

Ibandronic acid for metastatic breast cancer

Ibandronic acid is a bisphosphonate. This treatment works by slowing down the rate of bone change. There are two types of bone cells: osteoclasts which break down old bone and osteoblasts which build up new bone. Ibandronic acid stops osteoclast bone resorption and reduces bone mineral loss. This treatment helps to ensure the balance of these cells is correct and bone stays healthy.

Bisphosphonates are used in the treatment of osteoporosis. They have also been used for many years in patients with advanced or secondary breast cancer to treat breast cancer that has spread to the bones. Because of this, several clinical trials were done in patients with early breast cancer to see if bisphosphonates can prevent the development of cancer to the bones in the first place. Although these trials did not individually show any clear benefit, in 2015 a study was published in which combined the individual patient data from all the trials were combined showed a statistically and clinically meaningful improvement in breast cancer survival for post-menopausal women.

Your treatment

Your doctor or non-medical prescriber has prescribed ibandronic acid for you.

The treatment will be an oral tablet (taken by mouth) at a dose of 50mg once a day. It is taken every day for the maximum duration of 3 years.

This treatment can have serious or possibly life-threatening side effects. It is very important that you report side effects straight away. Don't delay, if you feel unwell, please ring The Christie Hotline on **0161 446 3658**. The lines are open 24 hours a day.

How to take your medication

- Take your tablet in the morning, after an overnight fast (at least 6 hours) and before the first food or drink of the day.
- Take the tablet with a full glass of plain water only. Do not take your ibandronic acid with any drink other than plain water.
- Do not chew, suck or allow the tablet to dissolve in your mouth.
- Remain in an upright position (sitting or standing) while taking the tablet and remain upright for 30 minutes after taking the tablet. This will allow time for it to reach your stomach.
- After taking your tablet, wait at least 30 minutes before taking your first food, drink or other medication of the day.
- It is important to keep taking ibandronic acid for as long as your doctor prescribes the treatment. (If you cannot take it there is an alternative 6 monthly intravenous treatment. Please let us know if you would prefer this treatment).



Possible side effects

This treatment can cause many different side effects. Some are more likely to occur than others. Everyone is different and not everyone gets all the side effects. Most side effects are usually temporary, but in some rare cases they can be life-threatening. It is important to tell your hospital doctor or nurse about any side effects so they can be monitored and, where possible, treated.

Common side effects (more than 1 in 10)

Indigestion and altered taste

Some people may have mild symptoms of indigestion, such as acid reflux or heart burn. You may also have a strange taste and/or dry mouth. It is important to tell your doctor or nurse if you have these symptoms, so they can give you the appropriate counselling.

Low calcium levels in the blood

Please tell your GP immediately if you have spasms, twitches, or cramps in your muscles, and/or numbness or tingling in your fingers, toes or around your mouth. You may have low levels of calcium in your blood. Your doctor will monitor this and can offer you treatment if this happens. However, you may be given calcium and vitamin D combination supplements as a preventative measure (after your baseline bloods have been checked) to ensure your calcium remains in the normal range. These will continue for the entire time you are on ibandronic acid.

Uncommon side effects (less than 1 in 10)

• Flu-like symptoms

Ibandronic acid may cause flu like symptoms such as fever, fatigue, weakness, drowsiness, headache, chills and aches in your muscles, joints and bones. In most cases you do not need any specific treatment and the symptoms should improve after a short time. However, taking paracetamol can be helpful with these symptoms.

Nausea and vomiting

The severity of this varies from person to person but most people do not have a problem with nausea and vomiting. If you do have these symptoms please tell your GP.

Skin reactions

A skin reaction is not very common. Some people may develop a rash and itching. If this happens please tell your doctor or nurse.

• Changes in renal function

You will have a blood test before commencing ibandronic acid and 6-12 monthly thereafter. This test is to ensure your corrected calcium and kidney function are within the normal range.

Rare side effects (less than 1 in 100)

• Osteonecrosis of the jaw (Warning!)

Very occasionally, a rare side effect can occur with ibandronic acid, when there is necrosis (a loss of bone) or a breakdown of the jaw bone. It is called osteo-necrosis of the jaw (ONJ) and can be a serious condition. Some of the symptoms are:

- pain, swelling or infection of the gums
- loosening of the teeth
- poor healing of the gums
- numbness or feeling of heaviness in the jaw

Dental guidance

What to do before commencing ibandronic acid

It is essential that you have a dental examination with your dentist before you start treatment with ibandronic acid. If you need any dental work, this must be done before you start this treatment with ibandronic acid. Please refer to the 'Dental letter' for correspondence with a dentist.

How to access an NHS dentist

There is no need to register with a dentist in the same way as with a GP because you are not bound to a catchment area. Simply find a dental practice that's convenient for you, whether it's near your home or work, and phone them to see if there are any appointments available. If you do not have a regular dental practice or are new to the area, you can search for an NHS dentist near you on the NHS choices website.

If you need any dental treatment while taking ibandronic acid

While you are having treatment with ibandronic acid, you should try to avoid **invasive dental procedures** for example having teeth removed. For non-invasive procedures such as tooth fillings, please speak to your dentist or Christie contact.

If you do have to have teeth removed while you are having treatment with ibandronic acid or soon after finishing treatment with ibandronic acid, it is important to discuss this with the Christie adjuvant bisphosphonate service contact first. They may be able to offer advice on the most appropriate way to proceed.

Dental health and check ups

Try to keep your mouth clean and healthy at all times. You can continue to see your dentist for your normal, regular check-ups and cleaning (but not treatment). You can also see your dental hygienist. Show them this leaflet and the dental letter, as it is important that the dentist and dental hygienist know that you are receiving ibandronic acid.

If you have any of the symptoms listed above or any other dental problems tell your Christie contact immediately.

Very rare side effects (less than 1 in 10,000)

Atypical fractures

Unusual fractures of the hip bone have been reported in patients receiving bisphosphonates. This usually occurs after very long term treatment with a bisphosphonate for osteoporosis. Such fractures are not usually the result of trauma. Please report any unusual hip, groin or thigh pain developed whilst on treatment.

Late side effects

With prolonged use of bisphosphonates some side effects may become evident only after a number of years. In reaching any decision with you about treatment, the potential benefit you receive from treatment will be weighed against the risks of serious long term side effects. If any of these problems specifically applies to you, the doctor will discuss these with you and note this on your consent form.

Contacts

If you have any general questions or concerns about your treatment, please contact:

- Adjuvant Bisphosphonate Service: 07824 408899
- For advice ring The Christie Hotline on **0161 446 3658** (24 hours)

Your Christie contact is:

Your hospital number is:

Your IV community team is:

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

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We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact **patient.information@christie.nhs.uk**

For information and advice visit the cancer information centres at Withington, Oldham or Salford. Opening times can vary, please check before making a special journey.

Contact The Christie Hotline for urgent support and specialist advice

The Christie Hotline: 0161 446 3658

Open 24 hours a day, 7 days a week





The Christie Patient Information Service Tel: 0161 446 3000 www.christie.nhs.uk