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MEDICAL WEIGHT LOSS... PART 1

Pharmacotherapy (Drug Therapy) for **Medical** Weight Loss

IN PREVIOUS ARTICLES on Medical Weight Loss: "Dispelling The Myths," I stated that the "traditional paradigm" for weight loss in our country (diet, exercise, and behavior modification) has failed and failed miserably for the vast majority of patients. Thus a more aggressive medical approach using pharmacotherapy is essential as an integral part of a prudent comprehensive weight management program.

So what works? What really works for weight loss and more importantly, long term weight-loss maintenance? Physicians have known for years that obesity is a chronic and progressive disease with a significant genetic predisposi-

tion. Chronic diseases, like diabetes, hypertension, hyperlipidemia, etc, in most cases require long term drug therapy for control, not cure. Obesity is no different.

At present we are unable to cure these chronic diseases, but in most cases we have learned to control them. We do this by continuing to take the prescribed medication.

In May of 1992 Michael Weintraub M.D. published a four year landmark study which revolutionized the treatment of obesity. He showed for the first time in the history of obesity treatment that long-term weight loss could be

achieved and maintained using a combination of two medications, Phentermine and Fenfluramine (Phen-Fen). Prior to this time, nothing other than gastric by-pass surgery had resulted in long-term weight loss. Equally important, during the last six months of the clinical study the medication was discontinued in all 126 subjects.

And guess what happened? Nearly all the patients regained nearly all their weight in spite of remaining on the same diet, exercise and behavioral modification protocols!! Sounds similar to what happens when one stops their medication for hypertension or diabetes. Blood pressure and blood sugar return to pre-treatment levels.



Although the now infamous “Phen-Fen” was very effective (average weight loss 33-35 pounds) and much safer than the media would have you believe, Fenfluramine (Pondimin) and its isomer Dex-fenfluramine (Redux) were removed from the market place in September 1997 due to rare but potentially serious side effects relating to primary pulmonary hypertension (@ 1/12,000 patients) and valvular heart disease (many cases now discounted due to inaccurate echocardiogram interpretations).

Currently there are two medications approved for long term (greater than one year) weight loss, Meridia and Xenical. Meridia acts by a dual mechanism that helps to suppress appetite and control portion size. In reality, most bariatricians including myself find it to be of very limited value for even modest weight loss and I personally have not prescribed this medication in more than five years.

The second medication, Xenical, acts by blocking the absorption of dietary fat. At the recommended dosage of three times per day with meals it will block about 30% of the fat one ingests. In other words, one has to eat over 10,000 calories of fat to lose one pound! Once again, I have found this expensive drug to be of very limited usefulness, although it does have some behavioral modification effects when used as an adjunct to other more effective prescription medications. (Xenical will soon be available over the counter at half the prescription dosage and thus even less effective). Next month’s article will discuss current medications that I use for safe and effective long-term weightloss.

Dr. Skversky is the Medical Director of Weight No More. He has committed the past twelve years of his professional career to the medical treatment of the overweight and obese patient. He is a member of the American Society of Bariatric Physicians, AMA and OCMA. Dr. Skversky can be reached at (949) 645-2930.

