

Prescription Drugs Impact on Weight Status

Selective Serotonin Reuptake Inhibitors:

<u>Use:</u> Depression, obsessive compulsive disorder, social anxiety disorder, and eating disorders. <u>Impact:</u> Initially may cause decrease appetite and weight loss, long-term causes weight gain.

- Fluoxetine (Prozac)
- Paroxetine (Paxil)* (Shown to have greatest weight gain.)
- Fluvoxamine (Luvox)
- Citalopram (Celexa)
- Sertraline (Zoloft)

Atypical Antidepressants:

Use: Depression.

Impact: Weight gain is dependent on dose and duration of therapy

- Venlafaxirie (Effexor)- reports of both weight loss and weight gain
- Mirtazapine (Remeron)
- Nefazadone (Serzone)
- Buproprion HCL (Wellbutrin)- a CNS stimulant and is not associated with weight gain, and may cause weight loss
- Trazadone (Desyrel)

Tricyclic Antidepressants:

Use: Depression, sleep and pain disorders, and depression.

<u>Impact:</u> Weight gain is dependent on dose and duration of therapy. Factors causing weight gain include histamine and alpha 1-receptor actions and increased craving for carbohydrate and possible slowing of metabolism. *Shown to have greatest weight gain.

- Amitriptyline (Elavil)*
- Amoxapine (Ascendin)
- Nortriptyline (Aventyl, Pamelor)
- Doxeprn (Adapin, Sinequan)
- Imipramine (Janimine, Tofranil)*
- Desipramine (Norpramine, Pertofrane)
- Trimipramine (Rhotramine, Surmontil)
- Clomipramine (Anafranil)
- Protriptyline (Vivactil)

Monamine Oxidase Inhibitor:

Use/Impact: Similar to tricyclic antidepressants.

- Isocarboxazid (Marplan)
- Phenelzine (Nardil)
- Tranylcypromine (Parnate)

Anticonvulsants/Mood Stabilizers:

Use: Bipolar disorder and some forms of depression.

Impact: Dose dependent. Can cause hyperinsulinemia leading to weight gain.

- Divalproex (Depakote)
- Carbamazepine (Tegretol)
- Lamotrigine (Lamictal)
- Gabapentin (Neurontin)
- Toprimate (Topamax) May cause weight loss.
- Lithium

Antipsychotics:

Use: psychosis, depression

<u>Impact:</u> Proposed that serotonin blockade may increase food intake, possible effect on insulin resistance. *Shown to have greatest weight gain.

- Thioridazine (Mellaril)
- Haloperidol (Haldol, Peridol)
- Molindone (Moban)
- Clozapine (Clozaril)*
- Olanzapine (Zyprexa)*
- Sertindole (Serlect)
- Risperidone (Risperdal)
- Quetiapine (Seroquel)
- Ziiprasidone (Zeldox)

Steriods:

Impact: Dose dependent and mechanism on metabolic pathway.

- Corticosteriods/Glucocorticoids (hypercortisolaemia leading to increase appetite and hyperinsulinemia)
- Megestrol Acetate (stimulates appetite and weight gain)
- Estrogen

Antidiabetics:

- Insulin
- Sulfonylureas -only those that enhance endogenous insulin release, eg, Chlorpropamide (Diabinese) and Glyburide (DiaBeta, Glynase, Micronase)

Adapted from Bray GA. Contemporary Diagnosis and Management of Obesity. Newton, Pen: Handbooks in Health Care Co., 1998 and Millicent Lasso-Meeks, MS, RD, CEDS. Weight gain liabilities of selected psychotropic and seizure disorder medications Part I, draft (in press). Provided at ADA Weight Management Certification Course.