## 26<sup>th</sup> World Nutrition Congress

&

## 15th Euro Obesity and Endocrinology Congress

June 17-18, 2019 London, UK

## An audit project on the prescription and monitoring of Orlistat (Xenical) in London general practice

**Kalid Abdi Karim** King's College London, UK

**Aims & Objectives:** An audit to assess the adherence of General Practitioners (GPs) to national guidelines for the prescription and monitoring of Orlistat (Xenical)

**Methods:** All patients currently taking Orlistat for weight-loss at one general practice in London were included in this study. We determined whether or not, as per national guidelines, BMI was calculated before prescribing Orlistat; whether or not patients had their weight measured 12 weeks after they were prescribed Orlistat; if medication was discontinued if less than 5% weight-loss was seen after 3 months. We used audit and feedback to reinforce change. One change made was an alert added to the online system once a prescription of Orlistat was made to remind the doctor to measure the weight/BMI within 10-16weeks. A presentation was given to all GPs on the correct method of prescription and follow-up and a letter sent to all patients on Orlistat who did not meet the criteria or have failed a trial of 3 months detailing why their prescription should end.

**Results:** We found that in 2016, 14 out of a total of 15 patients were prescribed Orlistat for weight loss purposes. 92% of patients had their BMI checked before commencing Orlistat. 50% of patients had their weight measured 10-16 weeks after treatment commenced. Orlistat was continued in 86% of patients who did not lose 5%< body weight. Following the audit in 2016, 12 out of 15 patients on Orlistat had their treatment discontinued due to not fulfilling criteria. A re-audit in 2018 revealed 11 patients currently taking Orlistat. 100% of patients were weighed and had their BMI checked before prescribing whilst 78% had their weight measured between 10-16 weeks after commencing Orlistat. The percentage of patients taking Orlistat if <5% weight-loss was seen dropped to 47%.

**Conclusions:** There is a need to optimize the prescription and monitoring of Orlistat in general practice. Replicating audits such as this in surgeries across the UK will not only avoid exposing patients to unnecessary side effects but also result in considerable savings for GP practices if medication is properly reviewed as per the guidelines. This practice saved over £1,440 /year.

kalidkarim1@hotmail.co.uk