

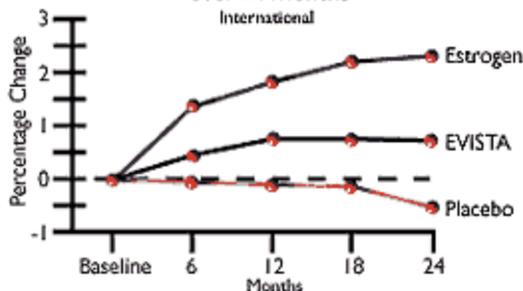


Evista (Raloxifene)

Selective Estrogen Receptor Modulators (SERMs) are drugs designed to act like estrogen in some areas, such as bone tissue, where estrogen is beneficial. They are designed not to act like estrogen in areas such as the breast or uterus where estrogen can be harmful. The first SERM available for use in menopause for the prevention of osteoporosis is Raloxifene, sold under the name Evista®. This drug has recently been approved by the FDA for prevention of osteoporosis. It is for use in women only after menopause.

In two years of clinical trials, raloxifene prevented bone loss and increased bone mass by 2% to 3%. This drug's ability to prevent fractures is not yet known. This drug's effectiveness for bone health is considered to be similar to low-dose

Mean Percentage Change in Total Hip BMD in Hysterectomized Women Treated with EVISTA (60 mg), conjugated estrogens (CE) (0.625 mg/day), and Placebo over 24 months



Source: Eli Lilly

estrogen (0.3 mg) or low-dose alendronate (5 mg). It is considered to be less effective than the typical dose of conjugated estrogen (.625 mg) or the treatment dose of alendronate (10 mg).

Raloxifene apparently does not stimulate the breast or uterus, and during trials, it did not appear to increase the risk of breast or uterine cancer. It may have beneficial effects on heart disease, reducing LDL and total

cholesterol. It does not appear to increase HDL, or good cholesterol, and it does not affect triglycerides. It does not appear to reduce the incidence of Alzheimer's. It does not improve hot flashes, and may make them worse. It does not improve other symptoms associated with menopause.

Raloxifene is taken once a day at any time, with or without food. Continuous daily treatment over time is required for prevention of osteoporosis. If you stop taking the medication, over time you lose the protective effect and bone loss begins again. As with all prescription medications, talk to your healthcare provider before stopping this medication.

Potential side effects: The most common side effect is an increase in hot flashes. Other side effects are mild leg cramps. A rare side effect is an increase in blood clots in the veins. Blood clots can break loose and lodge in the heart, lungs or brain, causing serious problems, including death. Call your health care provider if you feel pain in your leg, chest pain, or experience a change in vision. Call your health care provider if you experience swelling of the feet, hands or legs, abnormal bleeding, or breast pain or enlargement. These changes may indicate other problems not related to raloxifene. You should not use this drug

with estrogen replacement therapy. Tell your healthcare provider about other medications you are taking. Do not use this drug if you are pregnant or breastfeeding, if you have a history of blood clots, if you will be immobile, or if you are scheduled for surgery. It may or may not be prescribed for you if you have liver problems.