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## **Take the Right Medication for Your Osteoporosis**

Several different classes of medications can be used for Osteoporosis. They have drastically different effects on bones and have drastically different side effects. Determining the right medication for you as an individual is very important if you are to get the best possible results. We are now learning that each individual should take different medications at different times. No single medication is right for all times, even in a single individual.

### **Remember that none of these medications can work without Calcium and Vitamin D.**

**Calcitonin** is the oldest medication. **Miacalcin** brand nasal spray is calcitonin. This is effective for decreasing back pain in osteoporotic fractures of the spine. What we have not proven is that it actually increases bone mass or bone density. Today it is used mostly when more effective medications cannot be used.

**Bisphosphonates** are the most common osteoporosis medications. Alendronate (**Fosamax**), Risendronate (**Actonel**), Ibandronate (**Boniva**), and Zoledronic acid (**Reclast**) are all bisphosphonates. They all are similar in their actions. All bisphosphonates act by depressing bone resorption. Bisphosphonates also eventually depress bone formation. The net result is that bone turnover slows down. **Read more about bisphosphonates...**

**Anabolic medications** are the only class which can stimulate additional bone formation. This is often the best treatment for severe osteoporosis with fragility fractures, extremely low DXA scores, or failure to maintain bone density on other medications. Teriparatide (**Forteo**) is the only member of this class currently available. It is a synthetic portion of human parathyroid hormone. It is a daily injection with a tiny (insulin) needle. It can only be taken for 2 years and must be followed with 3 to 5 years of bisphosphonate therapy. **Read more about (Forteo).....**

**Selective Estrogen Receptor Modifiers** (SERMs) convince some body tissues that estrogen is still active in the patient. Raloxifene (**Evista**) is the only member of this class which acts on bone. (**Evista**) also has also been found effective to prevent invasive breast cancer. Tamoxifen is another SERM which can be used for breast cancer, but not for bone health. Individuals needing to take measures to prevent both osteoporosis and invasive breast cancer should consider (**Evista**). **Read more about (Evista).....**

### **Remember that NONE of these medications can work without Calcium and Vitamin 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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