Teriparatide is used in post-menopausal women and men who have osteoporosis and are at high risk for bone fractures. It is often used when other treatments fail or in severe forms of the disease. Teriparatide, itself, builds bone and is different from other forms of osteoporosis treatment, which prevent bone breakdown.

Teriparatide is given by injection daily for 2 years. The medication comes in an injector, which is like a pen. To inject the medicine, place the injector on the thigh or upper arm, push the button and it is automatically injected. The dose is 20mcg a day and this is preset by the pen. The needle size is the same as an insulin needle. The injector has enough medicine for 28 days, and the medication should be kept refrigerated.

Patients may get dizzy within 4 hours after taking the first few doses, but this goes away within a few hours. Occasionally, the injection site can become itchy, red, or swollen. Teriparatide rarely can cause increased levels of calcium in the blood, nausea, or achy joints.

You should notify your doctor if you have trouble injecting yourself, if the injection site becomes red, itchy, warm or swollen, or if you have increasing achy joints or muscle spasms. Make sure to notify your other physicians while you are taking this drug. If you are pregnant or considering pregnancy, let your doctor know before starting this medication. Women should discuss birth control with their primary care physicians or gynecologists. Breastfeeding should be avoided while taking teriparatide because the drug can enter breast milk.

Teriparatide has a black box warning, meaning the Food and Drug Administration is concerned with an increased risk of cancer. Sarcoma, a type of cancer, was found in rats that were given very large doses of teriparatide. Repeat studies in monkeys did not reveal this and since it has been released in humans, there has only been one case of sarcoma in a patient taking teriparatide.