

National Institutes of Health **Osteoporosis and Related** Bone Diseases ~ National Resource Center

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Medical Treatment Decisions for People With Paget's Disease of Bone

Paget's disease is a chronic disorder that can result in enlarged and misshapen bones. The excessive breakdown and formation of bone tissue causes affected bone to weaken, resulting in pain, misshapen bones, fractures, and arthritis in the joints near the affected bones. Paget's disease typically is localized, affecting just one or a few bones, as opposed to osteoporosis, for example, which affects all the bones in the body.

Decisions about treating Paget's disease can be complicated because: 1) no two people are affected in exactly the same way by the disease, and 2) it is sometimes difficult to predict whether a person with Paget's disease who shows no signs of the disorder will develop symptoms or complications, such as a bone fracture, at a later date.

Although there is no cure for Paget's disease, recently developed medications can help control the disorder and lessen pain and other symptoms. The approved medications for Paget's disease include risedronate (Actonel¹), pamidronate (Aredia), alendronate (Fosamax), zoledronic acid (Reclast²), etidronate (Didronel), tiludronate (Skelid), and calcitonin (Miacalcin).

¹ Brand names included in this fact sheet are provided as examples only, and their inclusion does not mean that these products are endorsed by the National Institutes of Health or any other Government agency. Also, if a particular brand name is not mentioned, this does not mean or imply that the product is unsatisfactory.

²Zoledronic acid used for treating Paget's disease outside the U.S. is known as Aclasta; when used for certain cancer treatments, it is called Zometa.

Paget's disease experts recommend that these medications be taken by people with Paget's disease who:

- have bone pain, headache, back pain, or a nerve-related symptom (such as "shooting" pains in the leg) that is directly associated with the disease
- have elevated levels of serum alkaline phosphatase (SAP) in their blood
- display evidence that a bone fracture will occur
- require pretreatment therapy for affected bones that require surgery
- have active symptoms in the skull, long bones, or vertebrae (spine)
- have the disease in bones located next to major joints, placing them at risk of developing osteoarthritis
- develop a rare condition called hypercalcemia that occurs when a person with several bones affected by Paget's disease and a high SAP level is immobilized.

People with Paget's disease have every reason to be hopeful about their future. Today's medications, especially when started before complications begin, are often successful in controlling the disorder.

Resources

For more information about **Paget's disease**, contact:

National Institutes of Health Osteoporosis and Related Bone Diseases ~ National Resource Center 2 AMS Circle, Bethesda, MD 20892-3676 Tel: 1-800-624-BONE (1-800-624-2663, free of charge) or 202-223-0344 Fax: 202-293-2356 TTY: 202-466-4315 Internet: www.niams.nih.gov/health_info/bone E-mail: NIAMSBONEINFO@mail.nih.gov

The Paget Foundation for Paget's Disease of Bone and Related Disorders 120 Wall Street, Suite 1602, New York, NY 10005-4001 Tel: 800-23-PAGET (1-800-237-2438, free of charge) or 212-509-5335 Fax: 212-509-8492 Internet: www.paget.org E-mail: PagetFdn@aol.com The National Resource Center acknowledges the assistance of The Paget Foundation in the preparation of this publication.

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For Your Information

This publication contains information about medications used to treat the health condition discussed here. When this fact sheet was printed, we included the most up-to-date (accurate) information available. Occasionally, new information on medication is released.

For updates and for any questions about any medications you are taking, please contact the U.S. Food and Drug Administration at 1-888-INFO-FDA (1-888-463-6332, a toll-free call) or visit their Web site at www.fda.gov.