Liraglutide for the treatment of obesity, a real life experience

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Background

Obesity, the 21st century’s epidemic, is a chronic condition associated with various medical complications and co-morbidities. According to recent studies, comorbidities can be significantly reduced by losing 5-10% of initial body weight. However, weight loss of this magnitude isn’t easy to accomplish and maintain solely by lifestyle modifications. Patients with obesity often require further medical support in the shape of pharmaceutical therapy or bariatric surgery for achieving better outcomes. The GLP-1 receptor analog liraglutide (Saxenda), was recently approved for use in weight reduction in obese patients.

Methods

In our obesity clinic at Rambam Medical Care Campus, we have prescribed liraglutide 3.0mg/day combined with lifestyle and dietary counselling for 153 obese patients, 12 were status-post bariatric surgery. 73 patients have completed at least 3 months of follow up, among them 33 patients completed 6 months of follow up. The recommended starting dose of liraglutide was 0.6 mg SC once a day, the daily dose was gradually increased to a maximal dose of 3.0mg/day. All patients were educated for lifestyle modification and followed for treatment adherence, weight change, and adverse effects by recurrent clinic visits and telephone calls.

Results

At baseline, mean age (±SD) was 44.7±11.8 years, 74% were females. Mean pre-treatment weight was 99.1±19.1 kg and mean BMI 34.8±5.3 kg/m². At week 12, the mean weight loss was 7.84±6.08 kg, (p<0.01). Weight loss was more significant in males compared with females, -9.86±7.92kg (-8.4%) and -7.14±5.19kg (-7.6%) respectively (p<0.01). After 3 months of follow up a total of 50 patients (68.4%) reduced at least 5% of their initial body weight, and 18 patients (24.6%) reduced at least 10% of their initial body weight. After 6 months of follow up, 29 patients (87%) and 18 patients (54%) reduced more than 5% and 10% of their initial body weight respectively. Amongst the 12 patients status-post bariatric surgery; 8 underwent sleeve gastrectomy, 3 gastric banding surgery and 1 gastric bypass. Mean weight before surgery was 117.5 kg, mean minimal weight after surgical intervention was 84.67kg followed by an average weight gain up to 109.6kg (absolute mean weight loss of 6.7%). Following liraglutide treatment, those patients achieved a mean weight loss of 7.8% within 3 months. Patients with previous comorbidities showed improvement in lipids profile and HbA1C levels. 37 patients (50%) developed mild adverse side effects mainly gastrointestinal (mainly mild nausea), and 9 of them (12.3%) stopped treatment before 3 months. No severe adverse effects were reported.

Conclusions

In our obesity clinic, a combination treatment of liraglutide 3.0 mg/day with lifestyle and dietary changes was associated with a significant weight loss, and minimal adverse effects.