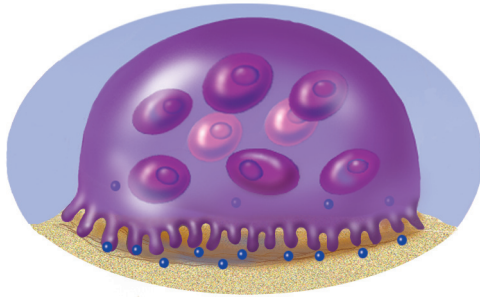

AT A GLANCE: THE EFFECT OF OSTEOPOROSIS DRUGS ON OSTEOCLASTS AND OSTEOBLASTS

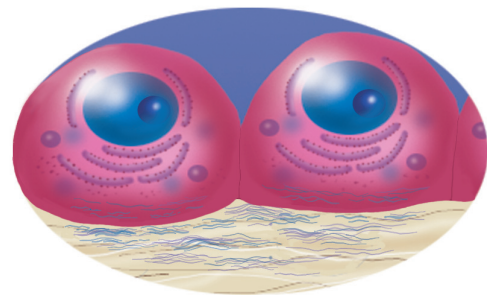
Current osteoporosis therapies used to prevent and/or treat osteoporosis – such as bisphosphonates, a selective estrogen receptor modulator, estrogens and calcitonin – work primarily to slow or stop bone destruction. They reduce the number and/or activity of bone-removing cells called osteoclasts.



**Osteoclast secreting acids to
break down bone**

While current osteoporosis therapies modestly increase bone mineral density and reduce the risk of fracture, none routinely restore bone mass or strength to normal levels. However, osteoporosis drugs that stimulate bone formation may have this ability and are currently being investigated.

**Osteoblasts secreting collagen and
other organic components to create
new bone**



Bone formation (anabolic) drugs work in a different way. They work primarily to stimulate the formation of new bone, by increasing the number and/or activity of bone-forming cells called osteoblasts.