

Tender loving care : Calsynar.

Contributors

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Tender Loving Care

“In the next 12 months roughly 130,000 people will die of cancer in England and Wales. Most will die in hospital (59%) but 33% will die at home, where the main burden of care usually falls during the last month of life.”¹

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*An additional burden for the
cancer patient —*

hypercalcaemia

*... up to 20% of all patients with carcinoma will
have hypercalcaemia at some time during their
disease, usually in the terminal stages of illness.*

Cancer-induced hypercalcaemia has been reported in a wide variety of tumours but most commonly in breast cancer,^{3,4,5,6,7} lung cancer,^{8,9,10} multiple myeloma,^{9,10,11} lymphomas and leukaemias⁹ and renal cancer.^{9,12}

*This dramatic mechanism of death
[hypercalcaemia] affects about 10 per cent of the
patients who die from this disease
[breast carcinoma].*

Calsynar[®]

salcatonin

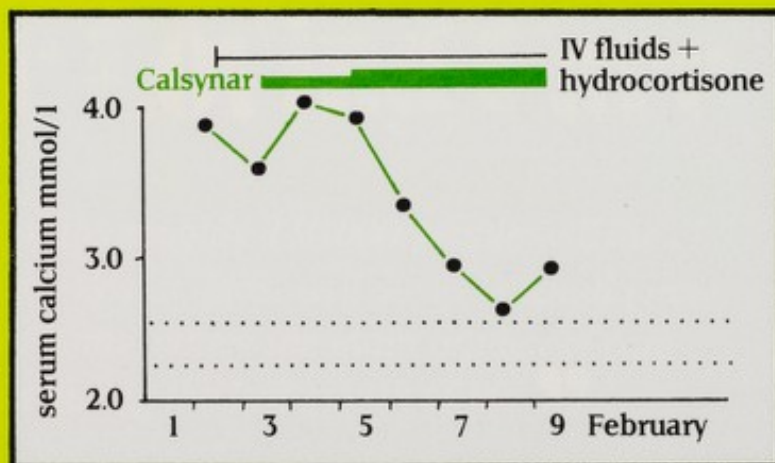
in cancer-induced hypercalcaemia

Specific treatment of hypercalcaemia is important in increasing the length and quality of life of affected patients by relieving such problems as anorexia and associated weight loss, nausea and vomiting, stupor and deteriorating renal function.¹³

CALSYNAR, as a first-line treatment after adequate rehydration, treats cancer-induced hypercalcaemia by lowering the calcium content of blood. Its effect is independent of the initial calcium level and the underlying cause of the hypercalcaemia.¹⁴

Patient with multiple myeloma and symptomatic hypercalcaemia. Treatment with Calsynar (400 i.u. eight-hourly) produced a fall in serum calcium concentration from 3.89 to 2.62 mmol/l over six days.¹⁵

Horizontal dotted lines represent upper and lower limits of normal.



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☺☺ Hypercalcaemia is a significant cause of severe morbidity, but successful treatment is often followed by a relatively long period of comfortable life. ☹☹¹⁶

■ **Highly effective in lowering calcium levels**^{14,17,18,19}

■ **Rapid action**^{14,17}

Maximal effect is reached within 4-6 hours

■ **Well tolerated**^{14,18,19}

Calsynar has few side effects and no serious toxic effects.

☺☺ Its lack of serious toxicity and its independence of action from renal or cardiac function makes it a drug of first choice in the treatment of severe hypercalcaemia persisting after rehydration. ☹☹¹⁴

