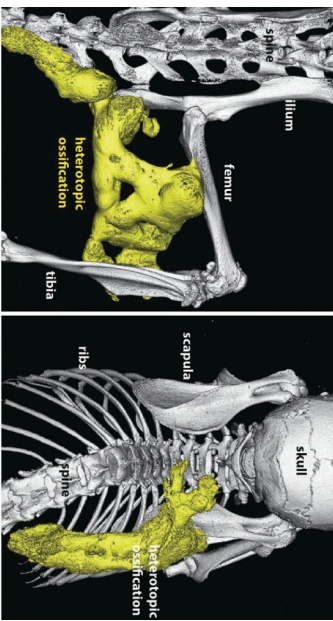


Rarely, fibrous dysplasia may be associated with abnormalities in the hormone-producing glands of your endocrine system. These abnormalities may include:

- ◆ Very early puberty
 - ◆ Thyroid gland problems
 - ◆ Light brown spots on the skin
- Consult a doctor if the child is having severe bone pain that:
- ◆ Increases with weight-bearing activity
 - ◆ Interrupts sleep
 - ◆ Doesn't go away with rest and causes a lump.



Since the disease is so rare, the symptoms are often misdiagnosed as cancer or fibrosis. This leads physicians to order biopsies, which can exacerbate the growth of these lumps. However, those born with FOP tend to have malformed toes or thumbs which help distinguish this disorder from other skeletal problems.

Pathophysiology:

Extra-skeletal bone formation causes progressive loss of mobility as the joints become affected. Inability to fully open the mouth may cause difficulty in speaking and eating. Over time, people with this disorder may experience malnutrition due to their eating problems. They may also have breathing difficulties as a result of extra bone formation around the rib cage that restricts expansion of the lungs.

Any trauma to the muscles of an individual with fibrodysplasiaossificansprogressiva, such as a fall or invasive medical procedures, may trigger episodes of muscle swelling and inflammation (myositis) followed by more rapid ossification in the injured area. Flare-ups may also be caused by viral illnesses such as influenza.

People with fibrodysplasiaossificansprogressiva are generally born with malformed big toes. This abnormality of the big toes is a characteristic feature that helps to distinguish this disorder from other bone and muscle problems. Affected individuals may also have short thumbs and other skeletal abnormalities.

Complications:

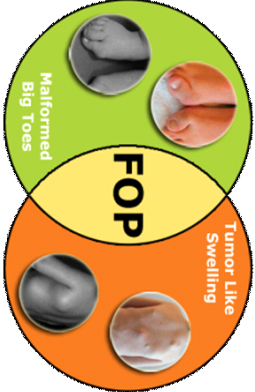
Severe fibrous dysplasia can cause:

- ◆ **Bone deformity or fracture** : The weakened area of an affected bone can cause the bone to bend. These weakened bones also are more likely to fracture.
- ◆ **Vision and hearing loss** : The nerves to your eyes and ears may be surrounded by affected bone. Severe deformity of facial bones can lead to loss of vision and hearing, but it's a rare complication.
- ◆ **Arthritis** : If leg and pelvic bones are deformed, arthritis may form in the joints of those bones.
- ◆ **Cancer** : Rarely, an affected area of bone can become cancerous. This rare complication usually only affects people who have had prior radiation therapy.

Diagnosis:

In most cases, an accurate diagnosis of fibrodysplasiaossificansprogressiva (FOP) can be made based on a patient's characteristic malformation of the big toe, in addition to rapidly changing swellings on the head, neck or back. Outbreaks may be measurable clinically by elevated levels of alkaline phosphatase and bone-specific alkaline phosphatase.

Due to a lack of knowledge of FOP among doctors, the rate of misdiagnosis of the disease is estimated at 80 percent or higher. These errors in diagnosing FOP have caused pain and suffering for FOP patients and their families worldwide. For instance, misdiagnosis has led to unnecessary invasive procedures, such as biopsies, as well as permanent complications from medical interventions, including loss of mobility.



Treatment: Unfortunately, there is no effective treatment for fibrodysplasiaossificansprogressiva (FOP). Surgery is not an option for removing the excess bones because surgery often results in more bone formation. And these new bones don't disappear themselves.

Fibrodysplasia ossificans progressiva (FOP) should be diagnosed during the neonatal period. Early treatment of fibrodysplasia ossificans progressiva helps avoid the factors of aggravation, slow the progression of the disease, and provide the children with improved quality of life. No effective medical therapy is known for fibrodysplasia ossificans progressiva; bisphosphonates and corticosteroids are only beneficial during the flares. Gene therapy may hold promise in fibrodysplasia ossificans progressiva treatment. Systemic steroids are sometimes used for acute flare-ups. Iontophoresis with steroids or acetic acid may improve diminished range of motion.

The good news is that researchers are investigating FOP and new treatments. For example, a drug is being developed that may help to control bone growth. Medications also are available to help relieve symptoms of FOP, such as pain and inflammation.

Surgical care:

Patients with fibrodysplasia ossificans, a rare disorder, may require oral surgical and anesthetic procedures to control oral pain. The importance of a minimally invasive surgical technique and appropriate anesthetic management has been stressed.

The experience using general anesthesia has been favorable, with awake nasal fiberoptic intubation evaluated as desirable for airway management.

FDA APPROVED NEW DRUGS FOR THE MONTH OF JUNE 2018

| Category | Drug Name | Dose | Therapeutic indication | Company | Approved Date |
|--------------------------|--------------------------|--|--|------------------------|---------------|
| Topical | Qbrexza (glycopyrronium) | 2.4% (packaged in single-use individual pouch) | Hyperhidrosis | Dermira, Inc. | June 29, 2018 |
| Melanoma | Bravtovi (encorafenib) | Capsules 50mg 75mg | Melanoma - Metastatic | Array Bio-Pharma Inc. | June 27, 2018 |
| Melanoma | Mektovi (binimetinib) | Tablet 15mg | Melanoma - Metastatic | Array BioPharma Inc. | June 27, 2018 |
| Urinary Tract Infections | Zemdi (plazomicin) | 500mg/10mL (50mg/mL) | Urinary Tract Infection | Achaogen, Inc. | June 25, 2018 |
| Seizures | Epidiolex (cannabidiol) | | Lennox-Gastaut Syndrome, Dravet Syndrome | GW Pharmaceuticals plc | June 25, 2018 |