



# PHARMACOTHERAPY OF OBESITY

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# BMI = BODY MASS INDEX

- BMI = body mass in kg / square of the height in metres = kg/m<sup>2</sup>
- BMI < 18.5 kg/m<sup>2</sup> – underweight
- 18.5 < BMI < 25 – normal or acceptable weight
- 25 < BMI < 30 – obesity grade 1
- 30 < BMI < 40 – obesity grade 2
- BMI > 40 – obesity grade 3 or morbidly obese
- Excessive central adiposity increases risk for development of type 2 diabetes, hypertension, and dyslipidemia

# CONDITIONS MORE PREVALENT IN OBESE POPULATIONS

## Cardiovascular

- Hypertension
- Left ventricular hypertrophy
- Congestive heart failure
- Coronary artery disease
- Stroke

## Pulmonary

- Obstructive airway disease
- Sleep apnea
- Pulmonary hypertension

## Metabolic

- Hypercholesterolemia
- Hypertriglyceridemia
- Low serum high-density lipoprotein
- Diabetes mellitus and glucose intolerance
- Hyperinsulinemia
- Polycystic ovary syndrome
- Increased serum urate

## Musculoskeletal

- Degenerative joint disease

## Skin

- Acanthosis nigricans
- Stretch marks
- Hirsutism
- Skin tags

## Gastrointestinal

- Cholelithiasis
- Esophageal reflux
- Hiatus hernia

## Psychological

- Eating disorders
- Depression
- Affective disorders
- Social stigma

## Neoplasm

- Breast cancer
- Colon cancer

# EFFECTS OF VARIOUS NEUROTRANSMITTERS, RECEPTORS, AND PEPTIDES ON FOOD INTAKE

Brain Site	Increased Eating	Decreased Eating
Arcuate Nucleus of Hypothalamus (ARC)	Ghrelin	Leptin Glucagon Like Peptide-I (GLP-I) Peptide YY (PYY)
Paraventricular Nucleus of Hypothalamus (PVN)	Neuropeptide Y (NPY) Agouti Related Protein (AgRP) Opioids (especially mu) Galanin	Melanocyte Stimulating Hormone (MSH, Melanocortin) Corticotropin Releasing Hormone (CRH) Cholecystokinin (CCK)
Lateral Hypothalamus (LH)	Orexin Melanocyte Concentration Hormone (MCH)	
Hypothalamus	Norepinephrine $\alpha_2$ Serotonin 5-HT <sub>1A</sub>	Norepinephrine $\alpha_1$ and $\beta_2$ Serotonin 5-HT <sub>1B</sub> and 5-HT <sub>2C</sub> Histamine H <sub>1</sub> and H <sub>3</sub>
Nucleus Accumbens	Dopamine	
Amygdala	Opioids (especially mu)	

# EFFECTS OF VARIOUS NEUROTRANSMITTERS, RECEPTORS, AND PEPTIDES ON FOOD INTAKE

Brain Site	Increased Eating	Decreased Eating
Brainstem (Hindbrain)	Neuropeptide Y (NPY) Agouti Related Protein (AgRP) Opioids (especially mu)	Leptin Melanocyte Stimulating Hormone (MSH, Melanocortin)
Vagus Nerve	Ghrelin	Leptin Cholecystokinin (CCK) Glucagon Like Peptide-I (GLP-I) Peptide YY (PYY)
Various or Undetermined	Cannabinoid CB1	Dopamine D1 and D2

# FAT TISSUE – AN ENDOCRINE ORGAN !!!

## Roles:

- storing excess energy as fat
- play pivotal roles in regulation of energy homeostasis
- **adipokines**
  - pro-inflammatory adipokines
    - TNF $\alpha$ , resistin, adipocyte fatty acid binding protein (A-FABP), retinol-binding protein 4, monocyte chemoattractant protein 1 (MCP1), interleukin 6 (upregulated in obesity)
  - Adiponectin (downregulated in obesity)
- leptin
  - secreted by fat cells into the bloodstream
  - acts on the brain to regulate food intake and energy expenditure

# FAT TISSUE – AN ENDOCRINE ORGAN !!!

Increase Insulin resistance	In obese people	Insulin sensitizers	In majority of obese people
Resistin	↑	Leptin	↑  leptin receptorial resistance is common
TNF alpha	↑	Adiponectin	↓

