Effect of Slimming Drips on Body Mass Index and Physical Appearance of Obese Population

Attiya Tareen¹, Uzma, Dost Muhammad Rajar², Asher Mashhood³

¹Department of Dermatology, Isra University Hospital, Hyderabad, Sind, Pakistan ²Department of Dermatology, Isra University Hospital, Hyderabad, Sind, Pakistan ³Department of Dermatology, Isra University Hospital, Hyderabad, Sind, Pakistan

Correspondence:

Dr Attiya Tareen attiyatareen@yahoo.com

Abstract

Objective: The purpose of this study is to determine the effects of slimming drip approach by mixing cartinex 1g/5ml, Liponex 300gm/12ml and Arginex 5g/10ml with a 500ml of normal saline being administered to patients for twice a week and to determine its effects on Body Mass Index and Physical appearance of patients after one month of intervention.

Methodology: A total number of n=400 participants were recruited. Informed consent was taken prior to induction and initial body mass index in kg/m2 was monitored.

Results: The findings of this study had revealed that slimming drip had significantly p<0.005 reduced the body mass index of the participants where the mean values of BMI before the start of treatment were 38.12±4.85kg/m2 that had been reduced to 34.49±5.36 after one month of treatment.

Conclusion: The study had concluded that slimming drip treatment had produced a beneficial effect on hormonal levels and patient's appearance.

Key words: Obesity, Body Mass Index, lipid metabolism

Cite this article: Tareen A, Rajar M.D.U, Mashhood A. Effect of Slimming Drips on Body Mass Index and Physical Appearance of Obese Population. BMC J Med Sci. 2023. 4(2): 21-26

Introduction

Obesity is a combination of health disorders, characterized by an excessive accumulation of body fat that gives rise to significant comorbidities, such as diabetes, hypertension, dyslipidemia, cardiovascular disease, and many cancers¹⁻². According to WHO Obesity is a worldwide epidemic, with an estimated 57.8% of adults worldwide expected to be classified as obese by 2030n3? According to the definition of Clinical Association of American Endocrinologist obesity is "Adiposity Based Chronic Disease (ABCD)" and is globally accepted as a medical condition and hence must be treated as per its severity ^{4,5}. There has been an exponential growth in the

prevalence of obesity over a period of last three decades where incidences are nearly double among adult and childhood population and triple among adolescent^{6,7}. The rising risk of obesity has created susceptibility for every individual irrespective of age, gender and demography8. Various management options are available to treat obesity that includes lifestyle modification, dietary.

Control, regular exercises, pharmacological therapies and surgical intervention^{9,10}. Multiple studies have suggested that lifestyle modification including dietary control and regular exercises are the primary component for managing obesity yet due to its time-consuming effects most of the obese individuals gets disappointment and

Authorship Contribution: ¹⁻³Substantial contributions to the conception or design of the work; or the acquisition, data analysis, drafting the work or revising it critically for important intellectual content, Final approval of the version to be published & supervision

Funding Source: none Conflict of Interest: none Received: August 3, 2023 Accepted: December 15, 2023 Published: December 20, 2023 halt to adhere with obesity control plan¹¹. Moreover, receptivity to perform exercises among general population is also poor; mainly due to substantial commitment of time associated in performing these exercises hence it is therefore most of the obesity control programs have pharmacological treatment option embedded so that early response of treatment program can be achieved¹²⁻¹³. According to an Australian-based concept of multimodal management, obesity is classified as a disease that threatens the life expectancy, thus making it obligatory to be treated within the standard healthcare system and recommended combination therapeutic strategies to be designed for obese population to improve adherence and provide desirable outcome¹⁴⁻¹⁵. In this context a study was performed to identify the dosage of exercises in which it was observed that exercises alone produced a small volume of weight loss and therefore to improve response fat metabolism boosting therapeutic strategies must be incorporated to achieve desirable goals in quick time¹⁶⁻¹⁷. A number of studies are available on data search in which different pharmacotherapy are used like phentermine, naltrexone and liraglutide as a second tire treatment approach for obesity¹⁸⁻¹⁹. but research to determine the effects of slim drip therapy in stimulating fat metabolism among obese population are scarce. Hence in this study the authors are aimed to determine the effects of slip drip approach by mixing cartinex 1g/5ml, Liponex 300gm/12ml and Arginex 5g/10ml with a 500ml of normal saline being administered to patients for twice a week and to determine its effects on Body Mass Index and Physical appearance of patients after one month of intervention.

Material and Method

A quasi-experimental study conducted department of dermatology Clinic of Isra University Hospital, Hyderabad Obese Type 1 and Type 2 of BMI 30-50kg/m2 of aged between 18-68 years including both male and female population are included whereas all those participants who were diagnosed with any comorbidities like diabetes, dyslipidemia, cardiovascular diseases were excluded from the study.

