

## **Slimming pills: do they work?**

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February 7 2009 12:00AM

# **We spend £47m a year on slimming tablets and diet aids. As a new drug hits the market what is its real potential?**

A magic pill that makes you slim with no side-effects would be the 21st century's goose that lays the golden egg. With 13 million people forecast to become obese by 2010, the market for a miracle cure is huge. Dieters spent £47million last year on pills and diet aids, just one segment of an industry with a turnover of £1 billion a year. It's no wonder that so many companies want to jump on this lucrative bandwagon.

"I achieved the impossible," ran the headline after a woman in America claimed that Alli, an anti-obesity drug to be made available in British pharmacies this spring, had enabled her to lose 4st (25.4kg) in 18 months.

Last week came the news that we're using eight times the number of slimming tablets than we were seven years ago. But their ingredients do not include miracles. The singer Kelly Osbourne checked into rehab last week, rumoured to be addicted to weight-loss pills. And the news that Alli will be available over the counter in the UK has also sparked tales of bouts of diarrhoea from those who have tried it, and warnings from doctors that weight loss with the drug is likely to be small and will occur only if people also make big changes to their lifestyles.

This follows concerns from consumer groups that other types of slimming pills, sold at healthfood shops as herbal remedies and supplements, are for the most part useless. Loopholes in British regulation allow the makers of such pills to make claims about weight loss that are scientifically unsubstantiated. Then there are pills that are available online, subject to no controls and sometimes dangerous.

The concept of taking a pill to lose weight permanently is at best misleading and at worse a scam, many British weight experts say. However, we are constantly prey to marketing. Gareth Williams, Professor of Medicine at Bristol University, has written in the British Medical Journal about his concern that obesity drugs such as Alli will have minimal impact because people have unrealistic expectations, thinking that pills do the work without the need to make necessary lifestyle adjustments.

"All these preparations are peddled as miracle answers to what is an intractable lifelong problem," he says. "People see them as clever solutions that scientists have come up with, and when they're available over the counter in chemists, they're perceived as even more

miraculous, more innocuous, sitting alongside the paracetamol.”

The new Alli tablets, made by GlaxoSmithKline, are a version of a prescription drug that has a good safety record and has been shown to help short-term weight loss when patients are supervised by doctors. They will become the first licensed medicine for weight loss available over the counter, joining a confusing array of herbal diet pills and supplements. Many come with impressive claims on weight loss. A product called Chitosan, derived from the shells of shrimps, is available from hundreds of outlets, including Holland & Barrett, and is marketed on one online pharmacy as “a proven safe and effective way to control your fat intake”. Yet the trials on which these claims are based were not independent and studies since have indicated that Chitosan has little or no effect on controlling fat or weight.

An analysis by the consumer body Which? of eight herbal/supplement slimming pills available in health shops and pharmacies last year concluded that six did not work. Three might possibly have some effect on weight, but there was no robust evidence to support this.

Lipobind, for example, produced by Goldshield, is claimed to be a “clinically proven fat binder”, which “helps with decreasing food cravings, suppressing appetite and lowering blood cholesterol”. The panel of experts, which included a dietitian, a pharmacist and a doctor, concluded that evidence supporting the claims was thin and that the pills were, in effect, an expensive bulking agent.

Which? advised against taking any of the pills, saying that they could be expensive and could have side-effects such as diarrhoea, reduction of vitamin absorption and increased blood pressure.

Why are manufacturers allowed to make these claims? Because most diet pills available from shops are not licensed as medicines and, therefore, are not subject to strict controls. They are controlled by food regulations, so are subject to far fewer rigorous controls over claims of what they can do. You can get some clues from the label: if it states that the product is a “food supplement”, this indicates that it has not been subject to the same scrutiny as a medicine.

John Blenkinsopp, a doctor and pharmacist who was a member of the assessment panel, says that he has some sympathy for drug companies, which have to spend millions demonstrating the safety and efficacy of products such as Alli, while other products can claim miraculous effects on the basis of little research.