# ETIOLOGY

- GENETIC PREDISPOSITION
- ENVIRONMENTAL FACTORS
- NUTRITION
- APPETITE
- ACTIVITY
- WEIGHT GAIN SECONDARY TO MEDICAL CONDITIONS
  - Hypothyroidism
  - Cushing's syndrome (idiopathic/iatrogenic)
- Medications
  - Antidiabetics: insulin, sulfonylureas, and thiazolidinediones
  - Psychiatric medicines
  - Anticonvulsants EXCEPT topiramate



# PHARMACOTHERAPY OF OBESITY

- Patients with BMI >30
- Patients with BMI >28 with additional risk factors (hypertension, hyperlipidemia, T2D).
- First-line therapy : change diet and lifestyle
- 1. Drugs that affect appetite
  - Sympathomimetics, psychostimulants
  - Peptides
  - Drugs influencing behavior and moodness
- 2. Drugs that decrease absorption of fat, cholesterol or carbohydrates
- 3. Drugs that increase metabolic rate
- 4. Drugs for lowering risk of complications in obese people
  - e.g. insulin sensitizing, lipid lowering drugs,
  - antihypertensive therapy

# GENERAL APPROACH TO TREATMENT

- Diet
- Exercise
- Behavior modification
  - with or without pharmacologic therapy
  - and/or surgical intervention
- Secondary obesity

## RECENTLY USED WEIGHT REDUCING DRUGS

Group	WHO name	Brand name
Psychostimulant + antiepileptic anorexigen	Phentermine + topiramate	Qsymia
Psychostimulant, anorexigen	mazindol	Mazanor, Sanorex
Psychostimulant, anorexigen	lorcaserin	Belviq
Psychostimulant, anorexigen	bupropion+ naltrexon	Mysimba
Leptin analog, anorexigen	metreleptin	Myalept
Inhibitor of lipid absorption, Lipase inhibitor	orlistat	Xenical
Inhibitor of glucose absorption Alpha glucosidase inhibitor	acarbose	Glucobay
Inhibitor of glucose absorption Alpha glucosidase inhibitor	miglitol	Glyset
GLP-I receptor agonist	exenatide	Byetta sc inj.

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### Phentermine

- structurally similar to amphetamine
- enhanced NE and dopamine neurotransmission
- effective adjunct to diet, exercise, and behavior modification
- Adverse effects:
  - Insomnia
  - Significant increases in blood pressure, palpitations, arrhythmias
  - + MAO inhibitors !!!!!
- Contraindications
  - in patients who are abusers of substances such as cocaine, phencyclidine, and methamphetamine
  - glaucoma
  - hypertensive patients, unstable cardiovascular function
  - pregnancy, during breast-feeding
  - psychosis
  - childhood and in elderly

**Phentermine + topiramate** (used today)

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Mazindol**

- tricyclic structure
- DA uptake inhibitor
- decreases appetite
- Withdrawn in some countries

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Fenfluramine and dexfenfluramine**

- “fen-phen,” combined fenfluramine and phentermine
- were withdrawn in the late 1990s
  - life-threatening heart valve disease
  - pulmonary hypertension

### **Lorcaserin**

- selective agonist of 5HT<sub>2C</sub> receptors on anorexigenic proopiomelanocortin neurons in the arcuate nucleus of the hypothalamus
- decreases appetite
- Side effect:
  - Mitral regurgitation, valvulopathy in clinical trials (2014)

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Sibutramine**

- is a monoamine reuptake inhibitor (MRI)
  - in humans, reduces the reuptake of norepinephrine (by ~73%), serotonin (by ~54%), and dopamine
- withdrawn (2010)
  - increased cardiovascular toxicity

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### Toxicity of amphetamine-like drugs and psychostimulants:

- too much stimulatory effects in sympathetic vegetative center of hypothalamus
- Synonym names of this syndrome:
- Sympathetic overflow, serotonin syndrome, disco fever, amphetamine intoxication

Disorder in control of body temperature

malignant hypertermia → DEATH

Hypertonia with high amplitudes

hypertonic crisis → stroke → DEATH

Overstimulation of cardiac muscle

ischaemia myocardial infarction → DEATH



# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Bupropion+ naltrexone**

- **Bupropion**
  - a reuptake inhibitor and releasing agent of both norepinephrine and dopamine
  - a nicotinic acetylcholine receptor antagonist
  - activates proopiomelanocortin (POMC) neurons in the hypothalamus which give an effect downstream, resulting in loss of appetite and increased energy output
- **Naltrexone**
  - a pure opioid antagonist
- bupropion/naltrexone has an effect on the reward pathway that results in reduced food craving

