



Cedar Valley Bone Health Institute
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Raloxifene (Evista) is a Selective Estrogen Receptor Modifier. Many different tissues respond to Estrogen. The receptor portion of those cells is slightly different from one type of cell to another. Therefore it is possible to make a selective medication which is mistaken for estrogen by some types of cells, but not other types of cells. Raloxifene (Evista) has only some of the effects of estrogen on the body.

Raloxifene (Evista) has two beneficial estrogen like actions for which it is approved by the FDA. **(Evista) acts like estrogen to restore normal bone turnover by increasing bone formation and decreasing bone resorption.** This effect is both before menopause and after menopause. The effect is greater after menopause. (Evista) is approved for use in women only. It is indicated for use on women with low bone density or with osteoporosis.

Raloxifene (Evista) also acts to decrease the risk of invasive breast cancer. This preventive action is most important to women with high risk for breast cancer. Women with a family history of invasive breast cancer can benefit from a reduction in risk for breast cancer and get a benefit to bone health as well. Tamoxifen has a similar use for breast cancer prevention, but has no demonstrated benefit to bone health. (Evista) gives two actions in one pill.

Raloxifene (Evista) is a daily pill. It has no special requirements for being taken on an empty stomach and no increased tendency for stomach upset. (Evista) has not been demonstrated to increase the severity of hot flashes; however some post-menopausal women experience a recurrence of hot flashes on (Evista). Usually this effect decreases with time since menopause and with time on (Evista).

Deep Venous Thrombosis (DVT) is a clot in the large inner veins of the leg or pelvis. This sometimes becomes a pulmonary embolism (PE). A large PE can cause the lungs to not work properly. Rarely this can be fatal. Risk factors for DVT include smoking, immobilization of a leg, bed rest, and advancing age. The greatest risk for DVT is a previous DVT. Estrogen therapy is a risk factor for DVT, as is pregnancy. (Evista) gives a small increase in risk for DVT in addition to the sum of other risk factors. **Patients already at high risk for DVT are generally not candidates for Evista.**

Remember that NO bone health medication can work well without Calcium and Vit D.

Determining the best medication for each individual requires a detailed evaluation of your medical history, lab work, DXA score and trend, and living situation. That is why **we allocate a full half hour visit for each patient.**

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