

# Denosumab (Prolia<sup>®</sup>)

## Information for patients and families

### Why is denosumab prescribed for me?

Denosumab is a medicine used to treat osteoporosis. This medicine decreases the risk of having fractures (broken bones). It works by preventing bone from breaking down.

Denosumab is prescribed if you cannot take other medicines for osteoporosis (such as bisphosphonates) or these medicines are not working for you.

### How do I know the medicine is working for me?

You will not see or feel the effect of the medicine directly. It is important to keep taking your medicine regularly to get the full benefit. **Do not stop using denosumab without speaking to your doctor.** The doctor will check how well it is working for you using scans or blood tests.

## How do I take denosumab?

Denosumab is given as an injection under the skin every 6 to 9 months. It is given in your arm, leg or abdomen. You can get the injection in any of these ways:

- At the osteoporosis clinic at St. Michael's
- At your family doctor's office
- You can give yourself the injection or have a family member do it for you. The osteoporosis clinic nurse can teach you how to do self-injections.

If you miss an injection appointment scheduled at St. Michael's Hospital:

- Contact the nurse at 416-864-6060, extension 8181 to re-schedule your appointment.

Important: missing a dose puts you at higher risk of fractures in your spine. Speak to your doctor before stopping or pausing your treatment.

## How do I get and store denosumab?

You must fill your prescription for the medicine at a pharmacy at least 1 week before your appointment. It is important to store it properly:

- Keep your medicine in your refrigerator between 2 to 8 degrees Celsius.
- Store it at the door portion of the refrigerator only. The inside of the refrigerator is too cold and may freeze the medicine.

On the day of your scheduled injection, bring the medicine with you. You do not need to use a freezer pack.

## What side effects may happen and what should I do?

Rarely, denosumab causes skin reactions such as eczema (a red, dry or itchy rash). If the rash bothers you and does not go away, see your doctor.

Denosumab can decrease calcium levels in your blood. This happens 1 in 1000 cases. Your doctor will make sure your calcium and vitamin D levels are normal before the injection.

Having a low calcium level can cause serious complications. Contact your doctor as soon as possible if you have any of these symptoms:

- A numb feeling or tingling in your lips, fingers or toes
- Muscle spasms or cramps
- An irregular heart rhythm

Do not stop taking denosumab without speaking to your doctor. When denosumab treatment is stopped, there is a higher risk of fractures in your spine. This risk may be even higher than before you started the medicine.

If you need to stop the medicine, your doctor can give you a different treatment to prevent fractures of the spine.

You should know about two other very rare, but potentially serious, side effects.

- 1. Osteonecrosis of the jaw.** This is a breakdown of the jaw bone, usually after a tooth extraction or other dental surgery. The chance of having this is very low (less than 1 in 100,000). To lower your risk, brush your teeth and floss regularly while on denosumab.
- 2. Atypical femur fractures.** This is a fracture of the thigh bone. If you feel new pain in the groin or thigh for more than a few weeks, do not put weight on the affected leg and let your doctor know right away. The chance of having this is very low (less than 1 in 10,000).

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