



American Association of Diabetes Educators

Practice Advisory

Weight Loss Medications

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Obesity is increasing in prevalence and is associated with increased risks for cardiometabolic diseases including type 2 diabetes, hypertension, coronary heart disease and cerebral vascular accidents. As for definition, in June of 2013, the American Medical Association pronounced that obesity was a disease rather than a condition.

The available treatments for obesity include lifestyle changes, specifically dietary change and increasing physical activity, prescription medications, and bariatric surgery, all of which are included in the AACE Complications-Centric Model for Care of the Overweight/Obese Patient which is a part of their 2013 Comprehensive Diabetes Algorithm. Data suggest that weight loss of at least 5% is sufficient to significantly reduce health risks. The dual aims for using medication to treat obesity are to increase the proportion of individuals who achieve clinically meaningful weight loss; and to increase the amount of weight lost by individuals. Medications for weight can be broadly categorized as affecting absorption of calories, impacting appetite, and combinations of the two. Some are approved for long term use, while others are only approved for short term use. Strategies for maintenance of weight loss need to be appropriately tailored to meet the needs of the individual. Using prescription weight loss drugs to treat obesity is an option for the following people:

- People with a body mass index(BMI) of 30 or above
- People with a BMI of 27 or above with obesity-related conditions, such as diabetes or high blood pressure

Diabetes educators will increasingly encounter individuals for whom health care providers have prescribed medications for treatment of obesity. Diabetes educators should be familiar with FDA approved weight loss medications including dosing regimen, mode of action, contraindications, and common side effects to maximize effective self-management education (see Resources for Drug Information). In addition, to help realistic weight loss goal setting, it is helpful to be aware that the average weight loss achieved with medication range from about 12 – 23 pounds in settings with optimized access to behavioral and lifestyle change support.

FDA approved medications for weight loss

Category	Mode of action		Generic name	Trade name(s)	Dosing regimen
Pancreatic lipase inhibitor	Prevents some of the fat consumed from being absorbed in the intestine.	Consumption of a diet low in fat is recommended to minimize bowel side effects.			
			Orlistat (120 mg)	Xenical	3x/day before meals
			Orlistat (60 mg)	Alli	3x/day before meals
Serotonin-2C receptor agonist	Increases feelings of fullness so that less food is eaten.	Must be used in conjunction with a reduced caloric intake/increase in energy expenditure to result in weight loss.			
			Lorcaserin	Belviq	2X/day
Noradrenergic	Decreases appetite; note – approved for short term (weeks) use only	Must be used in conjunction with a reduced caloric intake/increase in energy expenditure to result in weight loss.			
			Diethylpropion	Tenuate	3X/day
			Diethylpropion	Tenuate dospan	1X/day in the morning
			Phentermine	Adipex, (and others)	mg/day
			Benzphetamine	Didrex	3X/day
			Phendimetrazine	Bontril	3X/day
			Phendimetrazine	Prelu-2	1X/day
Combination					
	Phentermine decreases appetite; Topiramate is an anticonvulsant which decreases appetite and causes the feeling of fullness after eating to last longer	Must be used in conjunction with a reduced caloric intake/increase in energy expenditure to result in weight loss.	Phentermine-topiramate	Qsymia	1X/day

Resources for Drug Information:

1. <http://www.nlm.nih.gov/medlineplus/druginformation.html>
2. <http://www.drugs.com/>
3. <http://www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/default.htm>
4. <http://www.epocrates.com/mobile>