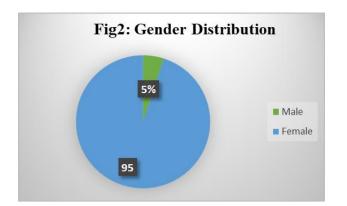
A total number of n=400 participants were recruited for the purpose of this study. Informed consent was taken prior to induction and initial body mass index in kg/m2 was monitored. Every participant irrespective of any kind of exercise programs and diet plan that were followed by them were provided with Cartinex (1g/5ml), Liponex (300mg/12ml) and Arginex (5g/10ml) mixed with 500ml of normal saline twice a week for 30 days. The outcome measure was recorded in the form of patient's pictures taken before the start of the treatment session and after 30 days of treatment by a same person using a (Nikon D3500, 23.5mm x 15.6mm camera) and Body Mass Index (BMI). Quantitative findings were analyzed using a SPSS version 22, and a value less than <0.05 was considered significant (95% of CI).

Study was strictly according to the guidelines of Helsinki declaration of human subject. Consent was taken prior to induction of participants in the study. All the participants were given a full opportunity to exit from the study at any time without assigning any reason. The concept of beneficence and non- malfeasance for participants was given utmost importance in this study. Moreover, all kinds of information that were taken from the participants during the course of study were kept confidential and were not disclosed during and after the completion of study with anyone and any organization in any of the form and conditions.

Results

Analysis of the findings had revealed that of total number of n=400 participants 380 (95%) were females and 20 (5%) were male (Figure1). Age wise distribution had revealed that within the age group of 18-28 years the number of male and female participants were 20 and 5 respectively. In the age group of 29-38 years the frequency of participants was male 130 and female 13, participants in between 39-48 years of age were 190 females and 2 males whereas in between 49-58 years 30 female participants were present and in between 59-68 years of age 10 female participants were included (Table 1, Fig 1).

Table 1: Age wise distribution of participants					
Variables	18-28	29-38	39-48	49-58	59-68
Valiables	years	years	years	years	years
Male (n)	20	130	190	30	10
Females (n)	5	13	2		



Further analysis had revealed that the levels of thyroid profiles (T3 and T4) among females were around 60% increased that had normalized after treatment whereas among males the values were 30% higher that had also been reduced. Similarly, improvement in the levels of serum insulin, serum prolactin and HbA1C has also been noticed before and after intervention (table 2)

Table 2: Hormone profile				
Variabl es	Female (Before)	Female (After)	Male (Before)	Male (After)
Thyroi d Profile	T 3, T4 Inc (60%)	T3, T4 (56%) normaliz ed	T3, T4 Inc (30%)	T3, T4 (24%) normaliz ed
Serum Insulin Ievels	Inc Serum Insulin Levels (15.2+6.82ulU /ml)	Serum Insulin Levels (3-10 uIU/ml)	Inc Serum Insulin Levels (19- 30uIU/m I)	Serum Insulin Levels (3- 12uIU/ml)
Serum Prolact in	Inc Serum Prolactin Levels (17.75ug/L)	Serum Prolactin Levels (9ug/L)	Inc Serum Prolacti n levels (19.3ug/ L)	Serum Prolactin Levels (13ug/L)
HbA1C	6.4	4.8	6.2	5.4

Further body mass index of the participants was also analyzed using paired sample-test that provided a significant p<0.001 mean reduction in within the group analyses. The pre-BMI was observed 38.12±4.85 that

reduced up to 34.49 ± 5.36 with p <0.05 as shown in table 3, fig 2.

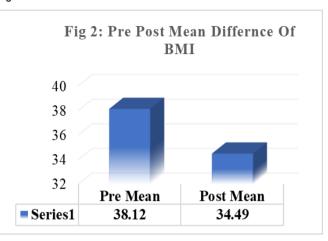


Table-1: sho	wing pre and	post	t mean differe	Table-1: showing pre and post mean difference within the group on BMI	p on BMI	
Paired sample t- test	BMI (kg/m2)	3	Mean ± SD	Mean ± SD 95% of CI Median MD ± SD	MD ± SD	p-value 9<0.05)
	Pre	50	38.12±4.85	38.12±4.85 36.80 to 39.56	-3.68±1.65	<0.0001
	Post	5	34.49±5.36	34.49±5.36 32.97 to 36.02		

Moreover, the physical appearance of patients was also assessed by taking pre-posted pictures showing the effects of intervention on patients as illustrated in fig 3.



Figure 3: Representing weight loss n patients graded as per BMI

Discussion

The findings of this study had revealed that slimming drip method that had been used for the purpose of improving fat metabolism among type 1 and type 2 obese population had significantly p<0.005 reduced the body mass index of the participants where the mean values of BMI before the start of treatment were 38.12±4.85kg/m2 that had been reduced to 34.49±5.36 after one month of treatment. Moreover, the hormone profile levels of thyroid hormone, insulin and serum prolactin were also improved besides that levels of HbAIC were also positively improved to desire levels. The findings of this study were according to the findings of systematic review in which the authors had revealed that of the total number of 43 Randomized controlled trials that were investigated by the authors BMI of the participants had reduced with an effect size of -0.359kg/m2 whereas weight of the participant's had been

