

ASBMR: Romosozumab reduces fracture rate in osteoporosis

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percent of patients in the romosozumab-to-alendronate and the alendronate-to-alendronate groups, respectively (27 percent lower risk with romosozumab; P hip fracture was 38 percent lower (2.0 versus 3.2 percent; P = 0.02).

"In [postmenopausal women](#) with osteoporosis who were at high risk for fracture, romosozumab treatment for 12 months followed by alendronate resulted in a significantly lower risk of fracture than alendronate alone," the authors write.

The study was partially funded by Amgen, the manufacturer of romosozumab.

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(HealthDay)—Romosozumab treatment followed by alendronate is linked to reduced risk of fractures versus alendronate alone for postmenopausal women with osteoporosis, according to a study published online Sept. 11 in the *New England Journal of Medicine*. The research was published to coincide with the annual meeting of the American Society for Bone and Mineral Research, held from Sept. 8 to 11 in Denver.

Kenneth G. Saag, M.D., from the University of Alabama in Birmingham, and colleagues randomized 4,093 postmenopausal women with osteoporosis and a fragility fracture to receive monthly subcutaneous romosozumab or weekly oral alendronate for 12 months, followed by open-label alendronate in both groups.

The researchers found that the [risk](#) of new vertebral fracture was 48 percent lower in the romosozumab-to-alendronate versus the alendronate-to-alendronate group (6.2 versus 11.9 percent; P fractures occurred in 9.7 and 13.0

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