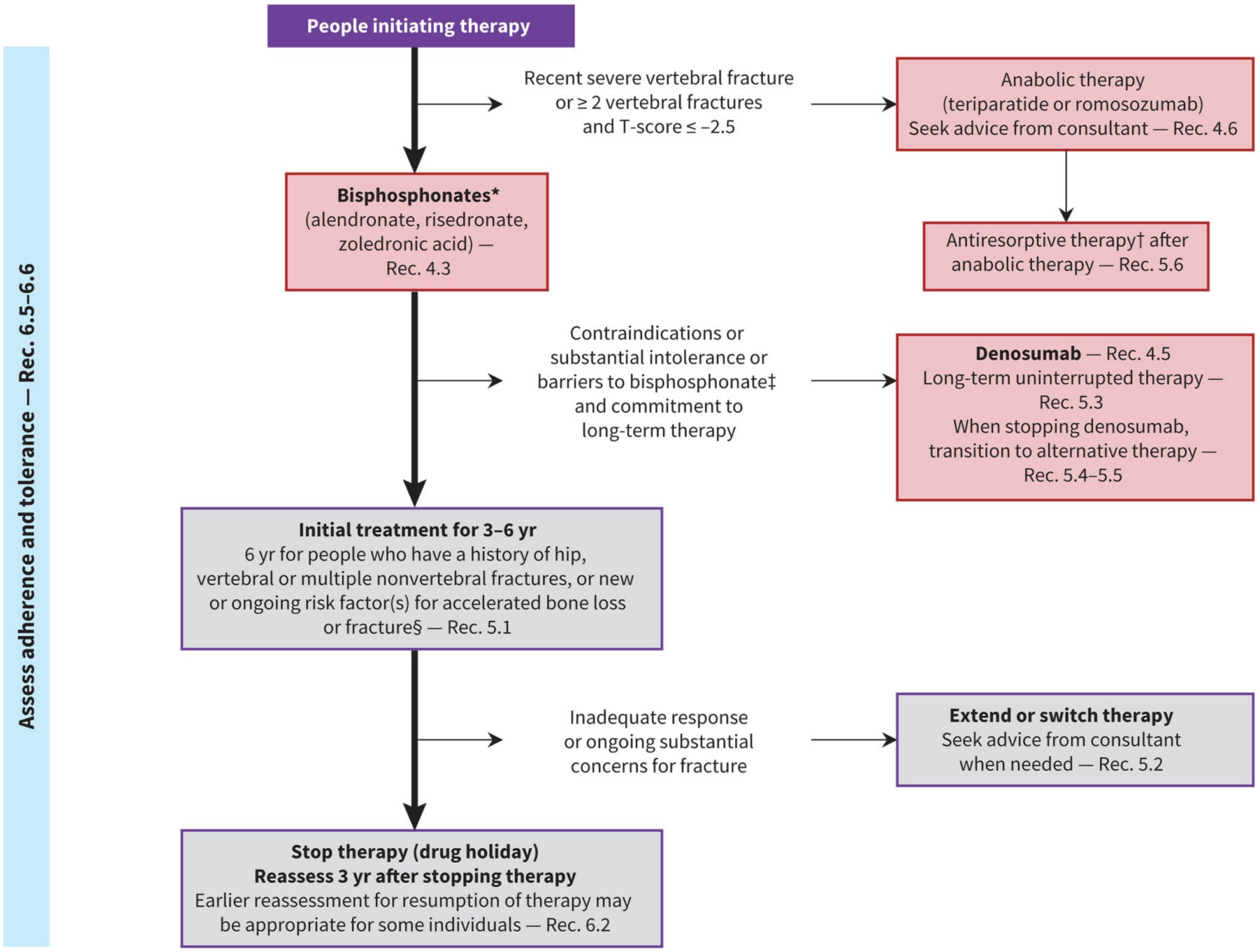
Assess adherence and tolerance — Rec. 6.5–6.6
People initiating therapy
Recent severe vertebral fracture or ≥ 2 vertebral fractures and T-score ≤ –2.5
Anabolic therapy (teriparatide or romosozumab) Seek advice from consultant — Rec. 4.6
Antiresorptive therapy† after anabolic therapy — Rec. 5.6
Bisphosphonates* (alendronate, risedronate, zoledronic acid) — Rec. 4.3
Contraindications or substantial intolerance or barriers to bisphosphonate‡ and commitment to long-term therapy
Denosumab — Rec. 4.5 Long-term uninterrupted therapy — Rec. 5.3 When stopping denosumab, transition to alternative therapy — Rec. 5.4–5.5
Initial treatment for 3–6 yr 6 yr for people who have a history of hip, vertebral or multiple nonvertebral fractures, or new or ongoing risk factor(s) for accelerated bone loss or fracture§ — Rec. 5.1
Inadequate response or ongoing substantial concerns for fracture
Extend or switch therapy Seek advice from consultant when needed — Rec. 5.2
Stop therapy (drug holiday) Reassess 3 yr after stopping therapy Earlier reassessment for resumption of therapy may be appropriate for some individuals — Rec. 6.2