term basis in order to help the patient establish habit patterns, or become involved in behavioral programs which would foster long-term weight reduction.

The main question in evaluating anorectic drugs is not just their therapeutic effectiveness, but also the trade-off against the abuse poten-

tial of these compounds.

In a later section of this statement, we will discuss the point that the toxic impact of amphetamine-like stimulants on the individual, and indeed on society, is significant.

We should strongly encourage attempts to reduce the use of com-

pounds with potent stimulant properties.

Another major question is whether there are anorectic drugs which have less of the stimulant abuse potential but which are still effective anorectics.

At this point it should be stated that none of the anorectics have been proven to be absolutely free of some form of abuse potential, yet there may be a new group of relatively nonabused anorectics emerging; that is, the ring-substituted amphetamine analogues.

Now, I am not going to go into the chemical makeup of these substitute compounds, except I think the evidence is accumulating that

they may be different than the chain substituted compound.

To date, the side-chain substituted amphetamine analogues, when tested in self-administration animal models, and in other tests for stimulant properties, all appear to have some stimulant potency.

Although weaker than dextroamphetamine and methamphetamine, as well as phenmetrazine, these compounds would appear to have suf-

ficient stimulant properties to be abused by some individuals.

Conversely, the major dependent abuse cycles have not been established with most of these compounds as has been noted with the above

primary stimulants.

The ring-substituted amphetamine analogues, fenfluramine and chlorphentermine, are amphetamine congeners which have anorectic effects apparently without major psychostimulant or sympathomimetic effects, that is, cardiovascular stimulant effects.

When tested in man, these drugs instead of producing a stimulant

effect, appear to have more sedative properties.

Studies using drug abusers to test for euphoric and arousal effects indicate that they do not perceive fenfluramine or chlorphentermine as having the euphoric and arousal effects in the same way as most CNS stimulants.

A word of caution is needed for fenfluramine, in that high doses induced psychotomimetic effects—Griffith, 1976; Gotestam and Gunne, 1972—that is, visual and olfactory hallucinations—Griffith, Nutt and Jasinski, 1975—rapid mood swings, distorted time sense and fleeting paranoia.

The psychotomimetic effects of fenfluramine should be evaluated carefully since there is one report in the literature—Levin, 1973—indicating that a South African group of drug abusers had used this

compound for its hallucinogenic properties.

Remember, we are talking about a very high dose usage of this

 ${f compound.}$ 

There have not been similar reports, to my knowledge, in the United States.