Supportive Care

IMF HOTLINE COORDINATORS ANSWER YOUR QUESTIONS

The IMF Hotline 800-452-CURE (2873) is staffed by Paul Hewitt, Missy Klepetar, Nancy Baxter, and Debbie Birns. The phone lines are open Monday through Thursday, 9am to 4pm, and Friday, 9am to 2pm (Pacific Time). To submit your question online, please email TheIMF@myeloma.org.

I recently viewed a news item from the University of Rochester Medical Center about a clinical trial for patients with a history of non-healing bone fractures who were given FORTEO® and then healed rapidly. Can this drug be given to patients with multiple myeloma who have lytic lesions and/or fractures to help heal their bones?

FORTEO® (teriparatide for injection) is synthetic parathyroid hormone (PTH) approved in 2002 by the FDA for the treatment of men and women with osteoporosis who are at risk of bone fracture. PTH stimulates the formation of new bone and increases bone mineral density and bone strength.

The Medication Guide for patients that accompanies each prescription for FORTEO states: "As part of drug testing, teriparatide, the active ingredient in FORTEO, was given to rats for a significant part of their lifetime. In these studies, teriparatide caused some rats to develop osteosarcoma, a bone cancer... It is not known if humans treated with FORTEO also have a higher chance of getting osteosarcoma."

The warning that is included with the Medication Guide states that, "patients should not use FORTEO if they have ever been diagnosed with a bone cancer or with other cancers that have spread (metastasized) to the bone."

Because of the fear of stimulating the growth of cancer, says Dr. David Roodman, head of the myeloma program at the University of Pittsburgh and noted researcher in the area of myeloma-related bone disease, FORTEO has not been used in patients with cancer. It was tested in a mouse model of myeloma at the University of Arkansas for Medical Sciences by Dr. Shmuel Yaccoby, who found that PTH increased bone formation in the myelomatous bone. There was no evidence that FORTEO increased the growth of myeloma cells.

Dr. Noopur Raje, who is head of the myeloma program at Massachusetts General Hospital, and who is also involved in research with myelomarelated bone disease, cautions that myeloma patients avoid using Forteo, given the complete lack of clinical data in the myeloma setting. Dr. Raje and her group are currently conducting research with bone growth-stimulating agents ACE-011 and BHQ880, an anti-DKK-1 antibody.

There have been no trials with FORTEO in myeloma patients. FORTEO should therefore not be taken by myeloma patients outside the context of a clinical trial. At the present time, there is no clinical trial to test FORTEO's safety and efficacy in myeloma patients.

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