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Usually, the weight loss amounted to one pound per week more than a simple diet alone with placebo. For the most part, the researchers at the FDA felt that the majority of the studies were well done, especially those accomplished on the basis of three- and six-week studies. The one-year studies were not well-controlled and did not have good follow-up. A word of caution is needed in that these studies are based on the short-term effects of weight reduction, and if one follows any type of treatment program for obesity for any length of time, the task of keeping weight down in these individuals is extremely discouraging. Most researchers (Stunkard and McLarenhume, 1959; Penick, 1969) report that only a small percentage of patients maintain their weight loss at the end of a year. Others (Penick, 1969) have cautioned against the total pessimistic view, in that treatments may have been effective in helping overweight patients from gaining even more weight. There is no hard data to support the issue one way or the other, and one could certainly conceive of anorectic drugs being used on a short-term basis in order to help the patient establish habit patterns, or become involved in behavioral programs which would foster long-term weight reduction.

Therapeutic Effects Weighed Against Abuse Potential

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