

## Slowing down bone loss

ACCORDING to consultant orthopaedic surgeon Dr Ruzaimi Md Yusoff at MSU Medical Centre, most people reach their peak bone mass around the age of 30. After that, bone remodelling continues, but you lose slightly more bone mass than you gain because of a decrease in osteoblast activity. That's why it is important to have as much bone mass as possible by the age of 30.

There are multiple modifiable and non-modifiable risk factors which can affect bone health.

**Diet** – A low calcium intake will cause low bone density which leads to early bone loss, causing a higher risk of fractures. Not getting enough vitamin D can also increase the risk of osteoporosis as it is important for calcium absorption.

**Physical activity** – Not being active for long periods can increase the chances of getting osteoporosis. Muscles and bones become stronger with regular exercise and thus delay the onset of osteoporosis.

**Body weight** – Maintaining an ideal body weight is important for bone health. This is because extremely thin individuals will have lesser bone mass. Therefore, severely restricting food intake and being underweight weaken the bone.

**Smoking** – Research suggests that tobacco will increase the risk of osteoporosis. Women who smoke go through menopause earlier than those who don't.

**Alcohol** – People who consume a lot of alcohol are more likely to get osteoporosis.

**Medicines** – Usage of corticosteroid medications such as cortisone, prednisolone and dexamethasone can be damaging to the bone.

**Age** – Advanced age causes thinning and weakening of the bone.

**Gender** – Women have a greater risk of osteoporosis as

they have less bone tissue than men. Women also lose bone faster than men because of hormonal changes that occur after menopause.

**Ethnicity** – Caucasian and Asian women are more prone to osteoporosis.

**Family history** – A strong family history of osteoporosis predisposes an individual to develop osteoporosis at an earlier age.

Maintaining bone health is important to prevent or slow down the process of bone loss. Dietary calcium intake is extremely important. Good sources of calcium include dairy products, almonds, broccoli, kale, canned salmon with bones, sardines and soy products such as tofu. Calcium supplements may also be prescribed by a doctor if dietary calcium intake is less than the requirement.

Adequate vitamin D intake is important for calcium absorption. Good sources of vitamin D include oily fish such as salmon, trout, whitefish and tuna. Additionally, mushrooms, eggs and fortified foods, such as milk and cereals, are good sources of vitamin D.

Sunlight also contributes to the body's production of vitamin D. Vitamin D supplements may also be prescribed if indicated.

Physical activities, especially weight-bearing exercises, can help build strong bones and slow the process of bone loss. Avoiding smoking and limiting alcohol intake will also help delay the occurrence of osteoporosis.

There are some signs of osteoporosis that we should look out for which include receding gums, chipped or brittle nails, weakened grip and fractured bones.

It's important to seek

medical attention for any type of bone pain, especially if the pain is severe, persistent, worsening over time or associated with swelling, redness, warmth, a fever, unintentional weight loss, or a palpable mass or lump.

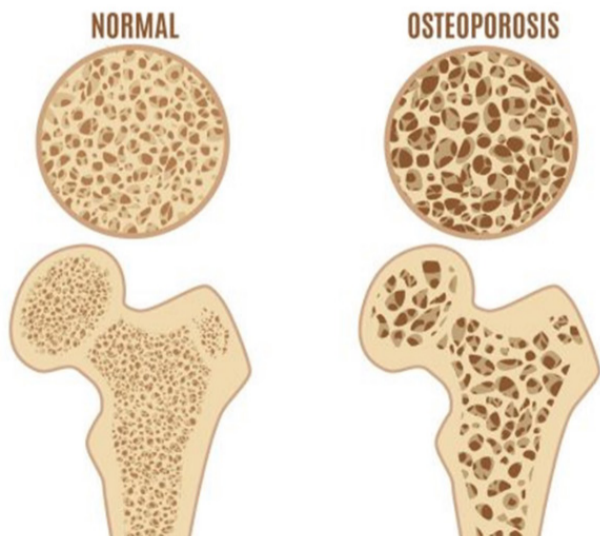
Since osteoporosis does not have any symptoms until a bone breaks, it is important to talk to your doctor about your bone health. Your doctor may

recommend a bone density test if you are at risk for osteoporosis. This test measures bone density and determines whether you have osteoporosis. It can also assess your risk of fractures.

