

Osteoporosis Medicines

AND YOUR DENTAL HEALTH



Osteoporosis (os-tee-oh-puh-ROH-sis) is a disease that makes your bones weak and more likely to break. Osteoporosis is a common disease, and many people take medicine for it. In a small portion of patients, osteoporosis medicine has been linked to a rare but serious side effect.

Your dentist wants you to know how osteoporosis relates to your dental health. Visit your dentist before you start taking medicines to treat or prevent osteoporosis. If you are already taking these medicines, be sure to let your dentist know.

Bone Density and Osteoporosis

Our bones grow denser and thicker until we are in our 20s. Then they start to become thinner and weaker, especially after we turn 60. Many factors besides age affect bone density:

- diet
- exercise
- family traits
- hormones
- lifestyle
- certain medical problems and medicines

Forty-eight million Americans have low bone density and are at risk for osteoporosis.

About 9 million Americans have osteoporosis.

ADA Healthy Smile Tips

- Brush your teeth twice a day with a fluoride toothpaste.
- Clean between your teeth once a day.
- Eat a healthy diet and limit snacks.
- Visit your dentist regularly.

For more information about taking care of your mouth and teeth, visit MouthHealthy.org, the ADA's website just for patients.



W418

To order additional copies, call 800.947.4746 or visit adacatalog.org

©2014 American Dental Association



ADA American Dental Association®

America's leading advocate for oral health



Osteoporosis and Broken Bones

According to the National Osteoporosis Foundation (www.nof.org), half of women and up to one in four men over 50 will break a bone due to osteoporosis. The disease causes more than 2 million fractures each year in the hips, spine, wrists, pelvis, or elsewhere in the body. Osteoporosis and broken bones (also called fractures) are serious. In fact, broken bones of the spine and hips are linked to an increased chance of death.

To prevent broken bones, many people with low bone density or osteoporosis take medicines.

These drugs reduce bone loss and increase bone density. In people who have osteoporosis, these medicines reduce the chance of breaking a hip by as much as half.

One group of osteoporosis medicines is called **bisphosphonates** (bizz-FOS-fo-nates). They include alendronate (Fosamax®), etidronate (Didronel®), ibandronate (Boniva®), pamidronate (Aredia®), risedronate (Actonel®, Atelvia®), tiludronate (Skelid®), and zoledronic acid (Reclast®, Zometa®). **Denosumab** (Prolia®, Xgeva®) is a drug that works somewhat like bisphosphonates. **Teriparatide** (Forteo®) is a drug that works very differently.

Jaw Problems Linked to Osteoporosis Medicines

Some patients who take bisphosphonates or denosumab develop osteonecrosis (os-tee-oh-ne-KRO-sis) of the jaw (also called ONJ). ONJ is a rare but serious condition that can cause severe damage to the jawbone. ONJ can occur on its own or, more commonly, after a tooth has been pulled.

However, if you have osteoporosis or are at high risk for broken bones, the benefits of osteoporosis medicines outweigh the low risk of developing ONJ.

Sometimes osteoporosis medicines are used in cancer treatment. Most people (94%) with ONJ are cancer patients who have been treated with intravenous medicines. The other 6 percent take lower doses to treat osteoporosis.

Risk factors for ONJ include:

- having a tooth extracted (pulled)
- taking these medicines for years
- diabetes mellitus
- periodontitis (gum disease)
- wearing a denture
- smoking

YOUR DENTIST CAN HELP KEEP SMALLER ORAL HEALTH PROBLEMS FROM BECOMING BIG PROBLEMS. AND HE OR SHE WILL SHOW YOU HOW TO TAKE GOOD CARE OF YOUR TEETH AND GUMS.

Tell Your Dentist

If you take a bisphosphonate or denosumab, tell your dentist so he or she can monitor your oral health. Your dentist can help keep smaller oral health problems from becoming big problems. And he or she will show you how to take good care of your teeth and gums.

TALK
TO YOUR
DENTIST

If your physician wants you to take osteoporosis medicines, be sure to visit your dentist. He or she will let you know if you need to have a tooth extracted or other dental surgery. If so, your dentist and physician may decide that the dental treatment should be done before you start taking the drugs.

If you are taking osteoporosis medicines and need to have a tooth extracted or other oral surgery, let your dentist know. He or she will consult with your physician to decide the best plan for you. Your dentist also may refer you to an oral surgeon. If you have an extraction or oral surgery, your dentist or oral surgeon may have you use a special mouthrinse before and after surgery or take antibiotics.

Talk to Your Health Care Provider

If you are taking osteoporosis medicines, do not stop taking these medicines without speaking to your physician. If you have osteoporosis or are at high risk for broken bones, the benefits of these medicines outweigh the low risk of developing ONJ.

There is no known prevention for ONJ. But researchers are working to find the best ways to prevent and treat ONJ. The best ways to lower your risk for ONJ may be to have regular dental visits and to take good care of your teeth and gums at home.