

Fit Facts™

FROM THE AMERICAN COUNCIL ON EXERCISE®

DIET PILLS HARD FOR SOME TO SWALLOW

Have you heard about the fen/phen phenomenon that's sweeping the nation? So many prescriptions were written for fen/phen in 1996 that the manufacturer had difficulty supplying enough to meet the increased demand. Or how about Redux, the latest diet pill to receive FDA approval, which consumers are frantically buying at the rate of \$20 million worth per month. Thousands of Americans are popping pills to try and win the never-ending battle of the bulge. But are these pills really an ally, or just another detour on the road to better health?

With the current popularity of fen/phen (a regimen of two diet pills: fenfluramine and phentermine) and its single cousin Redux (also known as dexfenfluramine), it's clear that diet pills are back in a big way. Many will recall that the diet pills of the 1960s and 1970s were composed primarily of highly addictive amphetamines, and have now gone the way of the dodo. But some of that lost luster has returned to shine upon the latest diet pills to hit the market.

A GREATER UNDERSTANDING OF OBESITY

The difference between the pills of the 1990s and those of years past reflects our greater understanding of obesity — keeping the weight off is no longer viewed as a matter of willpower. The latest pills are designed to be taken for longer periods of time, and work by altering the chemistry of the brain — something we can't do on our own.

So what's all the fuss about? Fenfluramine (brand name Pondimin), a drug similar to Prozac, suppresses the

appetite by inhibiting the reuptake of serotonin, a general mood regulator, in the brain. In doing so, fenfluramine elicits the same feeling you get after eating carbohydrate-rich foods. Phentermine (brand name Ionamin) signals the release of dopamine and norepinephrine, two messenger chemicals in the brain that are responsible for alertness.

Redux Recommendations

Many obesity specialists, such as Dr. Ross Andersen, assistant professor of medicine at Johns Hopkins University, believe diet pills should be prescribed as a last resort after all other attempts at weight loss have failed. Furthermore, these drugs should only be taken by those who are 30 percent or more over their desirable weight. Below are sample weight ranges of individuals for whom diet-pill therapy may be appropriate.

HEIGHT	>30 PERCENT OVER IDEAL WEIGHT*
5' 4" woman	>143 to 169 pounds
5' 7" man	>175 to 201 pounds

*Depends on frame size



Together, these drugs bring about a metabolic boost that helps people lose and control their weight. Taken alone, however, neither are very effective.

Redux also works its magic by inhibiting the reuptake of serotonin so that it remains in the brain for longer periods of time. The body is tricked into feeling full and satisfied, thereby reducing the desire for food.

The main problem with all these drugs is that as soon as you stop taking them, they stop working and the weight generally comes back. That's why it is so important they be administered in conjunction with a comprehensive weight-management program that addresses the problems that contributed to the weight gain in the first place.

NOT FOR EVERYONE

Although many people are rushing out to have their physicians write them a prescription for either the fen/phen combo or Redux, they should be warned that these treatments are designed for those who have a lot of weight to lose. Despite what some advertisers might say, these drugs are not designed for people who are only slightly overweight (distributors of Redux are coming under fire for marketing so heavily to individuals who want to lose just a few pounds). Nor do they offer a cure for obesity. But, when taken in conjunction with a weight-management program, diet pills such as these may be the best option for those whose weight places them at serious risk for disease.

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