

# Prednisone and Crohn's May Break My Bones

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July 18,  
2019



Despite being a rough-and-tumble tomboy as a child, I never broke any bones until my 40s. In 2015, I broke my right foot. I wish I had an exciting story to tell, but I broke it because I'm short.

I was running to the bathroom (non-IBD related) when my pinkie toe became entangled in the hem of my long pajama pants. When I tripped headfirst into the wall, I was so concerned I had gone through the Sheetrock that I didn't even feel the pain in my foot until the next morning.

Of course, with my high pain tolerance and stubborn determination, I disregarded my swollen and bruised foot and attended my first martial arts test after earning my first-degree black belt, something I had been waiting and training for the last two years. I was able to drive with little pain. However, walking or putting any weight on my foot was excruciating, even for me. I took the three-hour test, modified to accommodate my injury.

After I came home and showered, my fiancé drove me to urgent care. X-rays showed a clean break in my fifth metatarsal. The doctor gave me a walking boot, crutches, and instructions to make an appointment with an orthopedic surgeon to see if I would need surgery to repair the break. Fortunately, I only had to wear the boot. While most metatarsal fractures heal after six to eight weeks, my foot took six months.

My bones had weakened from years of taking prednisone to treat a multitude of ailments, including Crohn's, and from a lack of vitamin D, which helps the body absorb calcium. Malabsorption of fat-soluble vitamins like vitamin D is common in Crohn's patients. In

the article "Vitamin D and Inflammatory Bowel Disease," published in the journal Gastroenterology & Hepatology, Dr. Ashwin N. Ananthakrishnan notes that some studies indicate up to 70% of people with IBD have insufficient vitamin D levels.

I'm surprised I hadn't broken anything sooner as clumsy as I am, especially since I had been diagnosed with a vitamin D deficiency sometime around 2010. Bloodwork for my gastroenterologist showed my vitamin D level was somewhere in the teens, slightly below the normal range of 20 to 40 nanometers per milliliter.

He referred me to an endocrinologist, who then ordered a bone density scan, or bone densitometry, to assess any damage to my bone mass. The results showed osteopenia in my left hip and spine. Because I was only in my late 30s and was premenopausal at the time, the endocrinologist recommended I take calcium supplements with added vitamin D3 and eat and drink more calcium-rich foods.

My vitamin D level briefly increased to a low normal range but fell after time. Per doctor's orders, I began taking more than the recommended daily dose (5,000 IU) of the strongest over-the-counter vitamin D. Again, my vitamin D level rose to the optimal range but wouldn't hold steady.

At the time I broke my foot, my vitamin D level had fallen below 10. I had begun taking ergocalciferol, a prescription dose of 50,000 IU of vitamin D, multiple times a week. When that failed to normalize and stabilize my level, the endocrinologist determined I couldn't absorb the vitamin through my digestive tract. By the end of the year, my only recourse was to start intramuscular injections of vitamin D.

In the beginning, I would give myself injections of 150,000 IU of vitamin D twice a week. As my levels ticked upward, the injections became less frequent and the dosage strength decreased. By the time my liver failed in the fall of 2017, I was down to one monthly maintenance dose of 100,000 IU.

Since my transplant, my body has been able to maintain a normal vitamin D level through nutrition alone. However, both my endocrinologist and gastroenterologist continue to monitor my level every six months, and I will be having a bone density scan next month to ensure my bones haven't further deteriorated. If my bone density is stable or even improved, I can go back to the recommended biannual schedule.

I still have some concerns about the fragility of my bones. That doesn't stop me from continuing to practice martial arts four times a week. In fact, all my doctors encourage my exercise regimen. The weight-bearing exercises involved, such as running, jumping, and kicking, as well as the strength training and yoga aspects of martial arts actually strengthen

and rebuild bone mass. With my days of vitamin D deficiency behind me for now, the only breaking I intend to do are the wooden boards as I begin testing for my third-degree black belt.

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