

# Review of: "Personalized (tailored) treatment with antiresorptive drugs (bisphosphonates, denosumab) in patients with bone metastases from solid tumors – A “Pico” document by Rete Oncologica Piemonte-Valle D’Aosta Bone Metastatic Disease Study Group"

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Potential competing interests: No potential competing interests to declare.

The issue of bone metastases causing skeletal complications (pain, pathologic fractures) is very commonly encountered in oncology. Prevention of skeletal complications using a personalized approach with bisphosphonates or denosumab is an excellent message supported by this study. Since 2020 the cost of zoledronic acid has also decreased> making it easier to give to patients (and caregivers of cancer patients) who want to avoid skeletal complications.

Prevention/amelioration of flu-like symptoms from a 15 min zoledronate infusion has been relatively easy in our practice: give the zoledronate infusion over 1 hour. Thus we totally agree with a personalized approach. The issue of MRONJ is a real one, but attention to development of new symptoms and then discontinuation of the agent is also a personalized approach as well as use of denosumab in patients with a higher risk of MRONJ. The recommendations of the study group for individualized treatment options (pp 7/10 and 8/10 ) should help oncologists, oncology pharmacists, patients, and caregivers to sustain the effort to prevent skeletal complications instead of treating pain and pathologic fractures and to be commended and highly recommended!!