This information sheet has been produced by the Australian Rheumatology Association to help you understand the medicine that has been prescribed for you. It includes important information about:

• how you should take your medicine
• the possible side effects
• other precautions you should take while you are taking raloxifene.

Please read it carefully and discuss it with your doctor.

Important things to remember

• While taking raloxifene you should see your doctor to make sure the treatment is working and to minimise any possible side effects.

• If you are worried about any side effects you should contact your doctor as soon as possible.

• Raloxifene should not be taken with some other osteoporosis medicines such as bisphosphonates e.g. alendronate (Fosamax, Alendro, Fosamax Plus), risedronate (Actonel, Actonel Combi, Actonel Combi D) and zolendronate (Aclasta), or denosumab (Prolia), strontium (Protos) or teriparatide (Forteo).

What is raloxifene?

Raloxifene (brand name Evista) is a medicine used to treat osteoporosis. It is prescribed only for women as it works on female hormones.

Osteoporosis is a common disease which causes bones to become fragile and brittle so that they break (fracture) more easily even as a result of normal activity (as distinct from a fall). Fractures are painful and restrict a person’s ability to carry out their normal daily tasks.

Once you have a fracture the risk of another is high. Raloxifene is prescribed for women who have already had a fracture in order to reduce the risk of further fractures.

How does it work?

Bone is constantly changing with old bone breaking down and new bone being formed to take its place. This usually happens in a balanced way. If the cycle becomes unbalanced bone breaks down faster than it is replaced. This leads to osteoporosis.

Raloxifene is a medicine that slows or stops the bone breaking down. As a result bone strength increases and the risk of fracture is reduced.

What benefit can you expect from your treatment?

Since osteoporosis doesn’t usually have any symptoms such as pain (until a fracture occurs) you will not ‘feel’ any immediate benefit from your treatment with raloxifene.

For more information about OSTEOPOROSIS see the Osteoporosis Australia website http://www.osteoporosis.org.au/ or phone Osteoporosis Australia on 1800 242 141.
You may be asked to have tests to check the
effect of treatment on your bones. For
example a bone mineral density test is usually
done after one to two years of treatment. This
is a type of X-ray that involves a very small
amount of radiation.

Tests of urine or blood are sometimes used to
measure the effects of treatment on bone
formation and breakdown.

How is raloxifene taken?

What is the dosage and when should it be taken?

Raloxifene is taken by mouth and comes in
60mg tablets. The dose is one tablet every
day. It can be taken with or without food and
at any time.

To help you remember to take raloxifene take
it at about the same time each day.

If you miss a dose take it as soon as you
remember. However, if it is almost time for
your next dose skip the missed dose and take
only your next regularly scheduled dose. Do
not take two doses at the same time.

Can other medicines be taken with raloxifene?

It is safe to take most other medicines when
you are taking raloxifene. However, it should
not be taken with some other osteoporosis
medicines (refer Precautions, page 3).

Your doctor will usually recommend that you
take calcium and vitamin D as additional
treatment for osteoporosis.

How long is the treatment continued?

For osteoporosis, treatment with raloxifene is
usually given for a number of years. Your
doctor will review your progress each year.
Once you have had one fracture your chance
of having another one is high so it is important
to keep taking the medicine as long as it is
effective and as long as no serious side
effects occur.

Are there any side effects?

Most people who take raloxifene do not
experience side effects. Tell your doctor if you
are concerned about possible side effects.

A reduction in dose or change to another
medicine may minimise the side effects so
that you can continue to have treatment for
your bones.

Most common possible side effects

Most common side effects include:
• hot flushes – these are more common
during the first 6 months of treatment
• dryness in the vagina
• leg cramps
• swelling of the hands, feet, ankles, or
lower legs.

Less common or rare possible side
effects

Less common side effects include:
• Blood clot in a vein is rare. Contact your
doctor immediately if you experience pain
or swelling in your legs or a sudden
shortness of breath. Because of this risk
your doctor may advise you to stop
raloxifene around the time of an operation
or before a long-haul flight.
• There are a number of other uncommon
side effects and precautions that are
described in the leaflet that comes with the
medicine. You should read the leaflet and
talk to your doctor if you have any
concerns.

What precautions are necessary?

Blood tests
• Monitoring blood tests are not usually
required for people taking raloxifene,
although in certain situations these may be
needed.

Liver disease
• Raloxifene may not be recommended if
you have severe liver disease.

Use with other medicines
• You should tell your doctor (including your
general practitioner, rheumatologist and
others) about all medicines you are taking
or plan to take. This includes over the
counter or herbal/naturopathic medicines.
You should also mention your treatment
when you see other health professionals.
• Raloxifene should not be taken with some
other osteoporosis medicines such as
raloxifene has not been shown to cause spotting or menstrual-like bleeding or increase the risk of cancer of the lining of the uterus. However, tell your doctor if you develop vaginal bleeding or spotting. Your doctor will need to examine you or order tests to find the cause of the bleeding.

- Raloxifene has been shown to reduce the chance that you will develop invasive breast cancer. However, you should have a breast examination and mammogram before you start taking raloxifene and during your treatment with the medicine. Call your doctor if you notice tenderness, enlargement, lumps, or any other changes in your breasts.

How to store raloxifene

- Store raloxifene in a cool, dry place, away from direct heat and light.
- Keep all medicines out of reach of children.

The information in this sheet has been obtained from various sources and has been reviewed by the Australian Rheumatology Association. It is intended as an educational aid and does not cover all possible uses, actions, precautions, side effects, or interactions of the medicines mentioned. This information is not intended as medical advice for individual problems nor for making an individual assessment of the risks and benefits of taking a particular medicine. It can be reproduced in its entirety but cannot be altered without permission from the ARA. The NHMRC publication: How to present the evidence for consumers: preparation of consumer publications (2000) was used as a guide in developing this publication.