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INTERMITTENT CYCLIC THERAPY WITH ETIDRONATE PREVENTS CORTICOSTEROID-INDUCED BONE LOSS: THREE YEARS OF FOLLOW-UP
(PRZERYWANA, CYKLICZNA TERAPIA ETYDRONIANEM ZAPOBIEGA POSTEROIDOWEJ UTRACIE MASY KOSTNEJ – TRZY LATA OBSERWACJI)

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We determined the effectiveness of 3 years of intermittent cyclic therapy with etidronate (ICT-E) in preventing bone loss

in patients receiving corticosteroid (CS) therapy. We analyzed the clinical records of patients seen at our tertiary care Osteoporosis Centre, whose data are routinely collected prospectively into a standardized database.
Patients treated with CS for at least 3 years were selected for the study group if they were concomitantly treated with ICT-E. A comparison (Comp) group was selected of CS-treated patients who were treated with no bone-active therapy other than calcium and vitamin D. Patients were excluded if they had known causes of secondary osteoporosis, were treated with any other bone-active therapy within the preceding 2 years or did not have a bone mineral density (BMD) determination at baseline and after approximately 1, 2 and 3 years of follow-up.
There were 24 and 37 patients in the ICT-E and Comp groups. The groups were comparable in baseline age, 60;16 vs 55;14 yrs (mean;SD), and mean CS dose during the study period (prednisone 13 vs 10 mg/day). The groups differed in prior duration of CS therapy, respectively 11;11 vs 3;4 yrs. In the ICT-E group, LS-BMD increased significantly relative to baseline at each yearly follow-up time point, by +3.8;5.8%, p=0.006 (1 yr), +5.0;8.0%, p=0.006 (2 yr) and +5.2;9.8%, p=0.01 (3 yr). In the Comp group, LS-BMD changed by -3.6;6.4% (p=0.0005), -3.2;7.8% (p=0.007) and -1.3;9.1% (p=0.3), respectively. The differences in these percent changes between the two groups were significant at each time point, p=0.00003 (1 yr), p=0.0002 (2 yr) and p=0.01 (3 yr). These data suggest that ICT-E is an effective treatment for CS-induced osteoporosis over a period of 3 years of continuing CS therapy. These findings extend the conclusions of controlled trials conducted over shorter periods of CS therapy.