

# Confronting the Challenge of a Silent Disease

“I can think of few things more challenging than for someone to learn—the hard way—that they have a serious chronic disease,” says Alex Kumbar, franchise owner of OsteoStrong in Raleigh and Durham. “But that is often the case with osteoporosis. Osteoporosis is known as ‘the silent killer’ or ‘the secret disease,’ because, until you break a bone, you might not know you’ve got low bone density. The disease is painless and the first warning may be that broken bone.”

“Osteoporosis,” he explains, “means ‘porous bone,’ leading to low bone mass. Osteoporotic bones are extremely weak, making them much more susceptible to breaking.”

This is not a minor problem, he points out. In the United States, the NIH estimates that some 200 million people are at high risk due to low bone mass—that includes one in two women and one in five men over the age of 50.

And, he notes, “osteoporosis can rightly be called a deadly disease. In fact, it is a leading cause of premature death among the elderly, because bones get progressively more brittle as people age—and a broken bone in an elderly person can spell disaster. According to the NIH, 50 percent of elderly people who break a hip die within six months of the fracture. One in six women taken to hospital with a hip fracture will not come out alive and men fare even worse.

“OsteoStrong,” he says, “uses a technique called osteogenic loading (*see box*) to prevent or address those serious problems of decreased bone density.” In a conversation with *Health&Healing*, Mr. Kumbar explains how this unique bone building system meets the challenge of osteoporosis head-on.

*Health&Healing: Who is at risk for osteoporosis?*

**Mr. Kumbar:** We all are, actually. Because loss of bone density is a normal part of the aging process. People generally achieve peak bone density at the age of 30, but the body never stops remodeling bone. Every day you break down old bone and make new bone to replace it. It’s just after the age of 30 that most people are breaking down their bone faster than they’re making new bone—typically losing 1-3 percent per year.

*He&H: Can you prevent bone loss?*

**Mr. Kumbar:** It’s more a matter of getting the body to build bone faster than it’s reabsorbing it. Building bone during the developmental years is a critically important foundation for a healthy life. However, you can trigger your body to increase bone building, at any age, and at any starting ability—even for post-menopausal women.

The key to building bone is stress. A hundred years of research—known as Wolff’s Law—tells us that, when stressed appropriately, the body will respond by building bone. That is the essence of the OsteoStrong program: the equipment allows you to safely load a high level of pressure



Alex Kumbar explains the measurements of bone strength recorded on one of the four pieces of osteogenic loading equipment. The screen shows measurements over time as well as an indicator of the pressure required to stimulate bone growth.”

## OSTEOGENIC LOADING - HOW IT WORKS

“OsteoStrong is not a gym, diet, pharmaceutical, or health supplement,” explains Mr. Kumbar. “It’s a system that works for people at all ages and levels of activity to promote skeletal strength. The process is called ‘osteogenic loading’ or ‘impact emulation’ because the devices give you the benefits of high impact force without risk of injury that comes with uncontrolled impacts.”

Specially designed, patented equipment allows individuals to safely apply the exact amount of pressure through their bones to trigger a bone-building response. A weekly session takes about 15 minutes, during which you apply force on four different devices—pushing, pulling, or lifting—in order to reach the point at which you are building bone. The equipment displays how much force you’re using—and whether you have reached the needed level to trigger the body’s adaptive response.

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through your body, while giving you real-time feedback on when you’re achieving the force needed for increased bone building.

*He&H: Can osteoporosis be treated?*

**Mr. Kumbar:** The statistics on osteoporosis in the elderly are certainly grim. But, although osteoporosis is described as a chronic condition, it doesn’t mean it’s inevitable or permanent. Dr. John Jaquish, who developed the osteogenic loading system, has described osteoporosis as “a disease of deconditioning”—reflecting the steady decline of bone strength as we age.

So, if you look at osteoporosis in that way, you can see it isn’t something that’s immutable; it’s something you can influence. And that’s where the OsteoStrong program comes in—it’s a powerful method of “re-conditioning” your bone.

A lot of factors affect your bone density. These include dietary changes, weight-bearing and cardiovascular exercise, and medication; and these approaches can have a positive impact—especially in combination. However, a 2015 meta-analysis of 152 peer-reviewed studies, comparing these approaches and OsteoStrong, showed that osteogenic loading—even without

changing diet—was more than twice as effective in improving bone density than any other habit changes or medication.

In short, osteogenic loading has proven extremely successful in improving bone density—efficiently and without drugs.”

*He&H: What’s involved in the OsteoStrong program?*

**Mr. Kumbar:** The program is remarkably efficient—requiring only about 15 minutes, once a week. The two questions I’m most frequently asked are: “Does it work?” and “How long do I have to do this?” The answer to the first question is “absolutely.” Even just last month we had a member who reversed two years of bone loss in just one year at OsteoStrong. We also had our highest improvement yet with another member, whose bone density increased by 10.7 percent. These are among many such examples. We’re happy to show the redacted scans that our members have shared with us, and we offer a free introductory demo to anyone looking to learn more or see the local results.

As for the second question: OsteoStrong results are lasting, even after you stop. While bone density would continue to decline at the natural rate—typically 1 percent a year—if, as a result of a year of osteogenic loading, you get a 5 percent improvement in bone density, you’ve reversed five years of bone loss.

Like so many health maintenance choices, the question of “how long” is an individual one. Maintaining bone health is important for overall health, and increasingly so as we age. And OsteoStrong can be an important part of that maintenance program—especially if you need to address osteopenia or osteoporosis. A useful starting place might be to know where you are—by getting a DEXA scan of your bone density. That will let you know your current risks, and provide a benchmark for improving your bone health.

We’ve seen cases of improvement in DEXA numbers within six months, but generally, we recommend doing a one-year follow-up to get an accurate picture of the progress you’re making. But osteogenic loading affects more than just skeletal strength and bone density. It’s beneficial for your joints, increases physical strength, decreases many types of joint and back pain, and improves balance and posture. So, you’re going to feel the benefits long before that annual DEXA scan. **h&h**

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