

PATIENT ADHERENCE TO BISPHOSPHONATE THERAPY

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**PATIENT ADHERENCE TO BISPHOSPHONATE THERAPY (STOSOWANIE SIĘ
PACJENTÓW LECZONYCH BISFOSFONIANAMI DO ZALECEŃ)**

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To assess adherence with bisphosphonate (B) therapy, either etidronate (E) or alendronate (A), initiated in patients with osteoporosis (OP), we analyzed CAND00, our prospective observational database of OP and osteopenia patients seen at our Canadian tertiary care sites. All patients in CAND00 initially seen in Jan/95 or later, who started E or A on or

after their initial clinic visit and who were seen at least once in clinic after initiating B were included. There were 1176 patients (1037 women) in the E group and 1003 (855 women) in the A group. At the start of B, patients in the E group were slightly older than those in the A group (65 vs 61, $p < 0.001$) but the 2 groups had a similar prevalence of prior vertebral fracture (23% vs 20%, n.s.), and similar lumbar spine bone mineral density (LS-BMD) t-scores (-2.46 vs -2.48). Using survival curve analysis, at 3, 6, 9 and 12 months after start of B therapy, 97%, 94%, 91% and 88% of patients in the E group and 91, 86%, 83% and 80% of patients in the A group were still continuing therapy. The difference between the survival curves is statistically significant (logrank $p = 0.036$). Compliance diverges within the first 3 months, but the rate of subsequent discontinuation is similar in both groups at 1% of the initial cohort each month. We conclude that an adherence rate of 80-88% after 1 year can be attained with B therapy in a tertiary care setting. The determinants of B adherence need to be established.