



RE: “Race/ethnic differences in trabecular bone score in mid-life women: the Study of Women’s Health Across the Nation (SWAN)”

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We want to thank Drs. Jain and Vokes for pointing out two errors in our manuscript, one in the introduction and one in the discussion. Of importance, however, is that our study results and final interpretation are unaffected by these errors in the text. In our introduction, we erroneously reported that the trabecular bone score (TBS) was higher in non-Hispanic Black women compared to non-Hispanic White women in the National Health and Nutrition Examination Survey (NHANES 2005–2008) [1]. However, based on the same reference, we cited the correct NHANES result in our discussion, where we noted that Black women had about 3% lower TBS compared to White women. In the discussion section, when we summarized the results of Jain et al. [2], we mistakenly reported that the TBS was acquired from Hologic scanners. In fact, Jain et al. [2] used a Lunar GE scanner; Lunar GE TBS results are reported to be less affected by BMI. Jain et al. [2] reported no differences in TBS between Black women compared to White women after adjusting for age and tissue thickness. Our conclusions are consistent with these results. Our SWAN findings disagree with those of NHANES TBS report [1]. Notably, the NHANES analysis used an earlier algorithm, which accounted for between-participant soft tissue variability by correcting for BMI. However, even after BMI correction, TBS readings from Hologic densitometers are depressed in the setting of high BMI, which led to the development of a tissue-thickness TBS correction.

The lack of a difference in TBS between Black and White women diverges from established differences in bone

mineral density (BMD) and fracture rates. To address the comment of fracture associations with TBS, we previously published results from SWAN that variation in premenopausal TBS was related to fracture risk, but this association was not independent of BMD [3]. In this analysis, we were unable to stratify by race/ethnicity because of the lower number of fractures in Black women.

Declarations

Conflict of interest The authors declare no competing interests.

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