Benefit/Risk Evaluation

Louis J. Aronne MD, FACP

Clinical Professor of Medicine Weil Cornell Medical College

Director, Comprehensive Weight Control Program New York Presbyterian Hospital - Weill Cornell Medical Center

Rimonabant: Benefit and Risk

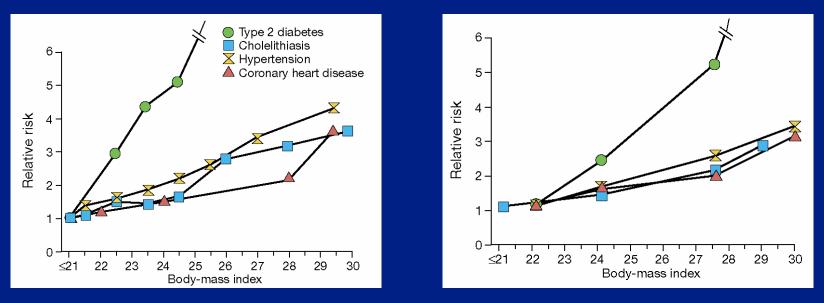
- Therapeutic need
- Benefits of treatment
- Risks of treatment
 - screening
 - identifying
 - managing
- Benefit/risk assessment



Rimonabant Addresses a Medical Need

- Obesity is a leading cause of both diabetes and heart disease
- Current treatments for diabetes and heart disease don't address the underlying obesity

Women



Men

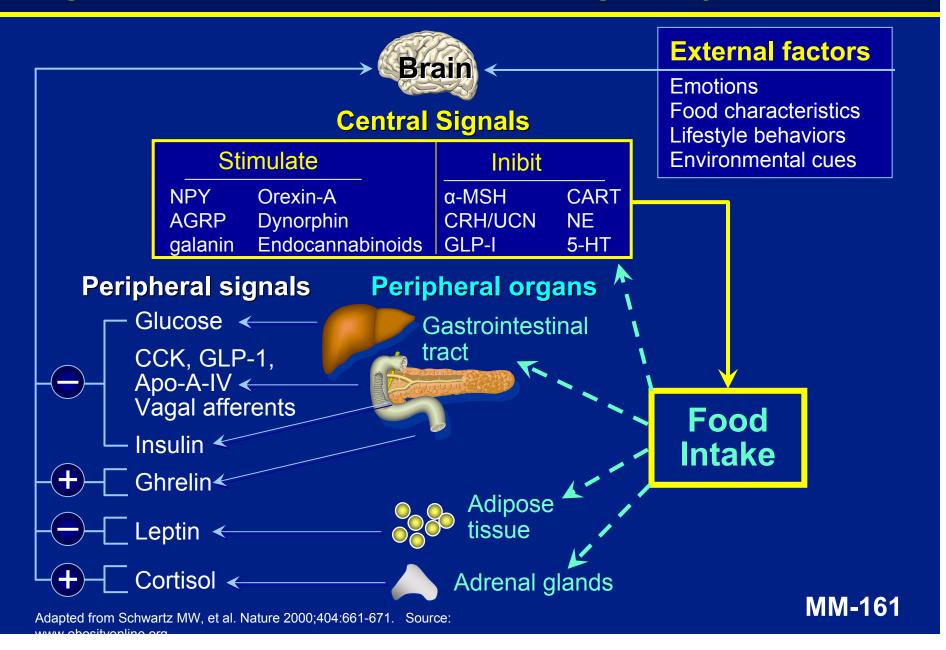
- AHA/ADA Statement on Prevention of CV Disease in DM
 - Risk factor assessment should include obesity
 - Risk factor reduction should include weight loss in obese and overweight patients

Treatment Options

Therapy	Example of Risk		
No Treatment	Development of type 2 diabetes, CVD		
Non-prescription, Herbal, Dietary Supplements	Limited evidence of safety and efficacy		
Diet, Exercise, Behavior	Treatment of choice, but high rate of relapse		
Pharmacotherapy	Orlistat and Sibutramine		
Gastric Banding Surgery	BMI \leq 35 Nausea, reflux, 8% re- operation, 0.4% mortality		

McBride BF, et al. *JAMA*. 2004;291(2):216-221. Nisoli E, Carruba MO. *Obes Rev.* 2000;1(2):127-139. Klein S. Gastroenterology 2002;123:882–932. Angrisani L et al, *Obesity Surgery*, 2004,**14**, 415-418. The Lap-Band® Adjustable Gastric Banding System Summary of Safety and Effectiveness Data. <u>http://www.fda.gov/Ohrms/Dockets/Ac/05/Briefing/2005. http://www.fda.gov/ohrms/dockets/ac/00/transcripts/3625t1.rtf</u> (Full transcript) Accessed June 7, 2007.

Weight is Controlled by a Complex Feedback System: Weight Loss Itself Provokes Counterregulatory Responses



Benefits of Rimonabant

- Sustained weight loss up to 2 years
- Body weight and traditional risk factors
 - Triglycerides
 - HDL cholesterol
 - Markers of inflammation
 - IWQoL
 - In diabetes
 - Glucose
 - HbA1C



Rimonabant Risk Assessment

- Safety profile characterized in clinical trials
 - 3 body systems:
 - psychiatric
 - central nervous system
 - gastrointestinal
- Psychiatric adverse events of interest
 - depression
 - anxiety



Incidence of Side Effects Within Class

Sibutramine Prescribing Information

	Sibutramine	Placebo
Nausea	5.9%	2.8%
Depression	4.3%	2.5%
Anxiety	4.5%	3.4%

Orlistat Prescribing Information

	Orlistat 120		Placebo
Neuros	Yr 1	8.1%	7.3%
Nausea	Yr 2	3.6%	2.7%
Depression	Yr 1		
	Yr 2	3.4%	2.5%
Anxiety	Yr 1	4.7%	2.9%
	Yr 2	2.8%	2.1%

Rimonabant (Obesity Program)

	Rimonabant	Placebo
Nausea	13.6%	4.7%
Depression	3.9%	1.7%
Anxiety	5.9%	2.1%

Validated 2-question Initial Screening Test for Depression

During the past month:

- 1. Have you often been bothered by feeling down, depressed, or hopeless? Yes No
- 2. Have you often been bothered by little interest or pleasure in doing things? Yes No

*Interpretation: Positive screen for depression is answering "Yes" to either question and triggers additional assessment

> Sensitivity: 83% for Major Depression Specificity: 92% for Major Depression

Kroenke K, Spitzer RL, Williams JB. The Patient Health Questionnaire-2: Validity of a two-item depression screener. Med Care 2003;41:1284-92.

MM-165

Rimonabant Benefit-Risk Conclusion

- An addition to the armamentarium of tools for managing obese patients with health problems
 - Addresses pathophysiology of obesity and its metabolic consequences
 - Reduces body weight and improves multiple risk factors; improves quality of life
 - Should reduce risk of Type 2 DM
- Safety profile defined, further evaluation continues in outcome trials and pharmacovigilance
- Plan for minimizing risk
 - Education of patients, healthcare providers
 - Screening for depression, suicidality
 - Strategy for monitoring, management