

DXA and fracture risk assessment

In the November 2021 issue, an error appeared in Williams S, Khan L, Licata AA. *DXA and clinical challenges of fracture risk assessment in primary care*. *Cleve Clin J Med* 2021; 88(11):615–622. doi:10.3949/ccjm.88a.20199. On page 621, the second paragraph in the section titled “Pharmaceutical management recommended” should have read as follows: “Further, advising only the use of calcium and vitamin D is inadequate management. Her provider should recommend that she use an antiresorption agent as first-line therapy and consider anabolic drugs if there are problems with the initial drug choice. She should not reinstate hormone therapy at her age for bone health alone as there may be increased risk for cardiovascular disease.⁴⁴ However, this caveat is not absolute and requires a balance of risk and reward if hormone therapy is also needed for vasomotor, genitourinary, or other problems.” Reference 44 has been changed to the following: Flores VA, Pal L, Manson JE. *Recommended hormone therapy in menopause: concepts, controversies and approach to treatment [published online ahead of print, 2021 Apr 15]*. *Endocr Rev* 2021; bnab011. doi:10.1210/endrev/bnab011.

Article is correct on ccjm.org.