

Newsletter

2024

What next? We start to think about climate change and how we are adapting

Nowadays, there is huge media coverage around climate change. We know that this is causing a lot of anxiety for some people, especially adolescents and young adults. We also know that many of us are starting to look at our own lifestyles and see what changes we can make, such as changing our diets or looking for ways to rely on our cars less.



These changes are likely to not only benefit the environment but will also affect our health, and we want to try to establish what changes we are

all making, and how aware young people are about the current climate emergency. We hope to send out a questionnaire to our 3G participants in the summer – but we are very aware that it has been many years since we first invited people to be part of our 3G cohort. So, if you are interested to hear more about this study – perhaps you have children or grandchildren who will be 16 or older this year who might like to get involved – please register your interest here at [XXXX](#) or ask relatives to look at this page. Registration does not commit you to take part but allows us to contact you (ideally electronically for reasons of sustainability) when this survey opens. If you completed a survey from us in summer 2022, we have your contact details and we will be in touch again automatically when this survey opens – but please let us know if your email has changed!

X-ray knee osteoarthritis, knee pain and how you grew in infancy – is there a link?



Osteoarthritis is the most common form of arthritis and affects most of us as we get older. We have previously shown links between how we grow early in life and the development of osteoarthritis we can see on x-rays. However, we know that what we can see on an x-ray often correlates poorly with the pain or limitation someone experiences; we were interested to investigate this further. Many of you have had knee x-rays taken as part of your study visits over the years, and we have studied x-rays taken when the study first started with questionnaire answers about knee pain about 11 years later. Our analyses suggest that among people in whom we could see evidence of knee

osteoarthritis in our first survey, those who grew better in the first year were less likely to report pain 10 years later. These are preliminary findings that we hope to share at the next World Congress on Osteoporosis and Osteoarthritis in London this year, in the hope that other researchers can study this important issue further. Watch this space!

The Hertfordshire Intergenerational Study helps us understand how we consider our risk of health conditions



The Hertfordshire Study truly is a family affair now –many of our original cohort members have now passed on our invitations to be involved in our research to their children and grandchildren, in a wave of the study that we have called (not that originally) the Hertfordshire Intergenerational Study (or 3G for short). Family members have completed questionnaires we have sent out, and many may recall us asking about their views on their risk of breaking a bone, compared with other health events like heart disease. We were interested to know more about this

because, although our lifestyles play a large part in our health, we do inherit a predisposition to many conditions from our parents. For example, a family history of fracture is an important predictor of personal fracture risk. We asked many of you whether you thought your risk of breaking a bone was ‘much lower’, ‘a little lower’, ‘about the same’, ‘a little higher’ or ‘much higher’ compared to others. We also asked you to rate your risk of heart disease. Using the medical and family history information you provided we could see that people are much more aware of the link between a family history of heart problems and their own cardiac risk, than for broken bones. This is really important to us, as it demonstrates that better education around how a family history of hip fracture impacts individual risk might be beneficial to support everyone to make positive lifestyle and healthcare choices at a point in their lives when such change might have substantial benefit. We know that this starts in childhood – it is never too early!

Hertfordshire Cohort Study findings to be presented at the World Congress on Osteoporosis

Some of you may remember attending clinics in 2011-2012 and having your grip strength, walking speed and muscle mass measured. This information has been used in an exciting new study on sarcopenia, a condition characterized by the loss of muscle mass and strength as we age. We’ve delved into various ways of defining sarcopenia. Some definitions focus on low grip strength and slow walking speed, while others consider low grip strength and low muscle mass. Interestingly, our findings reveal a low level of agreement between these different definitions. This means that the number of people identified as having sarcopenia can vary greatly depending on the definition used. This significant finding highlights the need for a consistent definition of sarcopenia to pave the way for the development of effective treatments. We’re delighted to announce that our research will be presented at the prestigious 2024 World Congress on Osteoporosis, Osteoarthritis and Musculoskeletal Diseases, an event organised in part by the International Osteoporosis Foundation (IOF). We’re also proud to share that our previous Director, Cyrus Cooper, President of the IOF, and our current Director, Nick Harvey, Chair of the IOF Committee of Scientific Advisors, are playing pivotal roles in the organisation of this conference. Thank you so much for your help that made this research possible!



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