

ALDRICH DENTAL CARE

GREGORY C. ALDRICH, DDS

4905 Manatee Avenue West

Bradenton, Florida 34209

941-792-8232

www.aldrichdental.com

Bisphosphonate-Induced Osteonecrosis of the Jaws (BIONJ)

Updating your dental professionals on changes in your *medical history* at every dental visit may help to ensure medications you are taking such as *bisphosphonates* (bone-sparing drugs) don't interfere with your treatment results, or cause post-treatment complications.

Bisphosphonates are commonly used in tablet form to prevent and treat osteoporosis in postmenopausal women. Tablet form bisphosphonates are often called "oral bisphosphonates." Other forms administered intravenously (IV) are commonly used in the management of advanced cancers that have metastasized to the bone, where the disease often causes bone pain and possibly even fractures. **Some common names for oral bisphosphonates include: (intravenous bisphosphonates): include clodronate [Bonafos], pamidronate [Aredia], zoledronate [Zometa], or etidronate disodium [Didrocal]; oral bisphosphonates: includes alendronate [Fosamax], residronate [Actonel], or ibandronate [Boniva].**

In the period since *bisphosphonate-induced osteonecrosis of the jaws* (BIONJ) was first identified in 2003, more than 300 publications have appeared, and more than 3,600 cases have been reported to the US Food and Drug Administration (FDA). Since most cases are seen and treated in dental offices throughout the world and never reported to the FDA, this number represents only a small fraction of the actual number of patients affected.

In rare instances, some people being treated with intravenous-bisphosphonates have developed condition called osteonecrosis (bone death) of the jaw (BIONJ). This condition can be worsened by invasive dental procedures such as dental implants or tooth extractions and can cause severe, irreversible and often debilitating damage to the jaw. In the early stages of BIONJ, people may not have symptoms but as the disease progresses, pain can gradually develop. The period of time between the first symptoms may be different for each person, but it typically ranges from several months to more than a year.

Some of the symptoms include:

- Loose teeth
- Numbness or a feeling of heaviness in the jaw
- Pain, swelling, or infection of the gums or jaw
- Gums that are not healing
- Drainage

Currently, there is not a treatment that definitely cures BIONJ; however, nonsurgical treatments such as antibiotics, oral antibacterial mouth washes and anti-inflammatory drugs may be may help relieve pain in the short term and treat the disorder. Most people diagnosed with BIONJ usually need surgery.

Similar to intravenous bisphosphonates, prevention of BIONJ in those patients receiving oral bisphosphonates is best achieved by completing all necessary invasive oral surgical and periodontal procedures and even elective procedures, such as ridge augmentation and dental implant placements, prior to the start of their risk period. The critical difference in oral BIONJ risk is that it does not begin until after about 2 years of oral bisphosphonate use. After taking bisphosphonate medication for longer than two years the risk is there forever even if the use is suspended. This information needs to be conveyed to the physicians treating osteopenia and osteoporosis. Ideally, physicians will learn to refer patients for dental evaluations before or during their early treatment course with an oral bisphosphonate. By following these guidelines, dental and medical professionals can work together to prevent a large percentage of potential BIONJ (bone death) cases from developing.

If you are taking bisphosphonates and are going to be receiving oral surgery, periodontal surgery, implant dentistry or other procedures, your dental professional may recommend you interrupt your bisphosphonate therapy for a period of time prior to, during, and after surgery.

There have been other risk factors associated with BIONJ such as age, gender, medicines taken in conjunction with bisphosphonates, and medical conditions, so it is important to maintain good oral hygiene and properly fill out your medical history form (complete medical history is critical for your safety) for your dental professional. ***It is***

recommended that persons taking bisphosphonate medication get their teeth cleaned and examined every 3 months by a dental professional.

