BISPHOSPHONATE

PATIENT INFORMATION LEAFLET

SPRING GARDENS GROUP MEDICAL PRACTICE

WHAT ARE BISPHOSPHONATES?

Bisphosphonates are medications that help to strengthen bones and reduce the risk of a bone breaking (fracture). They can also help relieve bone pain and may be used to treat high levels of calcium in the blood.

YOU SHOULD NOT TAKE BISPHOSPHONATE IF

- You are pregnant or breastfeeding
- Ø You have severe chronic kidney disease (CKD)
- Φ You are unable to stand or sit upright for at least 30 minutes, or if there are any abnormalities of the oesophagus.
- Φ You have low calcium levels or other disturbances of bone and mineral metabolism (such as parathyroid dysfunction and low Vitamin D).

WHY ARE BISPHOSPHONATES PRESCRIBED?

Your doctor may prescribe a bisphosphonate if you have:

Osteoporosis - a condition where bones become thin and more prone to fracture even as a result of normal activity.

Paget's disease of bone – where the formation of abnormal bone causes deformity and pain.

Cancer - that has spread to the bones (bone metastases).

Very high amounts of calcium in the blood in people who are very ill with advanced cancer.

HOW LONG IS THE TREATMENT CONTINUED?

For osteoporosis, treatment with bisphosphonates is usually given for at least five years. Your doctor will review your progress each year.

For Paget's disease, the treatment may be given for a shorter period of time.

WHICH BISPHOSPHATE CAN I BE PRESCRIBED AND HOW DO I TAKE IT?

- Ø Alendronate: It must be taken at least 30 minutes before food. The tablet must be swallowed whole and taken with a glass of plain water. It should be taken while in an upright position and you must not lie down for at least 30 minutes after taking the medication. It is a once weekly medication and should be taken on the same day each week.
- Ø Risedronate: taken usually once a week, although also available as a daily tablet. Should be taken at least 30 minutes before the first food or at least 2 hours before or at least 2 hours after any food if taken inbetween meals.
- Ø Zoledronic acid an infusion once a year. This is slowly given into the vein over at least 15 minutes. You will need a blood test before each infusion, to check on your calcium, vitamin D, magnesium levels and kidney function.
- Ø **Ibandronic acid** is a type of bisphosphate that is given by drip (infusion) or as a tablet.

WHAT ARE THE SIDE EFFECTS OF BISPHOSPHONATES?

Like any medication, bisphosphonates can cause a variety of side effects. Side effects of oral bisphosphonates include:

- ϕ Abdominal symptoms (most common) nausea, pain with swallowing, mild gastritis, and abdominal pain. They are more likely to occur in the first month of treatment.
- Ø Bone, joint, and/or muscle pain (common).
- Ø Gullet reactions (uncommon) oesophagitis, ulcers, strictures, and erosions.
- ϕ Osteonecrosis of the jaw (rare) this is a potentially serious but very rare side effect with bisphosphonates. This condition presents with jaw pain. It usually occurs after dental work which does not heal properly. For most patients who are taking oral bisphosphonates, the benefits of these medicines outweigh the potential risk of ONJ
- ϕ Atypical stress fractures have been reported (mainly with alendronate). An increased risk cannot be excluded for other bisphosphonates.