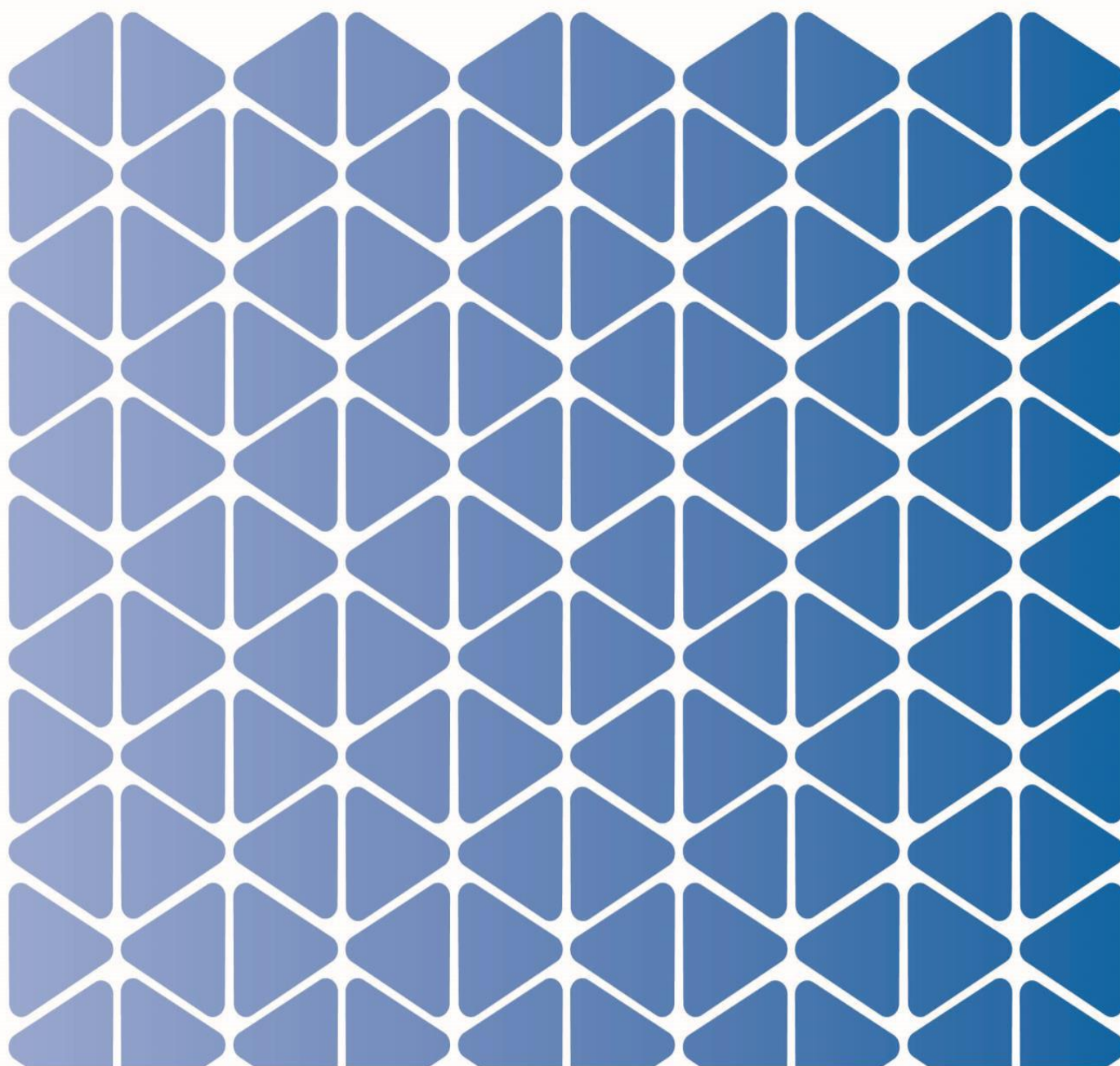


Osteoporosis Passport  
You have been administered  
**Zoledronate on**\_\_\_\_\_



## Introduction?

This information leaflet is about a medicine called Zoledronate (Zoledronic acid) which is used to treat people with osteoporosis. This leaflet describes how Zoledronate is given and some of its benefits and possible side effects.