“It’s even worse if you go on the internet, where you have no protection and you don’t know what you are buying,” he says. Products purchased on the internet, unlike in shops, are not necessarily governed by British law. In December American medicine authorities warned about 28 types of fat-buster pills available online that could land users in hospital. Many of the products originated from China and contained dangerous amounts of a powerful appetite suppressant called sibutramine, which can cause heart attacks if used

incorrectly. Dr Ian Campbell, the medical director of the charity Weight Concern, was on the Which? panel and says that almost all non-prescription slimming pills create the impression that they are a magic bullet and understate the necessity of changes to eating and exercise habits for long-term success. With Alli coming on the market in pharmacies, he says, it is important to make a distinction between this and the food supplement slimming products available over the counter, a distinction that might not be obvious to customers. The evidence for Alli is good, Campbell points out, with trials indicating that people taking it in addition to a low-fat diet have lost 50 per cent more weight than dieting alone.

“The trouble is that when it’s available over the counter people will take it ad hoc and not as part of a diet. They could have unpleasant side-effects, and give up, and it will be another thing that’s failed. They’ll have lost money [Alli costs £1 a day] and will feel more despondent.” If pharmacists make sure that the right people get the drug, and are properly supported, some people might lose weight with it, he adds.

But even if this particular diet pill does help some to lose weight in the short term, there’s virtually no evidence that it will help to keep them slim. According to Campbell, the research indicates that the single most successful strategy for losing weight and keeping it off is not diets, or slimming pills, but cognitive behavioural therapy; having counselling to understand why you eat, why you don’t exercise, and how to think differently about these things. Pills don’t change the reasons you overeat.

That’s why Professor Robert West, from the Health Behaviour Research Centre at University College London, believes that, for all their superficial allure as a quick fix, slim pills can fix things only temporarily. Something else has to happen to make you keep the weight off. “If you want long-term weight loss, something major and structural has to change in your life,” he says. “That’s going to be either gastric surgery, which for most of us is not an option, or something changing in your head. If that doesn’t happen, you are inevitably going to give way to all those pressures to eat, or not exercise, that we’re subject to every day. Something has to click in your head that says, This a new rule for the rest of my life, and it’s going to work because it’s part of who I am.’ ”

Professor Williams, the editor of the forthcoming book *Obesity: Science to Practice* (Blackwell) agrees that slimming pills are ultimately a distraction from the serious business of losing weight long-term. “Obesity is a life sentence, and even if a drug like Alli works for a couple of years, the dent it makes on your life and health is very small. We should be pedestrianising cities, building cycle tracks, getting people moving - not dumping all the responsibility on to a drug.”

## **Diet pills: the facts**

### **Diet pills divide into three groups**

**Pills licensed as medicines in the UK** Approved by the Government and rigorously tested for safety and effectiveness, these can normally be prescribed only by doctors to aid

weight loss in the severely overweight. The most commonly prescribed are sibutramine (which works by altering hunger messages to the brain) and orlistat (which prevents fat absorption). Alli, a version of orlistat, will be available from chemists without prescription this year - but theoretically only if you talk to a pharmacist.

### **Herbal remedies/food supplements**

Available from pharmacies and health food shops, there are many pills which are not licensed as medicines, including ingredients which (for example) are supposed to increase your metabolic rate or reduce the amount of fat you absorb. These have been less rigorously tested, and can make claims about weight loss on the basis of little research, but are still subject to British/European laws on safety and efficacy. They are generally available without talking to a pharmacist.

### **Slimming pills available on the internet**

Alongside many legitimate medicines, the web offers dozens of unregulated, potentially dangerous products. Some are powerful drugs, many originating from Asia, which without supervision by a doctor can cause addiction, and devastating physical and psychological side-effects. Others will be useless. All can make claims based on little evidence.

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