Osteoporosis Drugs to Help With Bone Density

by MARIANNE BROWN

What Types of Osteoporosis Drugs Should You Use?

The skeleton within our body is absolutely vital in keeping us healthy, constantly going through stages of repair, renewal, and mineral release.

According to nof.org, our bones go through formation and generation of new bone. It also breaks down and reforms, when cells on the bone's surface called osteoclasts dissolve bone tissue, releasing it into the bloodstream and leaving behind tiny pits, or cavities. The cells called osteoblasts fill these cavities with new bone tissue.

As you age, your bones start to wear down faster than your body is able to repair them. If this becomes problematic, then your doctor could diagnose you with osteoporosis. In this article we explain the different osteoporosis drugs and how the condition is treated.

What Can Cause Osteoporosis?

Many different circumstances can cause Osteoporosis, including:

- Hormonal changes
- Medications, such as seizure medications or steroids
- Prolonged inactivity
- Age (over 50)
- Poor lifestyle, such as smoking, drinking alcohol excessively or prolonged use
- Low body weight
- Hereditary

Bone can also be resorbed to replace essential minerals missing in the bloodstream. When there is not enough calcium in the diet, this causes slow but steady weakening of bones that can eventually lead to osteoporosis, and broken bones (fractures).

Different Type of Drugs for Osteoporosis and Their Effectiveness

Osteoporosis drugs are used to slow down the rate of bones breaking down.

According to mayoclinic.org, there are various drugs used to treat osteoporosis, and you can take these at different intervals:

- **Alendronate (Fosamax):** a weekly pill
- **Risedronate (Actonel):** a weekly or monthly pill
- **Ibandronate (Boniva):** a monthly pill or quarterly intravenous (IV) infusion

- **Zoledronic acid (Reclast):** an annual IV infusion

Denosumab (Prolia, Xgeva) is another common osteoporosis drug, different to the above bisphosphonates. Denosumab is used every six months by injection just under the skin.

There's also a set of drugs that help build up the bone and these are usually prescribed for people who have low bone density, and are known as anabolic drugs:

- **Teriparatide (Forteo):** daily injections
- **Abaloparatide (Tymlos):** daily injections
- **Romosozumab (Evenity):** monthly injection for 12 months

Hormones

I take estrogen paired with progestin; there are mixed reports of these increasing the risk of blood clots, some female cancers, and heart disease. My doctor explained that this is a particular problem for women who are aged 60 or older, or more than 10 years from the onset of menopause.

I have advanced osteoarthritis and am 45 years old, therefore the benefits outweigh the risks for using hormonal treatment.

Side Effects

Bisphosphonate

Many reports state that these types of oral drugs can cause a stomach upset and heartburn. To combat these effects, do not to lie or bend down for over 30 to 60 minutes, as this causes the medicine to flow back into the esophagus.

The medication is not absorbed well into the stomach. They are to be taken before eating with a large glass of water. Food can be eaten after the wait period.

Some people who use IV bisphosphonates can get flu-like symptoms; this tends to reduce after the first infusion. Tylenol or similar medicine can helps reduce this.

You can combat the above effects by taking regular breaks from the medication. The positive effects can last for quite some time and it’s recommended to take a break after five years.

Denosumab

This is a type of drug that can cause spinal fractures after stopping use. It has to be taken regularly and stopping should be under the supervision of your doctor.

Very rarely, the above medications, including denosumab, can cause a crack or break in the middle of thighbone, known as atypical femoral fracture. It starts with a pain in the thigh or groin that gradually gets worse.

Both medications can also cause some people to develop a rare condition in the jaw, called osteonecrosis. This usually happens after having a tooth removed. It is common in people with bone cancer, who take large doses of bisphosphonates.

Bone-Building

Teriparatide and abaloparatide have increased the risk of bone cancer. They are not to be used if you would be susceptible to this, although this side effect has not been widely reported in patients using these drugs.

Romosozumab is less well known, but is not usually given to people who recently had a stroke or heart attack.

Common side effects of abaloparatide (Tymlos) or teriparatide (Forteo) include dizziness, headaches, and feeling nauseous.

Use of these types of drugs is typically for one to two years. Once stopped, the benefits wear off quickly, unlike bisphosphonates, which last longer.

Due to the side effects of the oral pills, it is easier for some individuals to use an infusion on a less regular basis.

What Non-Medical Options Can Reduce Osteoporosis?

It is absolutely critical that you prioritize good health, as the medications come with side effects:

- **Lifestyle changes:** Quit smoking and alcohol drinking, and reduce usage of acidic foods and drinks.
- **Stress reduction:** Stress produces cortisol and this will pull calcium from the bones.
- **Dietary supplements:** Take vitamin K, calcium and vitamin D if you are not getting enough of these through your diet. If you live somewhere where sunlight is restricted, it is worthwhile getting your vitamin D levels checked by your doctor.

Outlook

Personally, I think research is vital when being diagnosed with any condition. It’s also important to understand how you can help yourself, what medications are available, the side effects; weigh the risks and benefits.

A full medical discussion with your doctor will help create a plan for the most effective way to treat osteoporosis. After taking into account your age, sex and your medical history, how much these treatments cost, and understanding your time constraints, you can then decide on which medication treatment to follow, and for how long.