



Fosamax



Fosamax (Alendronate sodium) is a medication that has been developed as a specific inhibitor of bone resorption. The medication is not metabolized in humans, but is excreted in urine.

The effects of Fosamax can be seen as soon as three months after therapy has started. The effects continue as long as you keep taking the medication and the density of bone is therefore maintained or somewhat increased, making the bone less likely to fracture.

Fosamax is for the treatment or prevention of osteoporosis in women after menopause, particularly. It reduces the chance of having a hip, wrist, or spinal fracture. Fosamax may also be indicated in the treatment of osteoporosis in men and women who are taking Cortisone preparations.

Fosamax is not a hormone and does not have the benefits and risks of estrogen.

Possible side effects of Fosamax have included irritation of the esophagus, heartburn, nausea, bloating, constipation, diarrhea, headache, and rash.

Fosamax needs to be taken first thing in the morning when a person is out of bed for the day. 10 mg of Fosamax is taken on an empty stomach with a glass of plain water. The person who takes the medication must stay sitting or standing for at least 30 minutes and not lie down after taking the medication. Food should also be avoided for at least 30 minutes. These guidelines are important for the proper absorption of the medication.

Overall, studies have demonstrated how effective Fosamax is in reducing the incidence of fractures of the spine, hip, and wrist which are the three most common sites of osteoporotic fracture. It is a real breakthrough in the treatment of osteoporosis and is one of the most important medications to come along in the treatment of osteoporosis in the last several years.

Related internet links:

<http://www.fosamax.com/>



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Addendum

It has been recently reported that Fosamax, the drug most commonly used worldwide to improve bone density and prevent fractures, can be taken safely and effectively for ten years.

Three million Americans now take the drug. Most of them are post menopausal women with osteoporosis. The new study is the longest clinical trial ever conducted in osteoporosis and found that Fosamax enabled post menopausal women to maintain or increase bone density through ten years of treatment with no ill effects. The improved bone density persisted even after the drug was stopped and diminished gradually.

Interest in Fosamax and related drugs increased in recent years because estrogen, once the first choice for preventing bone loss after menopause, is recommended as only a last resort. Many believe estrogen's benefits are outweighed by increases in the risk of breast cancer, stroke, blood clots and heart attacks.



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Please consult Dr. Haverbush or a physician for specific treatment recommendations.

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