Aredia

pamidronate disodium

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”\(^1\)

- **Sustained effectiveness**
  Normocalcaemia maintained for an average of 3 weeks\(^1\)

- **Well tolerated**
  Reported side-effects not of clinical relevance\(^1,2\)

- **Effective as a single infusion**

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Prescribing Notes

Aredia® (pamidronate disodium) Presentation Ampleposes 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/2hrs, 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, plasmacin (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 hypercalcaemia 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 Ampleposes 15mg/5ml (P1.0000.0138) in packs of 4. Basic NHS price £96.62. \( \odot \) denotes registered trademark. Full prescribing information is available on request from Ciba Laboratories, Horsham, West Sussex RH12 4AB. References: 1. Morton AK, et al. Single Dose Versus Daily Intravenous Aminohydroxypropylidene Bisphosphonate (ADP) for the Hypercalcaemia of Malignancy. Br Med J 1988; 296: 811-814. 2. Radost SH, et al. Treatment of Cancer Associated Hypercalcaemia with Combined Aminohydroxypropylidene Bisphosphonate and Calcitonin. Br Med J 1986; 292: 1249-1250.