

# OSTEOSCOOP

News on current events in osteoporosis and rheumatology

## Strontium ranelate also protects younger postmenopausal osteoporotic women

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New data recently presented during the 29th American Society for Bone and Mineral Research (ASBMR) meeting, showed that strontium ranelate has significant vertebral antifracture efficacy in young postmenopausal osteoporotic women aged between 50 and 65 years, confirming the benefit of strontium ranelate, whatever the age of the patients.

Strontium ranelate is an antiosteoporotic treatment which decreases vertebral and hip fracture risks with a unique mode of action, both reducing bone resorption while promoting continued bone formation. Early fractures occurring within the first 10 years after menopause have a great impact on the further progression of the disease, as it has been shown that the first osteoporotic fracture is a major risk factor for further additional fractures. Subsequently, the assessment of antifracture efficacy of Antiosteoporotic treatments in this younger female population aged from 50 years appears of utmost interest.

Devogelaer et al [1] analyzed this point by profiting from the phase III SOTI study, an international, double-blind, placebo-controlled trial, supporting the efficacy and safety of strontium ranelate 2 g/day orally in reducing the risk of vertebral fractures in postmenopausal women (mean age 69 years) with osteoporosis and a prevalent vertebral fracture. An analysis of the data from SOTI was performed to investigate the efficacy of strontium ranelate in women aged between 50 and 65 years (n=353; 168 in the strontium ranelate-treated group versus 185 in the placebo-treated group).

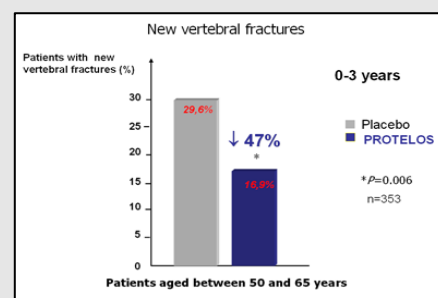
The baseline characteristics of patients were similar in both groups with 80.5% of patients having a prevalent vertebral fracture and 23.0% of patients having a prevalent nonvertebral fracture. Over 3 years of treatment, in the intent-to-treat population, strontium ranelate significantly reduced the risk of vertebral fracture by 47% (P=0.006). The incidence of vertebral fractures over 3 years was 16.9% in the strontium ranelate treated group versus 29.6% in the placebo treated group. The reduction in the risk of vertebral fracture is paralleled by a significant increase after 3 years by 13.7% in the relative change from baseline of lumbar BMD and by 7.5% in the relative change from baseline of femoral neck BMD as compared to placebo. These changes are in accordance with those of the whole Phase III population.

These data demonstrate a significant vertebral antifracture efficacy of strontium ranelate in young postmenopausal osteoporotic women, right from the age of 50, confirming its benefits whatever the age of the patients.

1. Devogelaer JP et al. *J Bone Miner Res* 2007;22(suppl 1): S335. Abstract T412.

### Strontium ranelate reduces the risk of vertebral fractures in younger postmenopausal women

Over a 3-year period, strontium ranelate exhibits a significant vertebral antifracture efficacy in young postmenopausal osteoporotic women right from the age of 50, confirming its benefits whatever the age of the patients.



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