## What is osteoporosis?

The word osteoporosis literally means spongy (porous) bone. It causes your bones to become fragile so they break more easily.

Bone is a living, active tissue that constantly renews itself. Old bone tissue is broken down by cells called osteoclasts and replaced by new bone material produced by cells called osteoblasts.

The balance between old bone breakdown and new bone formation changes as we grow older, in that bone starts to be broken down more quickly than it is replaced, so our bones slowly begin to lose their density and therefore strength. This usually starts at about the age of 40 and continues for the rest of our lives.

We all have some degree of bone loss as we get older, but the term osteoporosis is used only when the bones become quite fragile. This disease is especially common in women after the menopause, but it can also occur in men. Osteoporosis is also common in patients receiving steroids (e.g. prednisolone).

## What does Zoledronate do and how does it work?

Zoledronate can help to make your bones stronger and reduce your risk of broken bones, including hip and spinal fractures. It works by slowing down the cells that break down bone. This helps to restore the balance and make your bones stronger. It belongs to a group of medicines known as Bisphosphonates.

## How is Zoledronate given?

Zoledronate is given as an intravenous infusion (IV or 'drip') once a year. This will usually happen at a hospital. The drug is given via a needle into a vein. It takes at least 15 minutes to receive the full dose.

## How will my treatment be monitored?

You might be given this treatment as a one time only dose, in which case no further follow up is required, unless your circumstances change. However, we sometimes give 2<sup>nd</sup> and 3<sup>rd</sup> doses a year apart. You can record the dates that these are given here:

<u>Next Dose Due</u>	<u>Pre treatment blood test on</u>	<u>Infusion Date</u>

It's very important to have enough **calcium** and **vitamin D** while you're on Zoledronate. Your doctor may advise you to take calcium and vitamin D supplements, to make sure you're getting enough for your bones.

Your doctor will recommend blood tests before each Zoledronate infusion. This test is to check your calcium and vitamin D levels. If they are very low, your doctor may delay your treatment until your levels have improved. You may also have a blood test to make sure your kidneys are working well.

## **What are the possible side effects?**

### **Common**

- ♦ Flu-like symptoms (such as fever, chills, muscle or joint pain, headache). These symptoms are usually mild to moderate and occur in the first week following the infusion. You are recommended to take a mild painkiller such as paracetamol to manage these side effects. If they do not go away, you should contact your GP. You may only have these symptoms after the first infusion.
- ♦ Another side effect that could occur is irregular heart rhythms (atrial fibrillation). If you feel dizzy, breathless or have heart palpitations, please inform your doctor.
- ♦ Eye inflammation. Please report to your doctor if you have any eye pain or disturbance in vision.

### **Rare**

- ♦ Osteonecrosis of the jaw. This is an extremely rare problem where healing inside the mouth is delayed, usually after major dental treatment. The general advice is to have maintain good oral hygiene and have regular dental check-ups.
- ♦ Talk to your doctor if you have ear pain, discharge from the ear, and/or an ear infection. These could be signs of bone damage in the ear (osteonecrosis of the auditory canal).
- ♦ Allergic reactions have been reported, such as a swollen face and tongue. Very rarely, there have been cases of a serious allergic reaction (anaphylactic shock).

## **What should I do after Zoledronate infusion?**

Make sure you drink at least one or two glasses of water, before and after each infusion, to avoid dehydration.

It is important to take good care of your teeth and gums and visit the dentist for regular check-ups whilst on the treatment. If you wear dentures, it is important to ensure they fit correctly. You must tell your dentist you are being treated with Zoledronate, as it is important for your dentist to know before you have any invasive dental procedures such as tooth extraction or root canal work.

## **Leading a healthy lifestyle to keep your bones strong**

Factors that can help to maintain healthy bones are a well-balanced diet with adequate calcium rich foods, safe exposure to sunlight to obtain vitamin D, regular weight bearing exercise, avoiding smoking and keeping alcohol consumption within the recommended limits.

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

## **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

## **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

## **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

## **How to contact PALS:**

**Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PALS@nhs.net](mailto:wah-tr.PALS@nhs.net)**

## **Opening times:**

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.