

DRUG THERAPY

Should I consider taking medications?

Drug therapy is helpful for some obese patients, in combination with diet and exercise. The decision to initiate drug therapy should only be made by a doctor after careful evaluation of risks and benefits.

GOALS OF DRUG THERAPY:

- Weight loss should exceed 5 lbs during the first month of drug therapy in order to be considered effective
- In drug studies, weight loss of 10-15 percent of your body weight is considered a good response and weight loss of greater than 15 percent is considered an excellent response
- It is unrealistic to expect the outcome to be a return to ideal body weight
- Currently available:
 - ORLISTAT (XenicalTM)
 - SIBUTRAMINE (MeridiaTM)
 - PHENTERMINE
 - DIETHYLPROPION
 - PHENDIMETRAZINE

SHOULD I CONSIDER SURGERY?

Surgery for weight reduction (also called bariatric surgery) is only recommended for severely obese patients who have not had success with diet, exercise, and medication.

Two surgeries are recommended by the National Institute of Health as a result of an expert panel meeting:

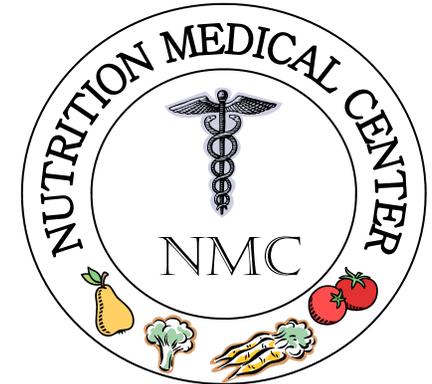
- Vertical Banded Gastroplasty
- Roux-en-Y Gastric Bypass

Many other surgical procedures are available today, but their long-term safety and effectiveness are unknown:

- Lap Band[™]
- Biliopancreatic Diversion with Duodenal switch



PATIENT INFORMATION



WEIGHT MANAGEMENT PROGRAM

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Obesity is a major medical problem and Americans are among the heaviest in the world. Obesity is associated with many medical conditions, most of which will improve with weight

WHO SHOULD CONSIDER A WEIGHT MANAGEMENT PROGRAM?

MEN AND WOMEN WHO ARE AT INCREASED RISK FOR THE FOLLOWING:

- Diabetes Mellitus
- Hypertension (High Blood Pressure)
- High Cholesterol
- Coronary Artery Disease
- Stroke
- Sleep Apnea

Those with:

A Body Mass Index over 25 kg/m^2

BMI ➤	25	26	27	28	29	30	31	32	33
	w e i g h t (lbs)								
height 5'6"	155	161	167	173	179	186	192	198	204
5'7"	159	166	172	178	185	191	198	204	211
5'8"	164	171	177	184	190	197	203	210	216
5'9"	169	176	182	189	196	203	209	216	223
5'10"	174	181	188	195	202	209	216	222	229
5'11"	179	186	193	200	208	215	222	229	236
6'0"	184	191	199	206	213	221	228	235	242

HOW SHOULD WEIGHT LOSS BE APPROACHED?

No one should begin a weight loss program without a doctor's advice. A doctor can help the patient choose the appropriate treatment plan, monitor progress and provide advice and support along the way.

SHOULD THERE BE A WEIGHT LOSS GOAL?

It is important for you and your doctor to set goals for weight loss. The patient's first goal should be to prevent further weight gain. The doctor's first goal is to identify a realistic weight loss goal for the patient. In general, most patients have a "dream" weight that is well below a realistic level.

Many people find that although they initially lose weight with any given diet, they quickly regain the weight after stopping. Because long-term weight reduction is so difficult, it is essential to have as much information and support as possible.

TYPES OF TREATMENT

Depending upon a person's risk factors, Body Mass Index, and personal preferences, a doctor will suggest a combination of diet, exercise, behavioral modification and in some cases, drug therapy. Surgery is only indicated in treating severe obesity that has not responded to other treatments.

DIET THERAPY

Conventional weight reduction diets provide at least 800 calories a day. These diets fall into four major groups:

- Balanced low calorie diets
- Low carbohydrate diets
- Low-protein diets
- Fad diets (these are diets that involve unusual food combinations or eating foods in a particular order)

A calorie in is a calorie in. Beyond calorie restrictions, there has been no scientific evidence to suggest which diet programs are more superior in terms of weight reduction and weight maintenance.