

Strontium is a stimulator of the osteoblast, the cell population responsible for building bones.

Zometa & other bisphosphonate compounds are inhibitors of the osteoclast, the cell population responsible for resorbing bone.

I have used a great deal of bisphosphonates in my treatment of men with PC but also use the following, in conjunction:

(a) comprehensive bone supplement with adequate amounts of absorbable **calcium** but not in excess of 1,000mg per day. Other factors in such a supplement include magnesium, silica, boron (at least 3mg per day).

(b) **Vit K** with at least 100mcg of vitamin K2 (menaquinone) per day

(c) **Vit D** as 25-OH D3 & at the same time use the serum testing of 25-OH D3 to titrate the amount of Vit D-3 taken. The URL for a good lab to do this is <http://cas2.questdiagnostics.com/scripts/webdos.wls?MGWLPN=TBCWP65&wlap=DOS&OrderCode=17306X&SITE=4&SearchString=V%2A&tmradio=title>

The average amount of Vit D-3 necessary to achieve a healthy level of 25-OH D3 (60 or high ng/ml) has been 8,000 IU of Vit D-3 per day, in my experience.

(d) Strontium as **strontium citrate** at a dose of 227mg tid. An inexpensive source for this is <http://store.agoodvitamin.com/aorstsu90vec.html> & the product is Strontium Support. I have no affiliation with any of the above companies or labs.

(e) Supplementary **silica** as Biosil. <http://www.lef.org/newshop/items/item00371.html> carries a brand of biosil. It is also inexpensive.

Other areas often forgotten regarding bone health include the need for resistance exercise & the importance of alkalization of urine to improve bone density. There is of course peer-reviewed literature on this & using Quosa can facilitate finding medical publications on any of the above. On the PCRI website **you can find an old article written by me that is still current on issues of bone integrity as they relate to PC:**

<http://prostate-cancer.org/resource/pdf/Is2-1.pdf>

I hope this helps.