Pamidronate (Aredia®)

**Pronounced:** PAM-i-DROE-nate

**Classification:** Bisphosphonate

**About Pamidronate (Aredia®)**

Cancer cells from some tumors (most commonly breast, prostate and lung cancers) can spread to the bone, which is called bone metastasis. Multiple myeloma is a type of cancer affecting plasma cells, which are found in the bone marrow, and thus directly involves bone. In both of these situations the cancer cells cause breakdown or wearing away of the normal bone. In turn, affected bones become more fragile; they may be painful and can even break due to the damage from the cancer cells. Pamidronate is a type of drug called a bisphosphonate, which is used to slow the destruction of bone caused by cancer cells. It can also be used in the treatment of increased calcium levels that may occur as a result of a cancer diagnosis.

Pamidronate is **not** a cancer treatment, but a supportive care medicine. This means it is used to counteract the effects of cancer and its treatments.

**How to Take Pamidronate**

Pamidronate is given directly into a vein as an infusion. Your dose, and how often you receive it, will be determined by your provider. Your healthcare provider may want you to take calcium and vitamin D supplements to help with your bone health. Talk with your team about what doses are right for you. You should drink plenty of fluids while taking this medication. Try to drink 8-10 glasses of non-alcoholic, non-caffeinated liquids a day.

**Possible Side Effects of Pamidronate**

There are a number of things you can do to manage the side effects of pamidronate. Talk to your care team about these recommendations. They can help you decide what will work best for you. These are some of the most common or important side effects:

***Fever, Body Aches***

More than half of the people receiving this medication experience fever and chills after the first infusion, which may be accompanied by muscle aches (also called myalgias). Anti-inflammatory medications, such as ibuprofen (Motrin) and naproxen (Aleve) may be used to relieve these side effects. Ask your healthcare team if you are able to take these medications if side effects occur. Many patients do not have these side effects after subsequent infusions.

***Fatigue***

**Fatigue** is very common during cancer treatment and is an overwhelming feeling of exhaustion that is not usually relieved by rest. While on cancer treatment, and for a period after, you may need to adjust your schedule to manage fatigue. Plan times to rest during the day and conserve energy for more important activities. Exercise can help combat fatigue; a simple daily walk with a friend can help. Talk to your healthcare team for helpful tips on dealing with this side effect.

***Bone, Joint, and Muscle Pain***

Pamidronate can cause bone, joint, and/or muscle pain that can be severe. This can occur from 1 day to several months after starting the medication. Report these symptoms to your provider, who can advise you on strategies to relieve the pain. Pain in the hip, thigh, and groin can be caused by an atypical femur fracture. Notify your provider immediately of any new pain in this area.
Less common, but important side effects can include:

- **Kidney Problems**: This medication can cause kidney problems, including an increased creatinine level, which your oncology care team may monitor for using blood tests. Notify your healthcare provider if you notice decreased urine output, blood in the urine, swelling in the ankles, or loss of appetite.

- **Electrolyte Abnormalities**: This medication can affect the normal levels of electrolytes (potassium, magnesium, calcium, etc.) in your body. Your levels will be monitored using blood tests. If your levels become too low, your care team may prescribe specific electrolytes to be given by IV or taken by mouth. Do not take any supplements without first consulting with your care team.

- **Osteonecrosis of the Jaw**: Osteonecrosis of the jaw (ONJ) is a rare side effect, however, it is important that you know about it and take steps to protect your dental health. The maxilla (upper jaw bone) and mandible (lower jaw bone) are normally covered by gum tissue. In the case of ONJ, this tissue is gone and the bone is exposed. Typical symptoms associated with ONJ are pain, swelling or infection of the gums, loosening of the teeth, exposed bone (often at the site of a previous tooth extraction). Some patients may report numbness or tingling in the jaw or a "heavy" feeling jaw. ONJ may have no symptoms for weeks or months and may only be recognized by the presence of exposed bone. ONJ most often occurs soon after a dental procedure, though not always. Stop treatment with pamidronate at least 3 weeks prior to any dental procedures.
  - Prior to starting therapy, you should have a complete dental exam, cleaning, and removal of any teeth in poor health.
  - Dentures should be checked for proper fit.
  - Brush your teeth after meals and at bedtime with a soft brush. Ask your care team if you are able to floss, and if you are, floss gently once a day.
  - Check your teeth and gums in a mirror daily for any sores, swelling, loose teeth, pain or numbness, or other changes, and report these to your dentist or oncology team immediately.

**Reproductive Concerns**

Exposure of an unborn child to this medication could cause birth defects, so you should not become pregnant or father a child while on this medication. Effective birth control is necessary during treatment. Even if your menstrual cycle stops or you believe you are not producing sperm, you could still be fertile and conceive. You should consult with your healthcare team before breastfeeding while receiving this medication.

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