

Questions and answers for recommendation to suspend sibutramine (Reductil) from the EU market

What is Reductil?

Reductil is a medicine that contains the active ingredient sibutramine. It is available as capsules (10mg and 15mg).

What is it used for?

Sibutramine is used to help patients who are obese or overweight to lose weight. The medicine should be used together with a low calorie diet and an exercise regime.

Who does it treat?

Sibutramine is used to treat adult patients who are obese with a body mass index (BMI¹) greater than or equal to 30 kg/m² or those who are overweight with a BMI greater than or equal to 27 kg/m² with additional risk factors such as type 2 diabetes or dyslipidaemia (abnormal levels of fat in the blood). Sibutramine is not recommended for use in children or adolescents younger than 18 years of age, in adults older than 65 years of age or in patients with a history of cardiovascular (heart and circulatory) disease.

How does it work?

Sibutramine is a serotonin and noradrenaline reuptake inhibitor. It works by preventing the neurotransmitters serotonin, noradrenaline and (to a lesser extent) dopamine from being taken back up into nerve cells in the brain and spinal cord. Neurotransmitters are chemicals that allow nerve cells to communicate with one another. By blocking the re-uptake of these neurotransmitters, sibutramine makes the individual feel full sooner, so that less food is eaten.

What are the known possible side effects listed in the product information?

Sibutramine may cause increases in blood pressure and heart rate, irregular heart beats such as fluttering of the heart, breathing problems, chest pains, swollen ankles, unusual bleeding or bruising, hypersensitivity (allergic-type) reactions, trouble sleeping, constipation, dry mouth, anxiety, nausea, headache, "pins and needles" feeling, hot flushes or sweating.

What are the newly identified risks?

A recent unpublished study, the **Sibutramine Cardiovascular OUTcomes (SCOUT)** study, compared sibutramine treatment plus diet and exercise with that of placebo (dummy pill) plus diet and exercise in approximately 10,000 patients with known or high risk for cardiovascular disease over a six year period. The results of the study showed that patients treated with sibutramine experienced a 16% increased risk of cardiovascular events such as myocardial infarction (heart attack) and stroke compared with placebo-treated patients (hazard ratio 1.161 [95% CI 1.029–1.311]; p=0.016). The study also showed that the mean (average) weight loss achieved with sibutramine was modest, with sibutramine decreasing body weight by 3.5 kg compared with 1.6 kg on diet and exercise alone over the course of the study.

When was Reductil licensed and by whom?

Reductil was licensed in the UK by the MHRA on 3rd July 2001

Why has the decision been made to suspend Reductil from the UK market?

¹ Body mass index (BMI) is a number calculated from a person's weight and height

The CHMP has recommended that the marketing authorisations for sibutramine should be suspended because it considered that the risks of the medicine outweigh its benefits.

Why do the risks outweigh the benefits?

Within all studies (including SCOUT) the mean additional weight loss achieved with sibutramine was modest, with sibutramine decreasing body weight by approximately 2-4 kg more than placebo; moreover this weight loss may not be sustained when treatment is stopped. However, in the high risk SCOUT population, sibutramine treatment increased the risk of a patient having a heart attack or stroke by 16%. As a key aim of medicines to treat obesity is to decrease the risk of cardiovascular-related conditions, and as the results from SCOUT are considered relevant to normal clinical use, the risks with sibutramine outweigh the benefits.

What is the advice for healthcare professionals and GPs?

In January 2010 the European Medicines Agency (EMA) completed a review of sibutramine on the basis of new safety information from the SCOUT study that found that the cardiovascular risks of sibutramine outweigh its benefits. The EMA's Committee for Medicinal Products for Human Use (CHMP) recommended suspension of the marketing authorisation for this medicine across the European Union.

Doctors are advised not to issue any new prescriptions for sibutramine, and should review the treatment of those who are currently taking this medicine. Pharmacists should not dispense any prescriptions for sibutramine and should advise patients to make an appointment to see their doctor at the next convenient time.

Where can people find additional information if they need it?

Further information is available on the EMA website at www.ema.europa.eu

What is the bottom line key message for patients?

A recent large study, the SCOUT study, involving 10,000 high cardiovascular risk patients has shown that sibutramine (Reductil) treatment together with diet and exercise increases the risk of heart attack and stroke by 16% compared with diet and exercise alone.

Patients who are currently being treated with sibutramine should be advised to schedule an appointment at the next convenient time with their doctor to discuss alternative measures to lose weight, including use of diet and exercise regimes. Patients who wish to stop treatment before seeing their doctor can do so at any time.