

Medications could fill treatment gap for adolescents with obesity

January 25 2019



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Twelve independent pediatric obesity medicine and surgery specialists, led by experts at Boston Medical Center (BMC), outline an urgent need for evidence-based guidance on the use of obesity pharmacotherapy for

adolescents in the *Obesity* research journal. With almost one of five youth struggling with obesity, weight loss medications could be effective options to treat adolescent obesity that has not improved with other measures.

"There is an emerging population of adolescents 'stuck' in between lifestyle modification therapy and [bariatric surgery](#) for which obesity pharmacotherapy may be helpful," writes Gitanjali Srivastava, MD, corresponding author. Caroline Apovian, MD, of the Boston University School of Medicine and director of the Nutrition and Weight Management Research Program at BMC, is senior author.

In the manuscript, the authors review published data about pediatric obesity pharmacotherapy and discuss the risks of prescribing, to youth, obesity medications that are approved for adults. They also recommend that any obesity medications for adolescents be prescribed only by well-trained experts in an interdisciplinary team environment with conscientious monitoring and advocate for more research resources for pharmacological intervention trials in youth.

Pediatric obesity is linked to many poor health outcomes both in youth and adulthood, including diabetes, sleep apnea, [liver disease](#), [high blood pressure](#), muscle and bone problems, heart disease, and mental health problems. Obesity during adolescence can even predict how likely an individual is to die from diabetes in his or her sixties. Common treatments for obesity in adolescents include lifestyle interventions and weight reduction surgeries, but, according to the authors, medications for [weight loss](#) remain relatively underutilized.

Pediatric obesity is an emerging field, and there are no official guidelines to help clinicians manage patients with medications that were originally introduced in the adult population.

In *Obesity*, the authors provide guidance on current best practices in using obesity medications in pediatric populations and review 10 medications for this purpose. Interventions for healthy eating and exercise should still be trialed first and continued concurrently with [medication](#) therapy later on. Adolescents with severe obesity or those who have obesity-related medical conditions would be appropriate candidates for weight loss medications, and patients and family members should actively participate in decisions to start medications, being fully aware of the [potential risks](#) and benefits. Some weight loss medications are not yet FDA-approved for pediatric use, necessitating careful discussion of potential side effects. Special considerations of side effects, such as potential impacts on growth and puberty, apply to the pediatric population.

"We hope this opinion piece on pediatric obesity pharmacotherapy will be followed by more clinical trial data, specialized pediatric obesity medicine training programs, the development of protocols and screening tools, and ultimately formal recommendations on the clinical use of medications to treat pediatric [obesity](#)," said Srivastava.

More information: Gitanjali Srivastava et al, Clinical Considerations Regarding the Use of Obesity Pharmacotherapy in Adolescents with Obesity, *Obesity* (2019). [DOI: 10.1002/oby.22385](https://doi.org/10.1002/oby.22385)

Provided by Boston Medical Center

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