



Roma, 9-12 novembre 2017



ITALIAN CHAPTER



AULA LEPTIS 4

Minicorso 2

Osteoporosi: come individualizzare il trattamento

Moderatori:
*S. Cassibba,
B. Madeo*

Real clinical practice
B. Madeo

I farmaci disponibili
C.M. Francucci

**Valutazione della risposta
al trattamento**
G. Guabello

**Denosumab
per la prevenzione del danno
osseo secondario alla terapia
ormonale adiuvante**
F. Bertoldo

La terapia nei poor responders
I. Chiodini

Take home messages
S. Cassibba



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Conflitti di interesse



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Ai sensi dell'art. 3.3 sul conflitto di interessi, pag 17 del Regolamento Applicativo Stato-Regioni del 5/11/2009, dichiaro che negli ultimi 2 anni ho avuto rapporti diretti di finanziamento con i seguenti soggetti portatori di interessi commerciali in campo sanitario:

- **ELI LILLY**



OSTEOPOROSIS TREATMENT



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- LOTS OF EFFECTIVE DRUGS:
 - ✓ CATABOLIC
 - ✓ ANABOLIC
 - ✓ DIFFERENT SIDE EFFECTS
- FOR TAILORED THERAPY CONSIDER:
 - ✓ COMORBIDITY
 - ✓ AGE
 - ✓ COMPLIANCE





LACK OF EBM CRITERIA TO DEFINE ANTI-RESORPTIVE TREATMENT FAILURE



- ✓ AN EFFECTIVE INTERVENTION DECREASES BUT DOES NOT ELIMINATE THE RISK OF FRACTURES
- ✓ CHANGES IN BMD AND BTMs ARE IMPERFECT SURROGATES FOR ANTI-FRACTURE EFFICACY



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SURROGATE CRITERIA



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PRAGMATIC CRITERIA ESTABLISHED BY THE IOF
BASED ON EXPERT OPINION





BE CAREFUL...



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- **(?) GOOD QUALITY OF THE DATA**
(EXCLUDE ERRORS IN EXECUTION AND EVALUATION MISTAKES)

- **(?) PROPER DATA INTERPRETATION**
(LSC, OTHER CONSIDERATION ABOUT CLINICAL SITUATION)

- **(?) INTAKE OF CALCIUM AND VITAMIN D**





RULES TO REPLACE THERAPY



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- 1) WEAKER ANTI-RESORPTIVE
→ MORE POTENT DRUG (same class)
- 2) ORAL DRUG
→ INJECTED DRUG
- 3) STRONG ANTI-RESORPTIVE
→ ANABOLIC AGENT



FRAGILITY FRACTURES PREVENTION IN CANCER PATIENT TREATED WITH OT

- ANTI-RESORPTIVE DRUGS ARE EFFECTIVE
 - ✓ IN PREVENT FRACTURES
 - ✓ DATA INDEPENDENT FROM BMD VALUES
- UPFRONT THERAPY IS MORE EFFECTIVE
- MORE EBM WITH DENOSUMAB TREATMENT
- THE DARK SIDE OF DENOSUMAB:
 - ✓ AUGMENTED FRACTURES RISK AFTER WITHDRAWAL
 - ✓ LACK EBM DATA ABOUT WITHDRAWAL MANAGEMENT