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TREATMENT OF WASTING

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Wasting, particularly loss of lean body mass (LBM), is associated with reduced survival, accelerated disease progression, and impaired quality of life in patients with HIV infection. A variety of pharmacologic and non-pharmacologic treatments for wasting, including appetite stimulants, cytokine suppressors, protein anabolic agents, and progressive resistance exercise, have been evaluated.

APPETITE STIMULANTS: Treatment with megestrol acetate produced significant increases in energy intake and body weight in placebo-controlled trials in patients with wasting, but increases in weight are predominantly or exclusively fat. Dronabinol (synthetic tetrahydrocannabinol) has improved self-reported appetite but has not produced significant weight gain in controlled studies.

RECOMBINANT HUMAN GROWTH HORMONE (rhGH): In a placebo-controlled trial, treatment with rhGH resulted in a significant and sustained increase in weight that was accompanied by an even greater increase in LBM and a decrease in fat, as well as improvement in treadmill work output. Preliminary data suggest that short-term rhGH treatment may be effective in mitigating weight loss in patients with secondary infections.

ANABOLIC STEROIDS: Replacement doses of testosterone have produced modest increases in weight and LBM in men and women with wasting and lower-than-normal testosterone levels. Two oral agents, oxandrolone and oxymetholone, can increase weight, but their effects on LBM in placebo-controlled trials have not been reported. Open-label studies of nandrolone decanoate suggest that this injectable agent can also increase weight and LBM.

PROGRESSIVE RESISTANCE EXERCISE: Open-label studies have demonstrated that initiation of supervised progressive resistance exercise, either alone or in combination with anabolic steroids, can increase LBM and improve functional performance in patients with HIV infection.

SUMMARY: Taken together, these studies demonstrate that HIV-infected individuals can regain weight and LBM under the proper therapeutic circumstances. The effects of reversal of wasting on survival and disease progression, long-term safety, and the potential value of these therapies in the treatment of fat redistribution remain to be determined.

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