3B. Pharmacologic treatment for osteoporosis in women or men is recommended when the 10-year probability of hip fracture $\geq 3\%$ or fracture at a major site $\geq 20\%$. Consensus-based

3C. Pharmacologic treatment for osteoporosis in women or men is optional when the 10-year probability of hip fracture is $<3\%$ and fracture at a major site $<20\%$.

6I. Zoledronic acid (intravenous 5 mg annually) is an option for postmenopausal women over the age of 65 with high risk and a prior vertebral fracture. (See notes for bisphosphonate therapy above.) Evidence-based: A

6L. Alendronate (10 mg/day or 70 mg/week) or Zoledronic acid (intravenous 5 mg annually) is recommended as a first-line therapy for men aged 70 or older diagnosed with osteoporosis or with a FRAX 10-year risk of hip fracture $\geq 3\%$. Consensus-based


_Fracture risk and zoledronic acid therapy in men with osteoporosis._ 