

SIBUTRAMINE AS AN ADJUVANT THERAPY OF ADOLESCENTS WITH MORBID OBESITY: A PILOT STUDY

O. Bortnik¹, G. Reisler², R. Afriat², M. Bulkowstein¹, T. Tauber², M. Berkovitch¹
¹*Clinical Pharmacology Unit* ²*Ambulatory Clinic, Assaf-Harofeh Medical Center, Zerifin,*
Sackler School of Medicine, Tel Aviv University, Tel Aviv, Israel
mberkovitch@asaf.health.gov.il

Background: Weight reduction of morbid obese patients and maintenance of the destination weight is very difficult. Sibutramine is one of several medications that are adjuvant to diet restrictions. Sibutramine was shown to be effective and safe among adult patients, however, there is no information on its use among pediatric patients under the age of 16 years. Methods: Obese adolescents were referred to our eating disorder clinic. After excluding organic disorders causing the overweight and psychiatric disturbances, sibutramine 10 mg daily was administered, together with personal diet programme and recommendation for physical activity. Results: 20 adolescents aged 15.3 ± 1.7 (range 13-18) years with morbid obesity were treated in our clinic from November 2000 through November 2001, 15 of whom were female. Mean BMI was 39.2 ± 6.1 (range 29.9-49.5) kg/m^2 on admission. All patients had an early weight reduction of 5-20Kg, mean BMI decreased by 3.8 ± 1.91 (range 6-7.4) kg/m^2 over a period of 3-6 months. During the follow up period most of the patients discontinued the treatment. A dramatic improvement was observed in patients with concomitant disorders such as asthma (2 patients aged 13 and 14 years), hypertension (3 patients aged 16-17) and obstructive sleep apnea (1 patient with Down's Syndrome aged 13 years). Adverse reactions included constipation (2 patients), headache (2 patients). All were mild, transient, well tolerated and were not a reason to stop treatment. Conclusions: Sibutramine can be administered to adolescents with morbid obesity, however, a long-term follow-up and larger studies are warranted.

