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CHRONIC KIDNEY DISEASE SHOULD NOT PREVENT WOMEN FROM TAKING THE OSTEOPOROSIS DRUG RALOXIFENE

Drug Found Safe and Effective in Patients with This Condition, Which Increases Osteoporosis Risk

Washington, DC (Monday, April 7, 2008) — The osteoporosis drug raloxifene increases bone mineral density and reduces the risk of vertebral fractures among postmenopausal women with mild to moderate chronic kidney disease (CKD), according to a study appearing in the July 2008 issue of the *Journal of the American Society Nephrology*. The findings indicate that raloxifene is safe and effective for women with CKD, a patient population often excluded from studies of osteoporosis drugs.

Because CKD may lead to metabolic abnormalities that accelerate bone loss, it is important to monitor bone mineral density levels in these patients and to administer treatments when levels are low. However, the use of osteoporosis therapies for patients with this disease is highly controversial, given the drugs' previously unknown effectiveness and safety in these individuals.

To determine whether raloxifene is a suitable treatment option for women with CKD, Dr. Areef Ishani, of the Minneapolis VA Medical Center and University of Minnesota, in Minneapolis, MN, and his colleagues analyzed data from the Multiple Outcomes of Raloxifene Evaluation (MORE), a multi-center, randomized, placebo-controlled trial of 7,705 postmenopausal women with osteoporosis. They examined the effect of raloxifene over three years on the rate of change of bone mineral density, incidence of fractures, and adverse effects in women with and without CKD.

The investigators found that irrespective of kidney function, patients taking raloxifene experienced a greater increase in spine bone mineral density and a reduction in vertebral fractures compared with patients taking a placebo. Raloxifene also increased hip bone mineral density, most prominently in women with mild to moderate CKD.

The study's results have significant clinical relevance because many postmenopausal women have unidentified CKD. The findings are reassuring in that raloxifene can safely be used in women who have decreased kidney function.

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The study, entitled, "The Effect of Raloxifene Treatment in Postmenopausal Women with CKD," will be available online at <http://jasn.asnjournals.org/> beginning on Wednesday, April 9, 2008, and coincides with Osteoporosis Awareness Month in May and National Women's Health Week from May 11-17.

Dr. Ishani's research will help physicians provide better care for women, specifically by providing information that will allow them to safely and effectively treat more women who have or are at risk for osteoporosis. Women can also now feel confident that decreased kidney function will not keep them from getting effective osteoporosis care. National Women's Health Week initiatives encourage women to make their health a top priority and take steps for a longer, healthier, and happier life. These include engaging in physical activity, eating a nutritious diet, and scheduling preventive health screenings, such as bone density tests.

The American Society of Nephrology (ASN) is a not-for-profit organization of 11,000 physicians and scientists dedicated to the study of nephrology and committed to providing a forum for the promulgation of information regarding the latest research and clinical findings on kidney diseases. ASN publishes JASN, the Clinical Journal of the American Society of Nephrology (CJASN), and the Nephrology Self-Assessment Program (NephSAP).

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