

Zoledronate (Aclasta) Infusion

Information for Patients

Zoledronate (also known as Zoledronic acid or Aclasta) is the most potent medicine in the bisphosphonate class currently available. Bisphosphonates work by preventing resorption of bone by inhibiting the function of bone-dissolving cells called osteoclasts. Bisphosphonates are licensed in New Zealand for the treatment of osteoporosis and Paget's disease, and are also used for preventing some forms of cancer from spreading in bone. Zoledronate is given by an intravenous infusion (into a vein in the arm via a "drip") over about 15-30 minutes. Zoledronate increases the bone density in patients with osteoporosis, to about the same extent as other medicines such as Alendronate (Fosamax), and is effective at reducing fracture rates, by 35-70%.

The main side effect from the use of Zoledronate is flu like illness, consisting of muscle aches and fever. This occurs in up to 30% of people who take it. This usually comes on within 24 hours of the infusion and seldom lasts more than three days. In most cases it is mild, though some individuals can feel significantly unwell for a few days. If this occurs, you should take some Paracetamol or other anti-inflammatory medicine for the duration of the symptoms. The great majority of individuals don't have any such symptoms. Some individuals with pre-existing kidney damage have seen deterioration in their kidney function after the use of Zoledronate. It is not clear that this is related to Zoledronate itself, but it is normal practice not to use this medicine in people whose kidneys are not functioning well.

Other than flu-like symptoms after the first infusion, side effects from Zoledronate treatment are uncommon, and are in general no different from placebo-treated patients in randomised trials. It should be remembered that major fractures can be very dangerous, so this should be balanced against the small risk of ill effects from treatments.

Treatment is usually accompanied by vitamin D tablets given at the time of the infusion, to help keep blood calcium levels normal. Calcium tablets are not normally recommended.

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Side effects of Zoledronate include:

- About 30% of individuals may experience a flu-like feeling after their first treatment, which usually last 24-72 hours, but which can occasionally go on for longer, sometimes with associated muscle or joint aching. This usually responds well to regular Paracetamol or an anti-inflammatory such as Nurofen or Diclofenac. The chance of this side-effect occurring after second or third Zoledronate infusions is much lower (about 3-4%).
- Individuals with severe pre-existing kidney damage can sometimes experience deterioration in their kidney function after the administration of Zoledronate. It is normal practice not to use Zoledronate in people whose kidneys are not functioning well.
- Very rarely, drugs in the bisphosphonate class can cause eye inflammation.
- Osteonecrosis of the jaw (ulceration in tooth sockets or the gums).

Unproven side effects with Zoledronate include:

- Atrial fibrillation (an abnormal heart rhythm noted by one group of overseas investigations but not seen in any other clinical trials).
- Upper leg fractures (Reported in isolated cases by doctors in Singapore and the USA, but not clearly related to bisphosphonate therapy).

If you have any other questions about this medicine, or your bone condition, contact your Family Doctor.