Blackrock Medical Clinic

Medical Interventions For Weight Loss

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Introduction

Medication can be used to help with weight reduction and maintenance. This should only be started after medical assessment and in conjunction with dietary and lifestyle interventions. For most people, to maintain weight loss over the long term, will require some kind of intervention. Medication may be a part of this solution. Surgery is also a viable option with good long-term results. As with all interventions and informed decision considering the risks and benefits should be made on an individual basis. Here we give a brief overview of the options.

Orlistat (Xenical, Alli)

Orlistat is a tablet that inhibits fat digestion. It is taken with meals. Patients should take supplements of fat-soluble vitamins (A,D,E,K). It can cause steatorrhoea (loose fatty stools) if fat is not restricted from the diet. It has very little systemic effects so side effects are generally limited to gastrointestinal ones although kidney stones and liver toxicity are possible. It has been shown to double effective weight loss in clinical trials when compared to lifestyle interventions only. It can interact with thyroid medication, antiepileptics, amiodarone, cyclosporin and, warfarin.

Liraglutide (Saxenda, Victoza)

Liraglutide is a daily injection that mimics a hormone released after you eat and thus regulates hunger. Its effect will cease once discontinued so it may need to be used for prolonged periods or indefinitely to maintain weight loss.

Liraglutide is available on the HSE to patients who meet strict criteria under the GMS and Drugs Payments Scheme. An application must be made for approval including BMI>35, prediabetes, and cardiovascular risk factors as well as evidence of significant lifestyle and behavioural modifications. You should not take this medication if trying to get pregnant and should wait 2 months after discontinuing it. Most people have minimal side effects with gastrointestinal ones most common although rare pancreatitis, gall bladder disease and thyroid tumours may be linked.

Semaglutide (Ozempic, Wegovy)

Semaglutide is a once weekly injection that mimics a hormone released after you eat and thus regulates hunger. It starts at a low dose of 0.25mg which is increased monthly as tolerated. Its effect will cease once discontinued so it may need to be used for prolonged periods or indefinitely to maintain weight loss. In trials it showed a greater effect than Liraglutide with a 12% weight reduction compared to placebo. It is one of the most effective weight loss medications available and has been shown to have significant cardiac benefits irrespective of weight loss. You should not take this medication if trying to get pregnant and should wait 2 months after discontinuing it. Most people have minimal side effects with gastrointestinal ones most common although rare pancreatitis, gall bladder disease and thyroid tumours may be linked.

Tirzepatide (Mounjaro)

Tirzepatide is a once weekly injection that mimics hormones released after you eat and thus regulates hunger. It starts at a low dose of 0.25mg which is increased monthly as tolerated. Its effect will cease once discontinued so it may need to be used for prolonged periods or indefinitely to maintain weight loss. In trials it showed a greater effect than Semaglutide with 91% of people losing at least 5% of their bodyweight compared to 84%. It shows promise for having significant cardiovascular benefits, but trials are underway. You should not take this medication if trying to get pregnant and should wait 2 months after discontinuing it. It may affect the oral contraceptive pill so barrier methods should be used in addition for 4 weeks after starting or changing a

dose. Most people have minimal side effects with gastrointestinal ones most common although rare pancreatitis, gall bladder disease and thyroid tumours may be linked.

If you choose any medication option a full information leaflet will be provided in the packet from the pharmacy.

Bariatric Surgery

Surgery can help people to lose between 20 and 40% of their weight along with lifestyle modifications but it is normally reserved for people that have serious health problems caused by their weight and where other interventions have failed. People need long term follow-up after surgery as they can have digestive issues, gallstones, or vitamin deficiencies. Often blood tests are required to monitor, and lifestyle changes will need to be maintained to prevent weight gain. We can refer to appropriate clinics if you wish to consider this option.