

Denosumab

Self-administration of Prolia[®] or XVEGA[®]

Introduction

The information in this leaflet will help you to safely give yourself the denosumab treatment by subcutaneous injection (an injection under the skin).

Self-administration of the medication will allow you to have greater freedom and take control of your treatment.

If at any point you would like to have your treatment given by a health professional, then please contact the Oncology Booking Office on 0300 422 3366 (Monday to Friday, 9:00am to 5:00pm).

Preparing to give your own injections

If you decide that you would like to give your own injections, you will be shown by a nurse the following skills:

- Preparation - denosumab comes in a pre-filled syringe with the needle attached.
- How to give the injection.
- Storing and disposal of the medication and equipment.

When you have done this and you feel ready, you or your care giver will be in a position to self-administer the denosumab at home every month.

Each stage of the process will be shown to you. We will give you as much time as you need to practice self-administering the treatment to help you gain confidence in doing so. A nurse will assess your safety each time you practice and answer any questions that you may have.

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Oncology

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**Patient
Information**

Blood tests and results

You will receive a letter with the date of your next outpatient appointment. You will need a blood test which will include the measurement of your blood calcium levels. This blood test must be taken before your next injection.

Blood tests are usually done monthly for 3 doses, then 3 monthly thereafter (or as decided by your clinician). You will be given information about where you can have the blood tests taken and who will be checking the results.

Equipment

The following items will be given to you by the hospital. It is important that you have them available before giving yourself the injection.

- Pre-filled syringe for injection
- Sharps bin
- Disposable gloves will be provided if someone else is giving you the injection

You will also need a clean surface, such as a table or worktop to work from and some cotton wool/tissues or gauze.

Preparing to give the injection

1. Place the equipment on a clean surface near to you.
Remove 1 syringe from the fridge and wait for 30 minutes for it to reach room temperature.
2. Wash your hands with soap and water then dry. If you are the carer administering the medicine to someone else, put on the gloves provided by the hospital.
3. Check that the denosumab solution is in the syringe, it may be slightly yellow or colourless (clear). Do not use if it is cloudy or discoloured. Check the expiry date (do not use if the date has expired).

Patient Information

Giving yourself the injection

1. Sit comfortably.
2. Have a cotton wool ball, tissue or gauze ready just in case you bleed a little after the injection.
3. The injection must be given in the thigh, abdomen or upper arm. **Do not inject denosumab into skin which is bruised, broken, red or hard. Avoid scars, stretch marks and skin which is tender.**
4. **Do not inject into a limb showing signs of lymphoedema.**
5. **Do not inject the medication if you are feeling unwell.**
6. Pick up the syringe and pull the needle cap straight off while holding the bottom of the barrel, as if you are writing your name with a pen.
7. With your free hand pinch the skin at the site you are going to inject and insert the needle at a 90-degree right angle. See image below.



8. When the needle is in place, press the plunger head (orange in the image above) down until the syringe is empty and the plunger head is level with the needle guard clips. You may feel or hear a 'snap'.
9. With your thumb still on the plunger lift the syringe away from your skin. Once away from the skin, the needle will move into the needle guard when you remove your thumb from the plunger.
10. Dispose of the syringe in the sharps bin you have been given.

**Patient
Information**

Possible complications and side effects

This type of injection is very safe but you may have some bruising around the injection site.

Many people do not experience any side effects from the denosumab. If you do, they should be mild and manageable. If they are not, then please discuss them with your consultant or, if the side effects are severe, contact the **Acute Haematology Oncology Unit (AHOU) Helpline** on **0300 422 3444** for advice.

Common side effects of denosumab include:

- Low level of calcium in the blood – this can cause muscle spasms, cramps and muscle twitching. You may also notice numbness or tingling in your feet, hands or around your mouth. Please tell your consultant or AHOU immediately if you experience any of these symptoms. To prevent this from happening again, you will be given calcium supplements to take while you are receiving denosumab treatment.
- Shortness of breath.
- Diarrhoea.
- Muscle, bone and joint pain.
- Atypical femoral fracture – this is a new or unusual pain in your hip, groin or thigh. Contact your consultant or AHOU if you experience any of these symptoms as this may be an early indication of a fracture to the thigh bone.
- Osteonecrosis of the jaw - persistent pain in the mouth and/or jaw, non-healing mouth sores, mouth swelling, discharge, numbness or a feeling of heaviness and loosening of a tooth can all be signs of bone damage to the jaw. **It is not advisable to have denosumab 6 weeks before or after dental work.** Please consult your consultant or AHOU if you require dental treatment or notice jaw/tooth pain while receiving denosumab treatment.

While you are receiving denosumab treatment, your clinicians will closely monitor you to make sure you are well enough to continue with the treatment, and that your blood results are within safe limits.

Patient Information

How will I get my next prescription?

When you have been seen in clinic, you will be prescribed 3 months of denosumab, 3 injections, one for each month. These prescriptions can be collected from the Oncology pharmacy at Cheltenham General Hospital.

Every 4 weeks, blood will be taken before each denosumab injection for the first 3 doses and then every 12 weeks thereafter (or at the discretion of the clinical team).

The denosumab injections must be stored in the packaging box in a fridge until needed.

While taking denosumab, you should:

- Take good care of your teeth and gums and visit a dentist as recommended.
- Tell your dentist you are taking denosumab.
- Tell your consultant if you plan to have dental treatment or teeth removed.
- Women of child bearing age should use a highly effective contraception while taking denosumab and for at least 5 months after the last dose.

Further information

For more information about denosumab, please visit the following websites.

Website: www.xgeva.com

Website: www.prolia.com

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>