Medications may be prescribed to help prevent and treat osteoporosis. These include bisphosphonates, oestrogen agonists/antagonists, calcitonin, parathyroid hormone, oestrogen therapy and hormone therapy.



Dr Ruzaimi Md Yusoff.



The structure of a healthy bone (left) and a bone with osteoporosis.

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# Understanding ADHD and autism

CHILDREN playing loudly or throwing tantrums are often seen as disturbances in public spaces. While many may overlook these behaviours, growing awareness of ADHD (Attention-Deficit/Hyperactivity Disorder) and autism has led more parents to seek answers about these conditions.

KPJ Damansara Specialist Hospital general and developmental paediatrics specialist Dr Charlotte Jane Joseph sheds light on the causes, management strategies and the role of parenting in addressing these conditions.

“ADHD can stem from a combination of factors. Environmental influences play a significant role, along with genetics, excessive screen time and parenting styles. For instance, children who lack clear guidance or boundaries early on may develop behaviours that resemble ADHD.”

Many parents allow young children to act freely, finding it ‘cute’. However, this can lead to children believing they are in control, resulting in restlessness and difficulty focusing. ADHD is typically diagnosed in older children, while similar behaviours in younger ones are

often more related to environmental factors and parenting approaches.

A key strategy to reduce ADHD-like behaviours is setting clear and consistent rules. For example, if a child wants to watch TV at an inappropriate time, parents should calmly explain the rule and enforce it consistently. Saying ‘no’ does not require anger; it is about establishing boundaries with firmness and clarity.

“When parents frequently give in to a child’s demands, the child learns they can always get their way, which may lead to long-term behavioural issues,” Dr Joseph adds.

Children with autism may also have ADHD. While autism primarily affects social skills and communication, ADHD is characterised by hyperactivity, impulsiveness and attention difficulties.

Dr Joseph acknowledges the challenges parents face and offers strategies for managing these conditions. “One effective method is the ABC approach: Antecedent, Behaviour, and Consequence. This means identifying what triggers a behaviour, understanding the behaviour itself, and analysing its consequences. For example,



Dr Charlotte Jane Joseph.

if a child throws something, parents should consider, ‘What happened before this? What triggered it?’ Recognising triggers can help in effectively managing behaviours,” she explains.

“Social stories can help younger siblings understand their brother or sister’s condition. Older siblings benefit from clear explanations that relate to their experiences. Schools should focus on awareness and acceptance, ensuring that teachers and classmates understand and support children with ADHD or autism rather than judging them.”

Regarding concerns about diagnosis, Dr Joseph encourages early evaluation. “Proper diagnosis by a paediatrician and psychiatrist is crucial. Early intervention can significantly improve outcomes. In Malaysia, some parents fear stigma, but in many countries, ADHD and autism are seen as differences rather than deficiencies.”

Behaviour modification is typically the

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Dr Charlotte Jane Joseph

first step in managing ADHD, with medication considered if necessary. Parents and teachers can benefit from specific strategies to address attention and behaviour challenges guided by therapists.

By understanding these conditions and taking proactive steps, parents, educators, and the community can foster a supportive environment where children with ADHD or autism can thrive.

The Child Development Centre (CDC) at KPJ Damansara Specialist Hospital offers early detection services to identify developmental delays, provide diagnoses, and create personalised intervention plans. Parents concerned about their child’s development are encouraged to seek assessment services.

■ To schedule an appointment, call 03-7718 1000 or visit <https://kpjhealth.com.my/charlotte-jane-joseph>.

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Parents often face challenges when handling children with ADHD.



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