and without the inclusion of femoral neck T-scores was not satisfactory (76%) and was worse than that reported during the validation of FRAX in other countries (approximately 85%-90%). This finding is important in view of the proposed use of FRAX as a means to identify low- or high-fracture risk patients who do not require DXA and must be taken into consideration when interpreting results in Greek women. A Greek FRAX appears to be necessary.

All the authors declare no conflict of interest.

REFERENCES