

Osteoporosis medications and your dental health

As we grow older, our bones begin to lose their density and strength, especially after we reach our 50s. Many factors affect bone density, including diet, physical activity, family history, hormones, lifestyle and certain conditions and medications.

Osteoporosis—or porous bone—is a disease that weakens bones, especially the hip, spine and wrist, and makes them more likely to break.

Osteoporosis affects about 10 million Americans, 8 million of whom are women. The disease affects more women than cancer, heart disease and stroke combined. Another 34 million Americans have osteopenia, or low bone density, and are at risk of developing osteoporosis.

OSTEOPOROSIS AND BROKEN BONES

Broken bones of the spine and hip are linked to an increased risk of death. According to the National Osteoporosis Foundation,¹ about one in two women and up to one in four men older than 50 years will break a bone as a result of osteoporosis. The disease causes more than 2 million fractures each year and can cause problems that affect a person's quality of life. Some people never recover fully. To prevent broken bones, many people with low bone density or osteoporosis take one of the drugs from a group called bisphosphonates. These medications include alendronate (Fosamax, Merck & Co., Whitehouse Station, N.J.) (also available as a generic drug), ibandronate (Boniva, Genentech, South San Francisco, Calif.), risedronate (Actonel and Atelvia, Warner Chilcott, Dublin) and zoledronic acid (Reclast, Novartis Pharmaceuticals, East Hanover, N.J.). A new drug that works somewhat like the bisphosphonates is denosumab (Prolia, Amgen, Thousand Oaks, Calif.).

Study results indicate that in many people, osteoporosis medications help reduce the chance of breaking bones by reducing bone loss and increasing bone density.²⁻⁴ For example, some reports estimate that osteoporosis medications reduce the chance of breaking a hip by as much as 40 or 50 percent in people who have osteoporosis. As a result, osteoporosis treatment could prevent almost 100,000 hip fractures and many fracture-related deaths each year.

OSTEONECROSIS OF THE JAW

In some patients who have been treated with certain osteoporosis medications, a condition known as osteonecrosis of the jaw (ONJ) has been reported. ONJ is a rare, but serious, condition

that can cause severe damage to the jawbone.

Most people (94 percent) diagnosed with ONJ associated with these medications are patients with cancer who are receiving or have received repeated high doses through an intravenous infusion. The other 6 percent of people with ONJ received much lower doses of these medications for treatment of osteoporosis.

The risk of developing ONJ is associated with bisphosphonates and denosumab. If you are taking one of these medications for treatment of osteoporosis, your chance of developing ONJ is unknown. However, researchers agree that the chance appears to be very small.

Tell your dentist if you are taking a bisphosphonate or denosumab. He or she will demonstrate good oral hygiene practices, as well as monitor your oral health while you are being treated with this medication.

TALK WITH YOUR PHYSICIAN

The American Dental Association believes that your physician and/or other health care provider is the best source of information regarding your need for osteoporosis medications. You should not stop taking these medications without speaking to him or her. If you have osteoporosis or are at high risk of experiencing bone breaks, the benefits of these medications greatly outweigh the low risk of developing ONJ. There is no known prevention for ONJ. However, regular dental visits and excellent oral hygiene practices may be the best ways to reduce your risk.

For more information, visit the ADA's Web site, "www.ada.org". ■

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"For the Dental Patient" provides general information on dental treatments to dental patients. It is designed to prompt discussion between dentist and patient about treatment options and does not substitute for the dentist's professional assessment based on the individual patient's needs and desires.

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