

**Changes to Product Information as approved by the CHMP on 14 April 2011, pending endorsement by the European Commission**

## **FOR ALL BISPHOSPHONATES**

**Additional text for all bisphosphonate-containing medicines except for medicines containing alendronic acid, where this text replaces the current text on stress fractures**

### **ANNEX I -SUMMARY OF PRODUCT CHARACTERISTICS**

#### **4.4 Special warnings and precautions for use**

Atypical fractures of the femur

Atypical subtrochanteric and diaphyseal femoral fractures have been reported with bisphosphonate therapy, primarily in patients receiving long-term treatment for osteoporosis. These transverse or short oblique fractures can occur anywhere along the femur from just below the lesser trochanter to just above the supracondylar flare. These fractures occur after minimal or no trauma and some patients experience thigh or groin pain, often associated with imaging features of stress fractures, weeks to months before presenting with a completed femoral fracture. Fractures are often bilateral; therefore the contralateral femur should be examined in bisphosphonate-treated patients who have sustained a femoral shaft fracture. Poor healing of these fractures has also been reported. Discontinuation of bisphosphonate therapy in patients suspected to have an atypical femur fracture should be considered pending evaluation of the patient, based on an individual benefit risk assessment.

During bisphosphonate treatment patients should be advised to report any thigh, hip or groin pain and any patient presenting with such symptoms should be evaluated for an incomplete femur fracture.

#### **4.8 Undesirable effects**

During post-marketing experience the following reactions have been reported (frequency rare):  
Atypical subtrochanteric and diaphyseal femoral fractures (bisphosphonate class adverse reaction)

### **ANNEX III -LABELLING AND PACKAGE LEAFLET**

#### **4. POSSIBLE SIDE EFFECTS**

Unusual fracture of the thigh bone particularly in patients on long-term treatment for osteoporosis may occur rarely. Contact your doctor if you experience pain, weakness or discomfort in your thigh, hip or groin as this may be an early indication of a possible fracture of the thigh bone.

## **FOR BISPHOSPHONATES INDICATED FOR OSTEOPOROSIS**

**Additional text**

### **ANNEX I -SUMMARY OF PRODUCT CHARACTERISTICS**

#### **Section 4.2 Posology and method of administration**

The optimal duration of bisphosphonate treatment for osteoporosis has not been established. The need for continued treatment should be re-evaluated periodically based on the benefits and potential risks of <INN> on an individual patient basis, particularly after 5 or more years of use.