

Medicines Management - Practice Detail Aid

Prescribing guidelines for the Management of Osteoporosis

Aims of this Guideline *Box 1*

The aim of the guideline is to support the management of osteoporosis patients in primary care, to ensure consistency of care across NHS SoTW and to ensure safe, evidence based, and cost effective prescribing of medicines.

This guideline should be used in conjunction with the NICE and National Osteoporosis Guidelines (see references).

Key Points on Content of Guideline *Box 3*

- This guideline suggests a combination of NICE and NOGG that retains the main principles of NICE guidance, but incorporates the greater workability and acceptability of NOGG in its approach to third line treatments.
- The guidance includes recommendations to treat elderly postmenopausal women with a fragility fracture, & incorporates NOGG guidance for men with osteoporosis, individuals treated with glucocorticoids, and the use of more recently approved interventions.
- Routine repeat DEXA not recommended. Consider repeating DEXA at 3 years if patient has osteopenia and is not being treated.

Background *Box 2*

- 3 million people in UK have osteoporosis.
- Almost half of the 10.6 million women aged over 50 in the UK will break a bone during their lifetime, mainly due to osteoporosis.
- Only 480,000 women are being treated with bone fracture prevention.
- 1 in 5 men will fracture a bone after the age of 50.
- Prescribing of drugs for the prevention of osteoporosis cost £1 million in South of Tyne and Wear in 2009/10.
- Prescribing of drugs for the prevention of osteoporosis has increased by 9% in the last 12 months.
- Guidance on the management and prevention of corticosteroid induced osteoporosis is planned.

General Recommendations *Box 4*

- Practice is advised to hold a meeting to discuss implementation of the guideline.
- Generic alendronic acid is 1st line option for the majority of patients.
- Risedronate is the 2nd line option for those patients intolerant or contraindicated to alendronic acid.
- The guideline group decided to provide clinicians with a range of 3rd line options (see box 5).
- Denosumab should only be initiated by a secondary care specialist. Practices are advised that discussions continue to identify the favoured pathway for administration of denosumab.
- Practice to set up a series of regular searches on the practice medical system to monitor implementation of the guidance.
- Practice should review prescribing patterns to review successful implementation of guidance. Data is available on request from the PCT medicines management team.
- Practice to audit & review prescribing of osteoporosis medications by secondary care colleagues to ensure that it is in-line with guidance.

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Osteoporosis treatment

Box 5

FBC, CRP, U/E's, LFT's, GGT, Ca²⁺ and Phosphate, TFT's

Falls Assessment and lifestyle advice. Calcium and Vitamin D supplements for Care home residents, housebound and others where indicated.

Alendronic acid (weekly)

If intolerant or contraindicated consider risedronate (weekly) or another suitable generic oral bisphosphonate

third-line choice(s)

strontium ranelate or

IV bisphosphonate (initiate and continue by secondary care) or Denosumab (initiate and continue by secondary care)

Summary of Patient Eligibility

Box 6

Fragility fracture

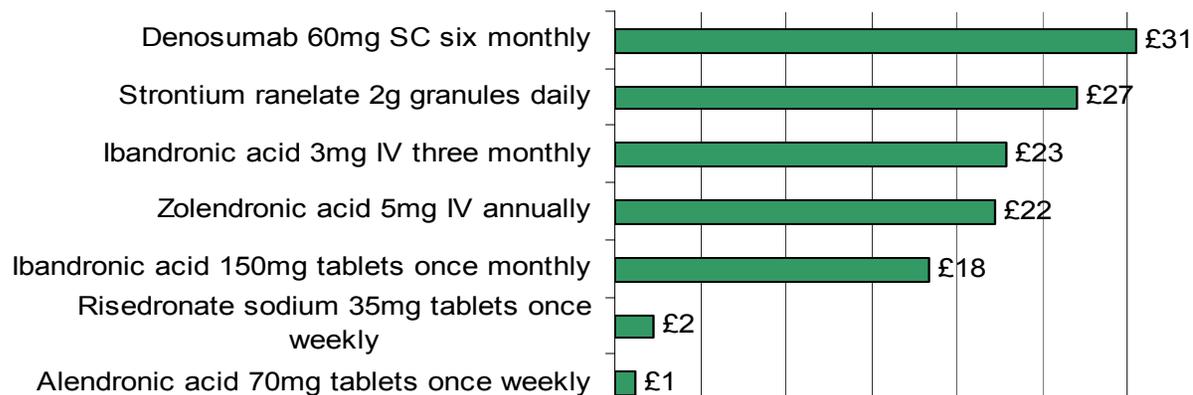
- DEXA not needed for frail elderly patients - Basic Investigations and osteoporosis treatment
- All other patients (post menopausal women and men ≥ 50 yrs) where possible do DEXA scan unless it is going to cause treatment delay:
 - T score -2.5 Basic Investigations and osteoporosis treatment
 - T score =-1 to -2.5 FRAX score then basic investigations and osteoporosis treatment

No Fragility fracture

- FRAX low – reassure & lifestyle advice
- FRAX medium or high – DEXA & recalculate FRAX
 - If T score ≤ 2.5 or above NOGG treatment threshold then basic investigations and osteoporosis treatment

Osteoporosis Treatment Costs

Cost per 28 days



References

1. NICE. TA160. amended January 2010.
2. NICE. TA161. amended January 2010.
3. NICE. TA204. October 2010.
4. NOGG. Guideline for the diagnosis and management of osteoporosis in postmenopausal women and men from the age of 50 years in the UK. July 2010.
5. Cummings SR et al. Denosumab for Prevention of Fractures in Postmenopausal Women with Osteoporosis. N Engl J Med 2009;361:756-65.
6. Bisphosphonates. MHRA. December 2010 [www.MHRA.gov.uk]