



Standing Tall for You®

Special Concerns About Bisphosphonates

The National Osteoporosis Foundation (NOF) recognizes that certain serious conditions associated with bisphosphonate medicines may cause concern for people taking these medicines. There have been reports of atrial fibrillation, osteonecrosis of the jaw (ONJ), severe pain and unusual broken bones in the thigh bone. While these conditions are serious, the number of people with them remains extremely small compared to the number of people who have taken these medicines. For example, there were 22 million prescriptions for alendronate (Fosamax®) alone in a 12-month period during 2003-2004 in the U.S., according to the Food and Drug Administration (FDA). It is not really known whether the medications are even causing these problems, in part because the problems are so rare.

Based on information that is currently available, NOF believes that for most people taking bisphosphonate medicines, the benefits outweigh the risks of these unusual but serious conditions that appear to be associated with them. These medicines play an important role in stopping bone loss and preventing broken bones.

Osteoporosis causes broken bones that result in significant pain, disability and loss of independence. Half of all women and up to one in four men over the age of 50 will break a bone due to osteoporosis. More than 20 percent of patients age 50 and older who break a hip die within one year. Many others never fully recover.

Research studies clearly show that people taking a medicine to treat osteoporosis reduce their chance of breaking a bone. Studies have found that bisphosphonates reduce the risk of a broken hip in people with osteoporosis by as much as 40 to 50 percent. These medicines also reduce the risk of other broken bones. Patients for whom bisphosphonates are appropriate would be at higher risk of breaking a bone without treatment.

The bisphosphonate medicines include alendronate (Fosamax®), ibandronate (Boniva®), risedronate (Actonel®) and zoledronic acid (Reclast®).

Risks and Benefits

All medicines have possible benefits and risks. People should look at both the benefits and the risks of a medicine before taking it. If you have osteoporosis or an increased chance of breaking a bone, always talk with your doctor or other healthcare provider about the treatment choices available to you.

How Long to Treat

Research findings are not conclusive on how long a bisphosphonate medicine remains safe and effective. In the U.S., alendronate has been available the longest of all the

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bisphosphonate medicines. It was approved by the FDA in 1995. Research studies lasting five years show that alendronate is safe and effective. Two studies found alendronate continued to safely benefit bone health up to 10 years in postmenopausal women with osteoporosis.

At this time, additional research studies are needed to better understand the safety and benefits of using alendronate and the other bisphosphonate medicines for longer than five years.

Reviewing Your Treatment Plan

If you are taking an osteoporosis medicine, it is important that you review your treatment plan every year with your doctor or other healthcare provider. If you have been taking an osteoporosis medicine for five years, discuss the benefits of continuing it.

People who are not at high risk of breaking a bone may be able to take a “drug holiday” after five years of treatment. This means that you stop taking your osteoporosis medicine but continue to see your healthcare provider to monitor your bone health.

If you are at high risk of breaking a bone, then you may benefit by staying on an osteoporosis medicine. Other people may benefit from switching to a different medicine. Your healthcare provider is the best person to guide you about whether you should start, continue, switch or stop an osteoporosis medicine. Again, it is always important to look at both the benefits and risks of taking a medicine.

Reporting Unusual Symptoms

If you have side effects or unusual symptoms, be sure to report these to your doctor or other healthcare provider. If you have an unusual ache or pain in your hip or thigh bone, it's important to tell your healthcare provider. There have been rare reports of people having an ache or pain, sometimes for several weeks or even months, before having an unusual break in the femur (thigh bone).

What More You Can Do

For an osteoporosis medicine to work, you also need to get enough calcium and vitamin D. Eat a balanced diet that includes fruits, vegetables and calcium-rich foods. Adults under age 50 need 1,000 mg of calcium and 400-800 IU of vitamin D a day. Adults age 50 and older need 1,200 mg of calcium and 800-1,000 IU of vitamin D a day.

Regular exercise and physical activity are also necessary to have healthy bones. Try to make exercise a part of your daily routine. Take a walk every day, play a sport, go to a fitness center or find another kind of physical activity.