

Denosumab for Bone Protection – Information leaflet

Your doctor has recommended a treatment called Denosumab to strengthen your bones. This leaflet is aimed at addressing questions you may have.

Why has Denosumab been recommended for me?

Denosumab is a treatment for osteoporosis, most often used in those who have sustained a fragility fracture (a broken bone caused by a fall from standing height or less). It is not the drug of first choice and is likely to have been chosen for you because of difficulty taking or contra-indication to the standard tablet treatments for osteoporosis. It may also sometimes be used in those who have sustained fractures despite being on appropriate medication.

How does it work?

Denosumab blocks a substance (RANK ligand) which stimulates the production and activity of bone cells (osteoclasts) that break down bone. The result of this is that Denosumab improves bone density and strength thus reducing the likelihood of fracture.

How is it given?

Denosumab is a subcutaneous (under the skin) injection given every 6 months. It can be given into the lower abdominal wall, upper thigh or upper arm (just as one would give other subcutaneous injections such as insulin). The injection is administered by a healthcare professional (usually practice nurse or GP).

Might I experience any side effects?

Denosumab is usually tolerated without difficulty and significant side effects are rare. The majority of people feel no different after the injection. Occasionally it may increase the risk of urinary tract infection, chest infection, cellulitis (skin infection), rash, constipation and limb pain.

*If you have an active infection at the time when you are due to receive your injection we recommend postponing the injection until you have recovered.

Are there long term risks?

As with other treatments for osteoporosis that reduce removal of bone there are occasional rare complications – see precaution to take below

- Atypical fractures of long bones.
- Osteonecrosis of the jaw (a poor healing lesion in the mouth) following dental extraction or if you have poor dental hygiene.

Is there anyone who should avoid Denosumab?

It is to be avoided if –

- Low calcium – this must be corrected before treatment with adequate calcium and vitamin D supplementation.
- Latex allergy – the needle cover of the prefilled syringe contains a derivative of latex.
- A rare hereditary intolerance of fructose (a sugar found in fruit and vegetables).

Are there any precautions I should take?

- Take calcium and vitamin D supplements as prescribed (unless particularly advised not to because of high calcium)
- Blood tests will be arranged at your GP surgery prior to each injection for renal function and calcium level. Repeat blood calcium test also required 2 weeks after first injection and after subsequent if renal impairment.
- If you develop new otherwise unexplained thigh pain, seek medical advice to assess if x-ray required or exclude atypical fracture.
- Good dental hygiene and regular dental check as advised by your dentist – inform your dentist that you are receiving this treatment.

How long will I continue Denosumab?

Generally treatment is life-long. If Denosumab is stopped there may be a period of increased bone loss therefore another treatment may be given in its place. Do not stop Denosumab or delay injection without medical advice.

What happens next?

The prescription for Denosumab and administration of the injection is via your GP surgery. If this treatment has been recommended by the Osteoporosis Clinic you will receive a copy of the subsequent correspondence to your GP. You may hear direct from the surgery, if not then recommend contacting the surgery on receipt of your copy of the letter to arrange the injection. There is a shared care protocol in Dumfries and Galloway and each surgery will have its own local arrangements.

Do I need a follow up DEXA scan?

Most on Denosumab do not require repeat DEXA as this is aimed as a lifelong treatment and repeat DEXA will not alter management. If repeat DEXA is planned this will be advised at the Osteoporosis clinic with initial plan.

How do I get further advice?

Royal Osteoporosis Society
Telephone: 01761 471771
Helpline: 0808 800 0035
Website: www.theros.org.uk
Email: info@theros.org.uk

Sister Katrina Martin – Menopause & Osteoporosis Specialist Nurse
Helpline: 01387 241121 (Thursdays 9am -12 midday)

Dr Anne Drever – Osteoporosis clinic, Rheumatology Department,
Dumfries and Galloway Royal Infirmary