



Health Bulletin



Screen Star Following Doctors Orders

(NAPSA)—Managing the fight against cancer is not just a job for medical professionals. Screen actress Marcia Strassman, known for her roles as “Julie Kotter” in *Welcome Back Kotter* and “Honey” in the *Honey I Shrunk the Kids* movies, was diagnosed more than three years ago with Stage IV breast cancer that spread to her bones. She recognizes that the best way to manage her cancer is to take charge of her diagnosis by adhering to her prescribed treatment regimen and becoming her own advocate.

Breast cancer is the second leading cancer for women in the United States, accounting for one of four cancer diagnoses. And, surprisingly, less than half of patients diagnosed with early-stage breast cancer complete the full regimen of hormone therapy as prescribed by their doctor. It’s important for patients to understand that in order to get the full benefit of cancer therapy, it is necessary to follow their treatment schedule on time and for the full duration recommended.

As a naturally proactive person, diligent about scheduling regular doctor appointments and mammograms, Marcia’s cancer diagnosis was unexpected but has helped her gain a new perspective.

“Cancer has taught me that I



Actress Marcia Strassman has taken charge of her cancer diagnosis by adhering to her prescribed treatment regimen and becoming her own advocate.

can’t control everything. I can’t make the cancer go away but I can be proactive about taking care of my disease and my bones,” Marcia said. “I follow my doctor’s orders and take all my treatments as prescribed to help battle my breast cancer and keep my bones healthy, including my Zometa® (zoledronic acid) infusions.”

Establishing and maintaining a good relationship with your doctor and nurses is an important aspect of staying positive. Marcia

encourages all patients with cancer to find a healthcare professional they are comfortable with and play an active role in their disease management.

“I write down all of my questions at home so I don’t forget to ask an important one,” Marcia explained. “I also bring a tape recorder to every appointment so I can listen to my doctor and nurses, and be certain I won’t forget anything. My tape recorder has become a part of my support system and comes with me to every appointment. I believe in being my own best advocate, so I make sure I understand everything discussed, including all my test results.”

“I tend to do things on my own, but other cancer patients should not be afraid to reach out and ask for help and support if they need it,” she noted.

Although Marcia has advanced cancer, she doesn’t let it, or the thought of it, run her life, and strives to maintain an active lifestyle, living her life to the fullest. She concentrates on her career and personal relationships to keep her focused and grounded.

For resources on metastatic breast cancer, bone metastases, cancer support and Marcia’s personal experience, visit facebook.com/marciastrassman.

Note to Editors: October is Breast Cancer Awareness Month

ABOUT ZOMETA

ZOMETA is a treatment for hypercalcemia of malignancy (HCM; a condition resulting in high calcium blood levels due to cancer). ZOMETA is also used to reduce and delay bone complications due to multiple myeloma and bone metastases from solid tumors; used with anti-cancer medicines. ZOMETA is not an anti-cancer therapy. If you have prostate cancer, you should have failed treatment with at least one hormonal therapy prior to taking ZOMETA.

IMPORTANT SAFETY INFORMATION

Do not use ZOMETA if you have had a severe allergic reaction to zoledronic acid or any components of ZOMETA. These reactions, including rare cases of hives and angioedema (swelling often near your eyes and lips), and very rare cases of life-threatening allergic reactions, have been reported. ZOMETA is in a class of drugs called bisphosphonates, and contains the same active ingredient as that found in Reclast® (zoledronic acid). If you are treated with ZOMETA, you should not be treated with Reclast.

If you have HCM, you should drink plenty of clear fluids before using ZOMETA. If you have kidney problems, tell your doctor. The risk of adverse reactions (especially related to the kidney) may be greater for you. ZOMETA treatment is not for patients with severe kidney problems. Patients with kidney problems on multiple cycles of ZOMETA or other bisphosphonates are at greater risk for further kidney problems. It is important to get your blood tests while you are receiving ZOMETA. Your doctor will monitor your kidney function before each dose. Tell your doctor if you are on other drugs, including aminoglycosides, loop diuretics, and drugs which may be harmful to the kidney.

Osteonecrosis of the jaw (ONJ) has been reported mainly in cancer patients treated with intravenous bisphosphonates, including ZOMETA. Many of these patients were also receiving anti-cancer drugs and corticosteroids, which may make it more likely to get ONJ. If you have advanced breast cancer or a type of cancer called multiple myeloma, or if you have had dental extraction, periodontal disease, local trauma, including poorly fitting dentures, you may be at greater risk of getting ONJ. Many reports of ONJ involved patients with signs of local infection, including bone/bone marrow inflammation. You should maintain good oral hygiene and have a dental examination with preventive dentistry prior to beginning ZOMETA. While on treatment, avoid invasive dental procedures, if possible, as recovery may take longer. If you develop ONJ while on bisphosphonate therapy, dental surgery may worsen the condition. If you require dental procedures, there are no data available to suggest whether stopping ZOMETA treatment reduces the risk of ONJ. A causal relationship between bisphosphonate use and ONJ has not been established. Based on your condition, your doctor will determine the treatment plan you will receive.

Do not use ZOMETA if you are pregnant or plan to become pregnant, or if you are breast-feeding.

Severe and occasionally incapacitating bone, joint, and/or muscle pain has been reported in patients taking bisphosphonates, including ZOMETA. Do not continue using ZOMETA if severe symptoms develop, as some patients had the symptoms reappear after taking ZOMETA or another bisphosphonate again. In aspirin sensitive patients, bronchoconstriction (tightening of the airways in the lungs) has been observed while taking bisphosphonates.

If you are an HCM patient with liver problems, talk to your doctor about whether ZOMETA is appropriate for you.

HCM patients may experience flu-like symptoms (fever, chills, flushing, bone pain and/or joint or muscle pain). Common side effects in HCM patients include fever, nausea, constipation, anemia, shortness of breath, diarrhea, abdominal pain, worsening of cancer, insomnia, vomiting, anxiety, urinary tract infection, low phosphate levels, confusion, agitation, a fungal infection called moniliasis, low potassium levels, coughing, skeletal pain, low blood pressure, and low magnesium levels. Redness and swelling may occur at the site that you are injected.

Common side effects for patients with multiple myeloma and bone metastases due to solid tumors include bone pain, nausea, fatigue, anemia, fever, vomiting, constipation, shortness of breath, diarrhea, weakness, muscle pain, anorexia, cough, joint pain, lower-limb swelling, worsening of your cancer, headache, dizziness (excluding vertigo), insomnia, decreased weight, back pain, numbness/tingling, and abdominal pain.

Eye-related side effects may occur with bisphosphonates, including ZOMETA. Cases of swelling related to fluid build-up in the eye, as well as inflammation of the uvea, sclera, episclera, conjunctiva, and iris of the eye have been reported.

Patients with multiple myeloma and bone metastases from solid tumors should be taking an oral calcium supplement of 500 mg and a multiple vitamin containing 400 IU of vitamin D daily.

Please see full Prescribing Information and talk to your doctor for more information.