

Task force provides guidance on use of osteoporosis drugs

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A new report by a Task force of the American Society for Bone and Mineral Research provides guidance on the use of bisphosphonates, which are the most commonly used medications for osteoporosis.

Provided by Wiley

The Task Force suggests that after 5 years of oral bisphosphonates or 3 years of intravenous bisphosphonates, clinicians should reassess the drugs' potential benefits and risks. The former includes continued reduction in the risk of [vertebral fractures](#), and the latter, rarely, osteonecrosis (localized bone death) of the jaw and unusual [fractures](#) of the femur ([thigh bone](#)).

For older women, those with high fracture risks, those with previous major osteoporotic fractures, or who fracture on therapy, continuation of treatment for up to 10 years (oral) or 6 years (intravenous), with periodic evaluation, should be considered. For women not at high fracture risk after 3 to 5 years of treatment, a drug holiday of 2 to 3 years, with monitoring, can be considered.

"It is unlikely that there will ever be randomized controlled trials of osteoporosis patients of sufficient size and duration to provide clear evidence that a given strategy over the long term leads to fewer fractures," said Dr. Robert Adler, co-primary author of the *Journal of Bone and Mineral Research* article. "Therefore, clinicians caring for patients with chronic osteoporosis will need to use the art in addition to the science of medicine," added co-author Dr. Ghada El-Hajj Fuleihan.

More information: Robert A Adler et al. Managing Osteoporosis in Patients on Long-Term Bisphosphonate Treatment: Report of a Task Force of the American Society for Bone and Mineral Research, *Journal of Bone and Mineral Research* (2016). [DOI: 10.1002/jbmr.2708](https://doi.org/10.1002/jbmr.2708)

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