

FACT SHEET — METABOLIC / BONE

Paget's Disease of Bone

An often overlooked metabolic bone condition that can cause significant back pain

Paget's disease of bone is a chronic condition in which the normal bone remodelling process becomes dysregulated, producing abnormal bone that is larger, denser, and weaker than normal. It most commonly affects the pelvis, spine, skull, and long bones of the legs. It is significantly more common than most people realise — affecting approximately 1 in 20 adults over 55 in the UK — and is frequently diagnosed incidentally or after years of symptoms attributed to other causes.

Who gets it

- Predominantly affects adults over 55
- More common in men than women
- Significant genetic component — family history increases risk substantially
- More common in the UK, Australia, and New Zealand than in Asia or Africa
- Often asymptomatic — discovered incidentally on X-ray or blood test

How Paget's causes back pain

Direct bone pain	Paget's bone is metabolically hyperactive and produces a characteristic deep, aching bone pain that is present at rest and at night.
Nerve root compression	Paget's enlargement of vertebrae can narrow the spinal canal or foramina, compressing nerve roots and causing radiculopathy.
Spinal stenosis	Progressive vertebral enlargement produces a characteristic Paget's spinal stenosis.
Fractures	Paget's bone is abnormally structured and prone to both stress fractures and complete fractures, particularly in the long bones but also in affected vertebrae.
Sarcomatous change	Rarely (less than 1%), Paget's bone undergoes malignant transformation to osteosarcoma. Sudden severe pain in a known Paget's lesion warrants urgent assessment.

Diagnosis and treatment

Alkaline phosphatase (ALP) is typically markedly elevated in active Paget's disease and is a useful screening and monitoring test. Bone scan identifies the distribution of active disease. X-rays show characteristic coarsened trabecular pattern.

Bisphosphonate therapy (zoledronic acid intravenous or oral alendronate) effectively suppresses Paget's activity in most patients. A single infusion of zoledronic acid produces remission in over 90% of patients for

several years.

Related fact sheets

Osteoporosis	Metabolic bone disease that can coexist with Paget's.
Spinal stenosis	Canal narrowing from Pagetic vertebral enlargement.
Spinal metastases	Important to distinguish from Pagetic bone changes on imaging.

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