

Men Can Now Benefit From A Once-Yearly Osteoporosis Medication ㊦

(NAPSA.—People traditionally think of osteoporosis as a woman's disease. But in the last decade the notion that bone loss is a common consequence of aging in both women and men has emerged, and the statistics speak for themselves. One in four men over 50 will break or fracture a bone because of osteoporosis, making it more common than some of the most pressing men's health issues, including prostate cancer. Yet, fewer than 3 percent of men with an osteoporosis-related fracture actually receive treatment.

Weak bones can lead to fractures that can have devastating consequences, including considerable pain and disability, and sometimes even death. Whether you're a man or a woman, you can help protect your bones from breaking. The FDA recently approved the only once-yearly osteoporosis medication for the treatment to increase bone mass in men with osteoporosis. Called Reclast® (zoledronic acid) Injection, this therapy is given as a 5 mg 15 minute IV infusion by a healthcare professional, eliminating the need for daily, weekly or monthly pills.

Reclast has been available for more than a year so chances are you've probably already heard about it. Dr. Felicia Cosman, Professor of Clinical Medicine at Columbia University, and a clinical trial investigator involved in studies of Reclast, sponsored by Novartis Pharmaceuticals Corporation, answers common questions about Reclast, the once-yearly treatment.

How Can One Intravenous (IV) Treatment Last A Whole Year?

Unlike oral treatments which go through your digestive system,

Reclast, an IV, goes through your bloodstream directly to your bones, where it's needed. Reclast binds to your bones and studies show it works for a full year.

How Effective Is Reclast?

Reclast has been used by more than 164,000 people in the U.S. It has been shown to be effective at reducing bone loss and protecting bones from osteoporosis-related fractures in postmenopausal women and men with osteoporosis.

Postmenopausal women: Reclast is the only treatment for postmenopausal osteoporosis approved to reduce the risk of fractures at all key sites typically affected by osteoporosis, including the hip, spine and other bones. In a study of more than 7,700 women with postmenopausal osteoporosis, Reclast reduced the risk of spine fractures by 70 percent, hip fractures by 41 percent, and non-spine fractures by 25 percent compared to placebo.

Men with osteoporosis: In men, Reclast has been shown to increase lumbar spine bone mineral density by 6.1 percent over 24 months, similar in effectiveness to a commercially available oral weekly bisphosphonate that is a commonly prescribed osteoporosis therapy.

What Are The Side Effects Of Reclast?

The most common side effects include flu-like symptoms, fever, muscle or joint pain and headache. Most occur in the days following treatment. A mild pain reliever such as ibuprofen or acetaminophen may reduce these symptoms. After the second treatment, these side effects are much less common.

Will My Insurance Cover Reclast?

Reclast is covered by most

health plans, including Medicare. For most patients with health insurance, the cost of a Reclast treatment is under \$35. For most Medicare patients, Reclast is covered under Part B because it is provider-administered. The majority of Medicare Part B patients have supplemental insurance, which reduces the cost of the coinsurance.

Because all plans vary, patients should check with their insurance providers regarding their individual coverage. If physicians have a question about reimbursement, they should call the Reclast reimbursement hotline at 866-RECLAST (866-732-5278).

What Should I Expect On The Day Of Treatment?

- You should eat normally before treatment. And it's recommended that you drink 2 glasses of fluids such as water before receiving Reclast to help prevent kidney problems.

- A small needle will be inserted in your vein. During treatment, you can relax, read a book or magazine and listen to music.

- Afterward, resume your normal activities.

- Take calcium and vitamin D daily.

- A mild pain reliever such as acetaminophen may be taken to reduce side effects.

- Be sure to register with the infusion center so that they can remind you by mail when you need your next treatment—which won't be for a full year.

For more information about Reclast, speak with your doctor or visit www.Reclast.com. For more information about osteoporosis, visit the National Osteoporosis Foundation (NOF) Web site at www.nof.org.



Note to Editors: Patients should not take Reclast if they're on Zometa as it contains the same ingredient; if they have low blood calcium, kidney problems, or are allergic to Reclast or Zometa; or they're pregnant, plan to become pregnant or nursing.

It's important for patients to drink fluids before getting Reclast to help prevent kidney problems. The most common side effects are flu-like symptoms, fever, muscle or joint pain and headache. Patients should tell their doctor if they have dental problems because rarely, problems with the jaw have been reported with Reclast. Patients should tell their doctor if they have low blood calcium or cannot take calcium and vitamin D or had surgery involving the neck or intestines. In patients with Paget's disease of bone, it is especially important for them to take 1500 mg of calcium and 800 IU of vitamin D daily, particularly during the first 2 weeks after getting Reclast. Patients should discuss all medicines they're taking, including prescription and non-prescription, vitamins and herbal supplements. Patients should contact their doctor if they develop severe bone, joint or muscle pain, numbness, tingling or muscle spasms.

For more information about Reclast, visit www.reclast.com or call 866-RECLAST (866-732-5278).