along with this information, it includes management guidelines for the general population that has osteoporosis. This reading also includes insight of the process of chronic inflammatory with multiple sclerosis along with the role of vitamin D in both osteoporosis and multiple sclerosis.

This article has a great impact for health care professionals with the information that it gives and in the areas where more research is needed. It is also important because it shows the connection that medication, vitamins,

and minerals have and which ones have a greater impact on multiple sclerosis and osteoporosis in both men and women. It is also important because the results include congenital, acquired, lifestyle, and iatrogenic factors. These factors are necessary for health care providers to compare these results to their own patients as well as being helpful for future studies.

This reading is also important because it shows what bones have a greater risk associated with bone mass density (BMD). This current evidence is a useful guideline for management protocol until more evidence is acquired.

Resources Hearn, A. P. , & Silber, E. (2010). Osteoporosis in multiple sclerosis. *Multiple Sclerosis*, 16(9), 1031. Turley, S. (2011). *Medical*

language: Immerse yourself (2nd ed. ). Upper Saddle River, NJ: Pearson.

Medical Terminology Breakdown | Medical Word | Prefix | Combining form |

Suffix | Definition | | 1 | osteoporosis | None | oste/o- (bone), por/o- | -osis  
(condition; abnormal | abnormal rarefaction of bone | | | |(small opening,

pores) | conditions, process) | | 5 | chronic | None | Chron/o- (time) | -ic  
(pertaining to) | disease that persists over a long period | | | | | 6 |

inflammatory | None | Inflat/o- (redness and | -ory (having the function |

Having the function of redness and | | | | warmth) | of) | warmth | | 7 |

demineralization | de- (reversal of; | mineral/o- (mineral; | -ization (pertaining  
to) | pertaining to lack of | | | | without) | electrolyte) | | mineral/electrolyte | |

8 | anticoagulant | anti- (against) | coagul/o- (clotting) | -ant (pertaining to) | A  
substance that prevents the clotting | | | | | of blood. | | 9 | lumbar | None |

lumb/o- (lower back, area | -ar (pertaining to) | part of the back and sides

between the | | | | between the ribs and | | lowest ribs and the pelvis | | | |

pelvis) | | | | 10 | femoral | None | femor/o- (thigh bone) |-al (pertaining to) |  
pertaining to the femur or the thigh |