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Bupropion+ naltrexone**

- bupropion inhibits CYP 2D6 – drug interactions !!
- CYP2B6 inducers enhance toxicity of bupropion e.g. carbamazepine, phenytoin
- Adverse effects:
  - Epileptiform convulsions
  - psychotic symptoms with suicid actions
  - anxiety, insomnia, tremor, head-ache, tinnitus, vertigo, fever
  - hypertension, palpitation, angina pectoris
  - arthralgia, myalgia
  - nausea, mild hepatotoxicity, colica abdominalis,
  - pruritus, sweating

### ■ CONTRAINDICATIONS:

- epilepsy
  - risk for suicid actions
  - MAO-I therapy
  - uncontrolled hypertension
  - addiction of opioids/etanol/benzodiazepines,
  - malignancies in CNS
  - hepatic and renal insufficiencies
  - pregnancy
  - childhood
- ### ■ Bupropion/zonisamide
- at phase II testing

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Rimonabant**

- an inverse agonist of the CBI receptor
- was developed for smoking cessation and to facilitate weight loss
- decreases neurotransmitter release at GABAergic and glutamatergic synapses

#### Site of action:

- CNS:
  - hypothalamus, limbic system
  - $\mu$  opioid receptor antagonists potentiate its effect (eg. naltrexon)
- Periphery:
  - Liver: inhibits lipogenesis
  - Visceral fat: inhibits lipogenesis, adiponectin production, increases beta-oxidation of fats
  - Skeletal muscles: increases glucose uptake and thermogenesis
- withdrawn (2008)
  - major depression
  - increased suicidality

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Ephedra sinica**

- about 0,5 m in height, Northeast-China
- Active ingredient:
  - ephedrin and pseudoephedrin alkaloids.
- Mode of action of ephedrin :
- Indirect + direct mixed type sympatomimetics
- Effects in CNS + periferally.
- Indirect : neurotransmitter release from adrenerg neurons – amfetamin-like effect

CNS sympathetic overflow sy – stimulatory amfetamine-like effect – euphoria

- Direct effect:

	alfa I	beta I	beta 2
norepinephrine	+++	++++	+++
ephedrine	+	+++	++



# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Ephedra sinica**

- ephedra is one of the most infamous dietary supplement
- Use:
- body building, sportsmen
- obesity, for weight reducing, enhancement of performance
- Effects:
- weight reducing effect within 1-12 months
- synergistic effect in combination with caffeine
- Acute sympathomimetic effects in CNS + periferally
- Reduced sensation of fatigue
- enhance breath volume + cardiac output
- Adrenergic effects , e.g. enhanced blood sugar



Enhancement of performance

e  nergy

# DRUGS AFFECTING APPETITE

## I.A. SYMPATOMIMETIC DRUGS, PSYCHOSTIMULANTS

### **Ephedra sinica**

- Ephedrin-containing dietary supplements: are PROHIBITED to sell
- 2004.U . S . Food and Drug Administration ( FDA ) banned dietary supplements, herbs containing ephedra sinica
- Serious adverse events
- seizures, stroke, death
- cardiovascular symptoms

# DRUGS AFFECTING APPETITE

## PEPTIDES UNDER INVESTIGATION

### Leptin

- Leptin circulates at levels proportional to body fat and BMI
- It enters the CNS in proportion to its plasma concentration
- Its receptors are found in brain neurons involved in regulating energy intake and expenditure
- It controls food intake and energy expenditure by acting on receptors in the mediobasal hypothalamus
- periferally it increases insulin sensitivity, influences maturation of hemopoietic cells
- glucocorticoids and oestrogenes decrease leptin blood level
- beta3 receptor agonists decrease insulin-induced leptin release
- **Metreleptin**
  - The form of leptin that is currently available for human therapy is known as recombinant methionyl human leptin (metreleptin, Myalept®)
  - is the only pharmaceutical form of leptin
  - has been recently approved by the FDA for the treatment of congenital or acquired generalized lipodystrophy
  - has a very limited role in the treatment of patients with common obesity

# DRUGS AFFECTING APPETITE PEPTIDES UNDER INVESTIGATION

- Leptin sensitizers
  - celastrol
  - a very potent leptin sensitizer that reduces food intake and body weight in diet-induced obese (DIO) mice
  - leptin with amylin
  - Pramlintide acetate, a synthetic analog of amylin and metreleptin, a recombinant methionyl form of human leptin
  - the development of a pramlintide/metreleptin combination therapy has been stopped due to potential safety concern
  - co-administration of leptin and exendin-4, a natural agonist of GLP-I receptor, restored leptin responsiveness in DIO mice switched to normal diet
- Leptin receptor agonists
- leptin mimics
  - ciliary neurotrophic factor (CNTF) – a pluripotent neurocytokine that mimics the biological actions of leptin while overcoming “leptin resistance”
  - Axokine® - small positive effect. The drug was not commercialized.



