

Bisphosphonate drugs

Your doctor has suggested that you will benefit from treatment with a drug that prevents and treats bone problems relating to cancer, such as bone pain. The drug is from a group of drugs called bisphosphonates. They include pamidronate disodium and zoledronic acid (Zometa®), which are given by injection into a vein through an infusion bag; or ibandronic acid (Bondronat®) and clodronate sodium (Bonefos®) which are tablets to be taken by mouth.

What are the side effects of bisphosphonate drugs?

All drugs have some side effects. These drugs are generally very well tolerated; however, everyone is different and when bisphosphonates are started some patients can experience:

- a temporary increase in pain
- flu-like symptoms
- acid indigestion
- stomach upset.

These effects should wear off, however if they continue, tell your doctor or nurse. In addition, a small number of patients treated with bisphosphonates have developed a condition called osteonecrosis of the jaw.

What is osteonecrosis of the jaw?

Osteo means bone and necrosis means cell or tissue death. In simple terms, osteonecrosis means death of bone tissue. Osteonecrosis of the jaw is the breakdown of the jawbone and poor healing. It can be a serious condition if left untreated. The exact cause of osteonecrosis or how often it occurs is not known, but it is estimated to occur in about 2% of patients (2 in 100 people), usually only after some months or years of bisphosphonate treatment.

Common symptoms of osteonecrosis of the jaw include, but are not limited to:

- pain in the jaw or mouth
- swelling, ulceration or infection of the gums
- poor healing of the gums especially after dental work
- loosening of teeth
- numbness or the feeling of heaviness in the jaw.



One possible factor that may increase the risk of osteonecrosis of the jaw developing may be having teeth removed or other types of dental surgery. Therefore, it is advised that you should not (if at all possible) have teeth removed or undergo other types of dental surgery while having bisphosphonates. Routine dental treatment does not seem to cause problems.

Before starting your bisphosphonate treatment:

It is advisable to have a dental check-up. If your dentist recommends any dental surgery, it is best to have this done before starting the bisphosphonate treatment, however, sometimes it may not be suitable for you to delay your bisphosphonate treatment. It is important to discuss this with your doctor.

Your dentist can also advise you about taking care of your mouth, since this can help to reduce the need for future dental surgery. If you wear dentures, it is important to have the fit checked and changed if required, to minimise damage to the soft tissues of your mouth.

Once you have started your bisphosphonate treatment, you should:

- maintain good oral hygiene - we recommend brushing your teeth after every meal and at bedtime, using a toothbrush with fluoride toothpaste
- floss once a day to remove plaque
- have regular dental check-ups; at least once every six months or more frequently if advised by your dentist.

Tell your hospital team if you:

- experience any side effects from your bisphosphonate therapy
- experience any mouth problems
- have been advised to have any dental treatment while receiving bisphosphonates.

Contact details

Please contact us if you have any questions or concerns.

Your specialist nurse

Your consultant

Your specialist registrar.....

Alternatively, please call:

The Royal Marsden Hotline: 020 8915 6899
(available 24 hours a day, 7 days a week)

If you would like more specific information related to these drugs recommended to you by your doctor, please refer to the Macmillan Cancer Support website, using the link below:

www.macmillan.org.uk/information-and-support/treating/supportive-and-other-treatments/bisphosphonates

