

# Review of: "Long-Term Risk of Medication-Related Osteonecrosis of the Jaw (MRONJ) After Bisphosphonates and/or Denosumab in Metastatic Breast Cancer Patients"

Nazım Can Demircan<sup>1</sup>

<sup>1</sup> Marmara University, Turkey

Potential competing interests: No potential competing interests to declare.

Dear authors,

In this commentary, you have mainly highlighted the need for MRONJ evaluation in a real-life setting, and this is particularly important as survival in several cancers is improving with novel therapies. Caveats in the addressed study are the exact observation time, and this is important to better assess MRONJ onset.

Individualization and optimization of antiresorptive therapy in bone metastases is crucial to prevent MRONJ, and since there are no adequate clinical trials and real-life data, future research is necessary to accomplish this. I think that antiresorptive therapy can be better individualized by possibly conducting risk calculators that integrate patient- and disease-specific factors, for example, age, comorbidities, and extent of bone metastases. However, there can be challenges regarding this approach, such as universal application and availability.