

# HEALTH News & Notes

## Pain: A Major Front In The Battle Against Cancer



(NAPSA)—The recent announcement by Elizabeth Edwards, the wife of Democratic presidential candidate John Edwards, that her breast cancer has recurred and spread to her bones, is not something that any cancer survivor or caregiver ever wants to hear. Fortunately, Ms. Edwards and thousands of women fighting recurrent breast cancer now have a greater range of options to battle the disease and its many negative effects, especially pain.

Pain affects most people with cancer as the disease progresses. One of the most common causes of pain in advanced cancer is *bone metastases* (cancer that has spread to the bone). Bone metastases occur in an estimated 65-75 percent of patients with breast or prostate cancer and in 70-95 percent of patients with multiple myeloma (cancer that begins in the blood). As cancer progresses, bone pain caused by metastases often increases in intensity.

Fortunately, there are a number of treatment options available for bone pain. Potential treatments include opioid analgesics, which are prescription narcotic pain medicines; a class of drugs called *bisphosphonates*, used to help strengthen bone and slow the

progression of bone metastases; and *external beam radiation*, where physicians target a beam of radiation directly at painful bone lesions.

All these options can be effective but have downsides, too. For example, increasing doses of opioid analgesics is usually necessary to control increasing pain. As doses increase, so do side effects like excessive sleepiness, nausea and breathing difficulties. Bisphosphonates, while helping to strengthen bone, are not very effective at controlling pain. External beam radiation, while effective, can only target a few painful lesions at a time.

Another class of drugs used to treat cancer-related bone pain is *radiopharmaceuticals*. Radiopharmaceuticals are drugs that combine a *radionuclide* (radiation) with a pharmaceutical. Studies have shown that most patients with a positive bone scan who are suffering from pain can experience relief lasting for months following a single injection with a radiopharmaceutical.

In the past, radiopharmaceuticals for bone pain have been underutilized due to concerns over myelosuppression (a drop in a patient's white blood cell, red

blood cell and/or platelet counts), and the belief that repeat doses of these treatments cannot be given.

According to new research, however, one of these agents, called QUADRAMET® (samarium SM 153 lexidronam injection), may be more useful than previously thought.

“QUADRAMET can provide very long-lasting pain relief for people with cancer suffering from bone pain,” said Dr. Oliver Sartor, M.D. from Dana-Farber Cancer Institute, Harvard Medical School, Boston, Massachusetts. “We’ve also found that multiple doses of QUADRAMET can be given over time, and pain relief with each treatment seems to be similar to what patients experience after their first dose,” he added.

With cancer patients now living longer than ever before, this is good news for those suffering from bone pain, and their doctors.

For more information about cancer and bone pain, visit [www.bonepain.net](http://www.bonepain.net).

Commonly observed adverse events for QUADRAMET, such as bone marrow toxicity, occurred in 47 percent of patients in clinical trials. Myelosuppression may increase the risk of infectious and hemorrhagic adverse events.