There were no associations between plasma cortisol concentrations post dexamethasone and basal bone density or rate of bone loss at the proximal femur or lumbar spine in either men or women. CBG was neither associated with bone density at any site nor was it associated with bone loss rate (data not shown). Furthermore, there were no associations between cortisol measurements and bone strength at any site in both men and women. In men, there were no associations between urinary total cortisol metabolite excretion and basal BMD or rate of bone loss at any site. In women, lower urinary total cortisol metabolite excretion tended to be associated with lower basal BMD at the lumbar spine (r = 0.22, P = 0.05; r = 0.12, P = 0.31 after adjustment), but there were no associations between urinary total cortisol metabolite excretion and bone loss at any site.

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osteoporosis. We found that activation of the HPA axis, as evidenced by an elevated peak plasma cortisol response to ACTH<sub>1-24</sub>, was associated with greater bone loss at the lumbar spine in men and with lower BMD at the femoral neck and greater bone loss at this site in women. Urinary