■ **Easily administered**

CALSYNAR "... easy to use and its effects easy to monitor."¹⁴

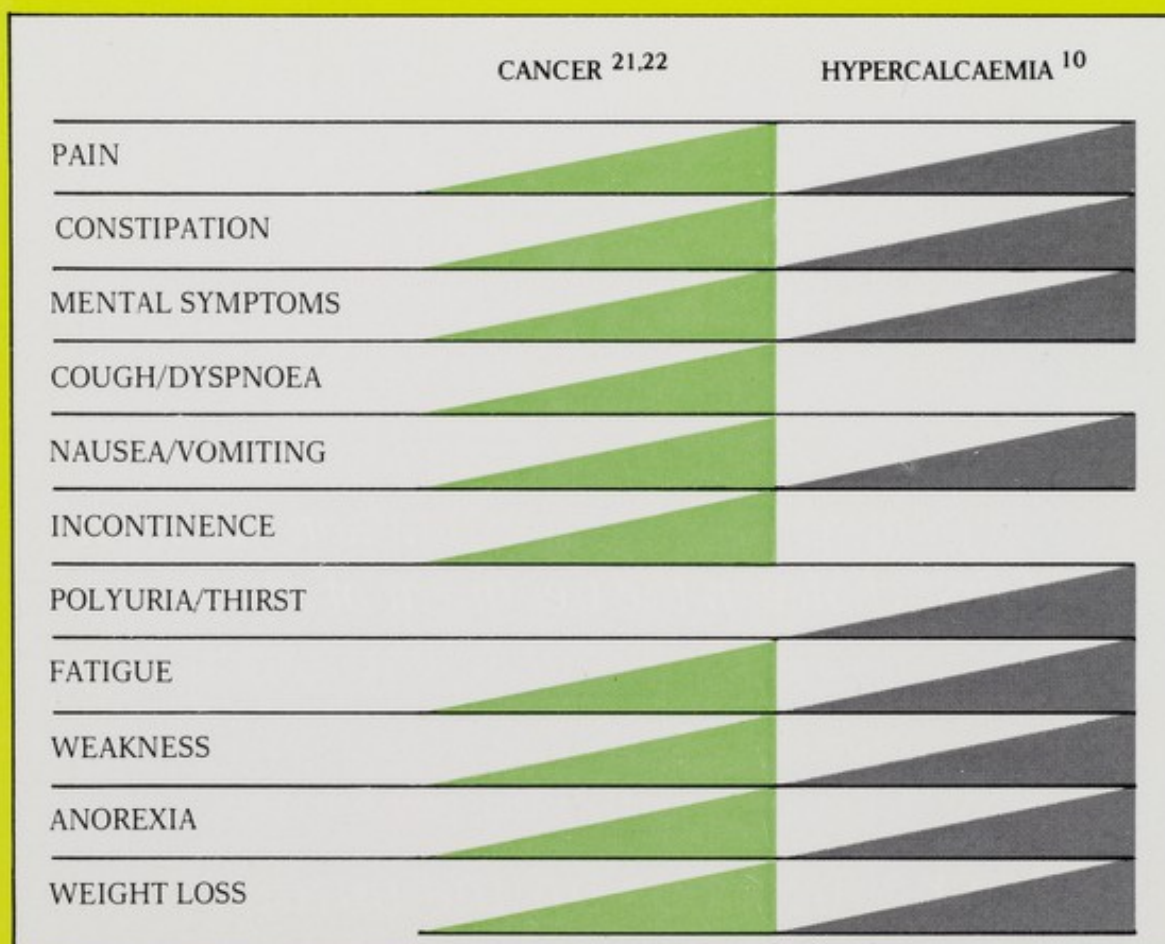
CALSYNAR helps lift the burden from some of your cancer patients

For prescribing information see back page

Cancer and hypercalcaemia share a common clinical presentation

Most patients with hypercalcaemia caused by malignancy present with a syndrome of anorexia, weakness, fatigue and polyuria. . .²⁰

Some common symptoms of cancer and hypercalcaemia



For prescribing information see back page

Calsynar®

salcatonin

Rx 100 iu. daily for 16 days.

Or 200 iu. twice daily for 4 days. Both regimens to a total of 1600 iu.

Prescribing information

Presentation Multidose vials - each multidose vial contains 400 international units of synthetic salmon calcitonin in 2ml saline acetate diluent (i.e. 200 iu per ml). Ampoules - each clear glass ampoule contains 100 international units of synthetic salmon calcitonin in 1ml saline acetate diluent.

Uses Hypercalcaemia

Dosage and Administration - CALSYNAR should be given by subcutaneous or intramuscular injection. Treatment should be adjusted to the patient's clinical and biochemical response. Severe hypercalcaemia may require high doses of CALSYNAR and initially 400 international units may be given 6 or 8 hourly. Lower doses may be satisfactory in some patients and dosage may be adjusted according to the patient's clinical and biochemical response.

Contra-Indications, Warnings and Side Effects Calcitonin may cause nausea, vomiting, facial flushing, tingling of the hands and an unpleasant taste. Inflammatory reactions at the injection site have been reported. Nausea and flushing are usually transient and rarely necessitate withdrawal of treatment. If necessary, the injections can be administered at night with an antiemetic. In any patient with a history of allergy, a scratch (or intradermal) test should be conducted prior to administration of CALSYNAR using a 1:100 dilution in Sodium Chloride Injection BP. There are no studies in pregnant women. Salmon calcitonin should be used only when clearly needed in women who are or who may become pregnant. Calcitonin has been shown to inhibit lactation in animals and should not be administered to nursing mothers. Some patients may develop salmon calcitonin binding antibodies after several months of treatment. The development of these antibodies is not usually related to loss of clinical efficacy. The presence of antibodies appears to bear no relationship to allergic reactions which are rare. Following injections of calcitonin, serum calcium levels may be transiently lowered to below normal levels. This effect is noted most frequently on initiation of therapy where bone turnover is abnormally high but diminishes as osteoclastic activity is reduced with CALSYNAR.

Legal Category P.O.M.

Basic N.H.S. Price Boxes of 1 x 2 ml vial (400 iu synthetic salmon calcitonin) = £21.58. Cartons of 6 ampoules and

10 ampoules, each ampoule containing 100 international units in 1 ml saline acetate diluent. Cartons of 6 = £43.22. Cartons of 10 = £70.31.

Pharmaceutical Precautions CALSYNAR multidose vials when stored between 2-10°C will retain their potency for 3 years. Do not freeze. CALSYNAR ampoules (100 iu) when stored between 2-10°C will retain their potency for 2 years. Do not freeze.

Product Licence Number 0231/0027 0231/0055.

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Further information is available on request

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