

Liraglutide use in patients who have regained weight after bariatric surgery: The first Australian experience

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Introduction: Significant weight regain is estimated to occur in 15-20% of patients who have had bariatric surgery, with few therapies proven to assist with further weight loss.

Objective: The aim of this study was to investigate the efficacy and tolerability of liraglutide as an adjunct to bariatric surgery in patients with weight regain.

Methods: We performed a retrospective audit of patients who had a primary bariatric procedure performed and had regained 15% of initial weight loss post primary bariatric surgery. Patients were prescribed liraglutide (1.8- 3.0mg /day up to 28 weeks) between March to November, 2016. Patients were followed up after 1, 4 and 7 months of liraglutide treatment.

Results: Data were available from 32 patients (25 females; mean age 43 ± 11 years, initial BMI = 49.6 ± 19.3 kg/m²) who had undergone LSG (n=20), LAGB (n=11) and RYGB (n=1). Bariatric surgery induced a median weight loss of -33.0% (range -53.3 to -8.6%). Liraglutide commenced a median 1.1 year after surgery (range 0.1-11.1 years) with significant %body weight loss after 1 (median=-2.7%, n=29), 4 (median= -5.3%, n=25) and 7 months (median=-7.2%, n=9) (all 0.001). 50% of patients tolerated liraglutide, although 50% (16/32) of patients discontinued liraglutide due to side effects (n=8), insufficient weight loss (n=5), cost (n=7) and other (n=1).

Conclusion: Liraglutide can be used effectively as an adjuvant to induce a further 5-10% weight loss in patients who have regained weight after bariatric surgery, and is an overall well-tolerated pharmacotherapy. Follow-up of patients on liraglutide treatment is ongoing.