MEDICINE INFORMATION

Zoledronic acid (Zometa)

Patient information about zoledronic acid infusions for cancer-related bone problems or high blood calcium.

At a glance

Zoledronic acid is a bone-strengthening medicine given through a drip. It can reduce complications when cancer affects bone and lower high calcium caused by cancer. Your team checks kidney function and calcium. A dental check before starting helps reduce problems with jaw healing.

How it is given. You receive zoledronic acid as a drip into a vein.

How it works

Zoledronic acid is a bisphosphonate. It slows the action of cells that break down bone. This helps protect bones affected by cancer and reduces the amount of calcium released into the blood from bone.

Is this treatment suitable for me?

Your team may recommend it to protect bones affected by cancer or multiple myeloma, or to lower high calcium caused by cancer. The schedule differs for these uses. Some people receive zoledronic acid for other reasons, such as osteoporosis or as part of an early breast cancer plan. Ask which purpose and schedule apply to you.

Before treatment starts

Tell the team about kidney disease, recent vomiting or diarrhoea, fluid restrictions, and any medicines that affect the kidneys. Mention jaw pain, loose teeth, dentures or dental work. You may need a dental examination and treatment for mouth problems before starting.

Ask how much fluid to drink before and after your visit. If you have heart or kidney problems or have been given a fluid limit, ask the unit for individual instructions. If you are receiving treatment for high calcium, follow your team’s advice before taking calcium supplements.

How treatment is given

A nurse gives zoledronic acid through a drip into a vein. The infusion itself takes at least 15 minutes, and the appointment can be longer if you need tests, fluids or other treatment. A high-calcium treatment plan may start with one infusion and a repeat blood test. Bone protection often involves repeated infusions. Ask for your own calendar.

Tell the nurse if the drip site becomes painful, swollen or wet. Call the unit to arrange a new date if you cannot attend.

Monitoring your treatment

The team checks kidney function, usually before each dose used for bone protection. Kidney changes can lead to a lower dose, a delay or a different medicine. Blood tests may also check calcium, phosphate and magnesium. Ask what to do if you are unable to drink, particularly before a planned infusion.

Side effects

Common effects

- **Flu-like symptoms.** Aches, chills, tiredness or a raised temperature can occur in the first few days, particularly after the first infusion. Ask your team what you can take for relief. If you are also having chemotherapy, follow your hospital's infection advice for any fever.
- **Aches, nausea or headache.** Let the team know if symptoms are difficult to manage or affect drinking.
- **Low calcium.** Some changes are found on blood tests before you feel them. Tell the team about tingling around the mouth or muscle cramps.

Important effects

Kidney function can worsen. Tell your team if you pass much less urine, cannot keep fluids down or develop swelling. Pain, swelling or discharge around the jaw, a loose tooth or a mouth wound that fails to heal needs a dental and oncology review. Rarely, new thigh or groin pain can signal an unusual fracture. A painful red eye or sudden change in vision also needs prompt advice.

When to seek urgent help

Call your treating team straight away for very little urine, repeated vomiting, new muscle spasms, tingling around the mouth or a painful red eye with changes in vision. If you are on chemotherapy and develop fever, chills or feel suddenly unwell, use your hospital's 24-hour number and temperature instructions.

Seek emergency care for severe breathing difficulty, swelling of the face or throat, a seizure, severe confusion or collapse.

Practical advice for this treatment

Prepare for kidney and mineral checks

Tell your team about any kidney condition, poor intake, vomiting or diarrhoea before an infusion. It uses blood tests to check whether the dose should proceed or change. Ask how much fluid to drink if you have been advised to limit fluids for another condition.

Make sure your dentist knows

Let the dentist know you are being treated with zoledronic acid. Discuss planned extractions or other invasive dental procedures with both teams. Report a loose tooth, persistent jaw pain, swelling or a mouth wound that has not healed.

Plan for aches after an infusion

Feverishness, muscle aches or joint pain can occur after an infusion. Ask how to manage them and which pain medicine is appropriate for you. If you also receive an anticancer drug that can lower white blood cells, contact the cancer unit according to its fever advice, since infection can cause similar symptoms.

Other medicines and vaccinations

Tell your team about other medicines for bone health, water tablets, regular painkillers and supplements. They can check kidney and calcium effects and advise which medicines to take on infusion day. Ask about vaccinations in the context of your other cancer treatment.

Everyday life

Keep up routine dental care and tell your dentist about zoledronic acid before any procedure. Ask about safe movement if your bones are weakened. If flu-like symptoms follow the infusion, note when they started and how long they last so your team can advise before the next visit.

Fertility, pregnancy and breastfeeding

Tell the team if you are pregnant, planning pregnancy or breastfeeding. Zoledronic acid is generally avoided in pregnancy and while breastfeeding. Ask what contraception advice applies to your treatment and how long it should continue after the last dose.

After treatment

Keep any planned blood tests or dental follow-up. Tell new clinicians when you last had zoledronic acid before starting another bone medicine or arranging a dental procedure.

Frequently asked questions

Is Zometa the same as zoledronic acid?

Zometa is a brand of zoledronic acid used in cancer care. Check the formulation and schedule on your treatment plan.

Is it the same as denosumab?

Both can protect bone, but they work differently and need different checks. Zoledronic acid is a drip. Denosumab is an injection under the skin.

Why is my schedule different from someone else’s?

It depends on the reason for treatment, your kidney function and your other care. Ask what your next visit is for.

Will I have it through the same line as chemotherapy?

Ask the nurse. They will choose the correct line and timing for each medicine.

Can I receive it if I have kidney problems?

Tell the team about kidney disease. They may adjust the dose, postpone treatment or choose another option based on your tests.

Do I need to drink more water before treatment?

Ask the unit for instructions, especially if you have a fluid limit, heart disease or kidney disease.

Should everyone take calcium tablets?

The advice depends on why you are having the infusion and your blood calcium. Ask before starting or changing supplements.

Can I assume chills are from the infusion?

Chills can happen after zoledronic acid. If you are also having chemotherapy, use your hospital's 24-hour number straight away for shaking chills, fever or sudden illness. Tell them when you had each treatment so they can check for infection.

Can I have a tooth taken out?

Ask the dentist and oncology team to coordinate before an extraction. Tell both teams when you last received the medicine.

What if my jaw feels numb or a tooth loosens?

Contact your dentist and oncology team promptly. They can assess healing and rule out other causes.

Can I receive zoledronic acid for osteoporosis as well?

Tell the team if you receive any osteoporosis injections or drips. They can make sure the plans do not overlap.

Does it replace radiotherapy or surgery for a painful bone?

It can protect bone over time. Your team will assess whether you also need radiotherapy, surgery or other pain treatment.

What if I am sick before a planned infusion?

Call the unit if you have been vomiting, have diarrhoea or cannot drink normally. They can advise whether you need checks first.

When will my calcium be checked again?

Ask before leaving the unit. The timing depends on your starting level, symptoms and why the medicine was given.

Sources and further reading

Read this guide alongside your hospital's plan. Ask your pharmacist to confirm the exact product dispensed in India and follow the instructions for that product.

Summary of Product Characteristics (SmPC) and prescribing information

- Zoledronic acid (Zometa) infusion - EU SmPC
- Zoledronic acid US oncology prescribing information

- Zometa UK Summary of Product Characteristics

Additional sources

- Macmillan Cancer Support, zoledronic acid
- Cancer Research UK, zoledronic acid

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