East Kent Hospitals University NHS
NHS Foundation Trust

MHRA – Drug Safety Update June 2017

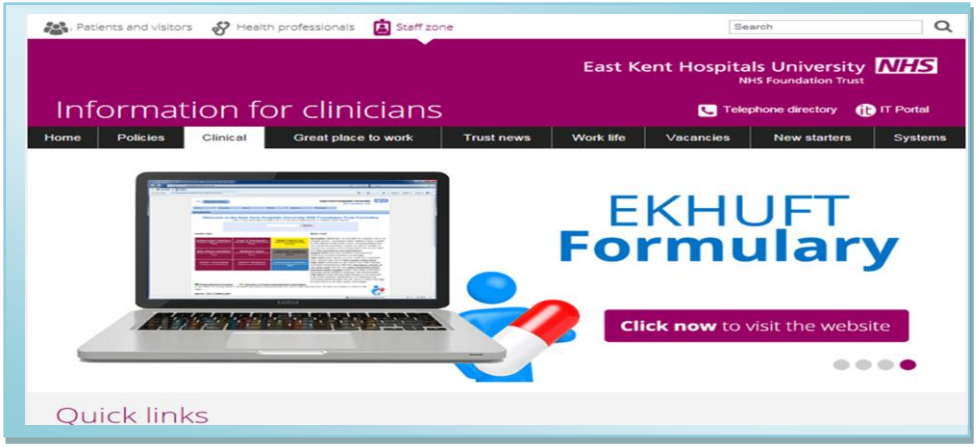
BACKGROUND

Denosumab is a human monoclonal IgG2 antibody. Denosumab 60 mg solution for injection (Prolia®) is indicated for the treatment of osteoporosis in postmenopausal women and in men at increased risk of fractures, and for the treatment of bone loss associated with hormone ablation in men with prostate cancer at increased risk of fractures.

Denosumab 120 mg solution for injection (Xgeva®▼) is indicated for the prevention of skeletal-related events (pathological fracture, radiation to bone, spinal cord compression, or surgery to bone) in adults with bone metastases from solid tumours, and for the treatment of adults and skeletally mature adolescents with giant cell tumour of bone that is unresectable or where surgical resection is likely to result in severe morbidity.

In December 2015, the MHRA published a Drug Safety Update article about very rare reports of osteonecrosis of the external auditory canal with bisphosphonates. Since then, this risk has been kept under close review, given that both denosumab and bisphosphonates are known to be associated with osteonecrosis of the jaw.

Worldwide, five reports of osteonecrosis of the external auditory canal have now been received for patients treated with denosumab for osteoporosis. As with bisphosphonates, the number of cases of osteonecrosis of the external auditory canal is low compared with osteonecrosis of the jaw. There is a likely similar pathological mechanism to osteonecrosis of the jaw. Further measures to minimize risk of osteonecrosis were advised by the MHRA in July 2015.



Prescribing Update

Denosumab (Prolia, Xgeva▼)

All bisphosphonates

ACTION POINTS

- the possibility of osteonecrosis of the external auditory canal should be considered in patients receiving denosumab or bisphosphonates who present with ear symptoms including chronic ear infections or in those with suspected cholesteatoma
- possible risk factors for osteonecrosis include steroid use and chemotherapy (in particular aflibercept, bevacizumab and sunitinib), with or without local risk factors such as infection or trauma. To date no association has been reported with aflibercept, ranibizumab or bevacizumab in their intraocular indications, but intranasal injection of bevacizumab out of license to treat telangiectasia has been associated with osteonecrosis.
- advise patients to report any ear pain, discharge from the ear, or an ear infection during denosumab or bisphosphonate treatment
- report cases of osteonecrosis of any bone suspected to be associated with denosumab or any other medicine on a Yellow Card

For further information please:

Discuss with your clinical pharmacist
Call Medicines Information on 723-6001
Utilise Trust formulary to access safety information on a medicine
http://www.ekhuftformulary.nhs.uk/