# DRUGS AFFECTING APPETITE

## PEPTIDES UNDER INVESTIGATION

### **Cholecystokinin (CCK)**

- a postprandial gut hormone
  - Stimulates the activity of the exocrine pancreas
  - inhibits gastric emptying
  - promotes short-term satiety by acting on CCK I receptor
- 
- CCK analogues
  - CCK I-receptor agonists
  - CCK2-receptor agonists

# DRUGS AFFECTING APPETITE

## DRUGS INFLUENCING BEHAVIOUR AND MOODNESS

- Antidepressants
  - especially serotonin reuptake inhibitors have good effect on weight loss
- Some antiepileptics (e.g. topiramate, zonisamide)
  - may decrease attacks in food intake

# DRUGS AFFECTING APPETITE

## DRUGS THAT DECREASE ABSORPTION OF FAT, CHOLESTEROL OR CARBOHYDRATES

### **Orlistat (Xenical)**

- GI lipase inhibitor
- reduces absorption of fats since triglycerides not split
- Side effects:
  - flatulence, steatorrhea, fecal incontinence
- Clinical use:
  - obesity for weight reducing and education of obese people for the proper diet!
  - In education it has similar role than disulfiram therapy in alcoholism
- OTC drug

# DRUGS AFFECTING APPETITE

## DRUGS THAT DECREASE ABSORPTION OF FAT, CHOLESTEROL OR CARBOHYDRATES

### **Bile acid binding resins**

- Plant fibers

### **Ezetimibe**

- Cholesterol absorption inhibitor

### **Alpha glucosidase inhibitors:**

- acarbose, miglitol
- Side effects:
  - flatulence, diarrhoea, colica abdominalis
  - Hepatotoxicity
- Contraindication:
  - ulcus pepticum
  - inflammatory bowel diseases

# DRUGS AFFECTING APPETITE

## DRUGS THAT INCREASE METABOLIC RATE

### **Beta 3 agonists**

- have remarkable antiobesity and antidiabetic effects in rodents
- Mirabegron
- stimulates brown adipose tissue in humans
- nebivolol (beta1 antagonist) effective in metabolic sy

### **UCP (uncoupling protein) analogues**

- Uncoupling from ATP production a good theoretical mechanism but that compounds which have been investigated with this mechanism of action have a great toxicity
- One of the pollutants of fat-burning dietary supplements
  - DNF = dinitrophenol is very toxic !!!

### **Adipose tissue specific Thyroid hormone analogues**

# DRUGS AFFECTING APPETITE

## DRUGS FOR LOWERING RISK OF COMPLICATIONS IN OBESE PEOPLE

### **Insulin sensitizing drugs**

- Metformin (biguanide derivative)
  - Side effect: lactic acidosis
  - Contraindicated in renal, hepatic, hypoxic pulmonary diseases, heart failure or shock
- PPAR (peroxisome proliferator-activated receptor) gamma agonists :
  - troglitazone was withdrawn because of hepatotoxicity
  - rosiglitazone was withdrawn (2010) because of increased blood volume and its consequences
  - pioglitazone
- OBESITY
  - suppress resistin production and increase insulin sensitivity in muscle cells

### **Lipid lowering drugs**

### **Antihypertensive drugs**

# COMPLEMENTARY AND ALTERNATIVE THERAPIES

- **Chromium**
- **St. John's wort (*Hypericum perforatum*)**
  - Hypericin
  - Serotonergic/monoamine oxidase inhibition
- **Pyruvate**
- **Hoodia (*Kalahari cactus*)**
  - is a desert cactus
  - stems and roots of this plant – appetite suppressant effects
- **Guarana Extract and Various Tea Extracts**
  - sources of caffeine
  - have inherent adrenergic properties
  - increase the effects of stimulant substances such as ephedrine or ephedra alkaloids
- **Chitosan**
  - a cationic polysaccharide
  - may be effective in blocking absorption of fat from the gut