for the treatment of tumour-induced hypercalcaemia

- Reliable response
  “Calcium concentration fell in all patients [n=30] and was restored to normal in all but two”

- Sustained effectiveness
  Normocalcaemia maintained for an average of 3 weeks

- Well tolerated
  Reported side-effects not of clinical relevance

- Effective as a single infusion

Prescribing Notes: Aredia® (pamidronate disodium) Presentation: Ampoules of 5ml aqueous injectable concentrate containing 15mg pamidronate disodium (calculated as the anhydrous form) for intravenous infusion. Indication: Tumour-induced hypercalcaemia. Dosage: Adults and elderly: Depending on the initial calcium plasma level, 15-90mg by slow intravenous infusion in sodium chloride 0.9%. Infusion rate should not exceed 30mg/hours, and concentration should not exceed 30mg/250ml. Total dose can be given either as a single i.v. infusion or divided over 2-4 consecutive days. Rehydration with normal saline before treatment is recommended. Not recommended for children. See full prescribing information. Contraindications: Known hypersensitivity to pamidronate disodium or other bisphosphonates. Precautions: Monitor clinical and biochemical effects. Do not administer as a bolus injection. Do not co-administer with other bisphosphonates, plicamycin (mithramycin) or calcium containing infusion solutions. Caution in patients with severe renal insufficiency (multiple dosing recommended); haemodialysis; pregnancy. Theoretical interference with bone scintigraphy examinations. Side-effects: Asymptomatic hypocalcaemia and transient pyrexia. Occasionally transient lymphocytopenia and hypomagnesaemia. Less frequently reactions at infusion sites and gastrointestinal effects. For further information see full prescribing information. Packs: Ampoules 15mg/5ml (PLO001/0138) in packs of 4, basic NHS price £96.62. © denotes registered trademark. Full prescribing information is available on request from Ciba Laboratories, Horsham, West Sussex RH12 4AB. References: 1. Morton AR, et al. Single Dose Versus Daily Intravenous Aminohydroxypropylidene Bisphosphonate (ADP) for the Hypercalcaemia of Malignancy. Br Med J 1988; 296: 811-814. 2. Baileon SH, et al. Treatment of Cancer Associated Hypercalcaemia with Combined Aminohydroxypropylidene Diphosphonate and Calcitonin. Br Med J 1986; 292: 1549-1550.