reduced with an effect size of -1.129kg. Moreover, the same analysis had also revealed that fat mass had been reduced with an estimated effect size of -1.158kg. Hence it had been concluded in the analysis that I-carnitine supplement therapy had a significant effect in reducing the weight and BMI of overweight and obese population²⁰. Similarly in another study I-carnitine therapy was found to be effective in reducing the weight, BMI, trialyceride levels and systolic and diastolic blood pressure among obsess population²¹. Similarly in another study the effects of thicotic acid were determined on weight loss of participants and it was concluded by the authors that thicotic treatment had shown a significant p<0.001 mean reduction in participant's weight 1.27kg as compared to placebo group. Moreover, the same study had also observed a reduction in BMI of -0.43kg/m2 hence it was concluded by the authors that thicotic had shown small yet significant reduction in weight of obese and overweight population²². In a randomized controlled trial that was conducted to determine the effects 1200 and 1800mg/day of thicotic acid on obesity, it was found by the authors that the effects of 1800mg/day of thicotic acid was turned out to be significantly better than 1200mg/day group and hence it was concluded by the author that the same dose can be used as an effective adjunctive therapy for obesity²³. In another study antioxidant and metabolic effects of a combine effects I-carnitine therapy and alpha lipoic acid (Thicotic acid) were determined by the authors and it was found that combine therapy had significantly p<0.001 improved the metabolic activity of mitochondria and that no adverse effects of combine therapy had been noticed by the authors of that study²³. An animal-based study conducted to determine the effects of thicotic acid on lipid metabolism was estimated by the authors that thicotic acid supplements included in the diet of crabs had improved the fatty acid, amino acid and carnitine metabolism²⁴. A study was conducted to synergistic effects of integrative determine the administration of I-carnitine, I-arginine, and N-acetyl cysteine on metabolic dynamics and on hepatic.

insulin extraction in overweight and obese poly cystic ovary patients it was observed by the authors that after 24 weeks of intervention all subjects had shown significant reduction p<0.001 in plasma insulin levels and improvement in metabolic functions of participants and hence it was concluded that combination therapies are effective in providing beneficial results in overweight and obese population²⁵. Figure 3: Representing weight loss n patients graded as per BMI



Conclusion

The study had concluded that slimming drip treatment had produced a beneficial effect on hormonal levels and patient's appearance.

Conflict of Interest:	No
Acknowledgement:	No

References

- 1. The study had concluded that skinny drip treatment based on cartinex 1g/5ml, Liponex 300gm/12ml and Arginex 5g/10ml mixedwith a 500ml of normal saline being administered to patients for twice a week for 30 days had produced a beneficial effects on hormonal levels and patient's appearance. Besides that the treatment had also shown a significant reduction p<0.001 in body mass index of the participants.
- Jepsen S, Suvan J, Deschner J. The association of periodontal diseases with metabolic syndrome and obesity. Periodontology 2000. 2020 Jun;83(1):125-53.
- Muscogiuri G, Verde L, Sulu C, Katsiki N, Hassapidou M, Frias-Toral E, Cucalón G, Pazderska A, Yumuk VD, Colao A, Barrea L. Mediterranean diet and obesityrelated disorders: what is the evidence?. Current Obesity Reports. 2022 Dec;11(4):287-304.

- Chooi YC, Ding C, Magkos F. The epidemiology of obesity. Metabolism. 2019 Mar 1;92:6-10.
- 5. Rippe JM. Adiposity-Based Chronic Disease: A New Diagnostic Term. InObesity Prevention and Treatment 2021 Sep 23 (pp. 123-131). CRC Press..
- 6. Mechanick JI. Adiposity-based chronic disease—obesity re-worked. US Endocrinol. 2016;12:102.
- Upadhyay J, Farr O, Perakakis N, Ghaly W, Mantzoros C. Obesity as a disease. Medical Clinics. 2018 Jan 1;102(1):13-33.
- Cawley J, Meyerhoefer C, Biener A, Hammer M, Wintfeld N. Savings in medical expenditures associated with reductions in body mass index among US adults with obesity, by diabetes status. Pharmacoeconomics. 2015 Jul;33:707-22.
- Peirson L, Fitzpatrick-Lewis D, Morrison K, Ciliska D, Kenny M, Ali MU, Raina P. Prevention of overweight and obesity in children and youth: a systematic review and meta-analysis. Canadian Medical Association Open Access Journal. 2015 Jan 13;3(1):E23-33.
- Panel OE, American College of Cardiology, American Heart Association Task Force on Practice Guidelines. Expert panel report: guidelines (2013) for the management of overweight and obesity in adults. Obesity (Silver Spring, Md.). 2014 Jul;22:S41-0.
- Semlitsch T, Stigler FL, Jeitler K, Horvath K, Siebenhofer A. Management of overweight and obesity in primary care—A systematic overview of international evidence-based guidelines. Obesity Reviews. 2019 Sep;20(9):1218-30.
- Wadden TA, Tronieri JS, Butryn ML. Lifestyle modification approaches for the treatment of obesity in adults. American psychologist. 2020 Feb;75(2):235.
- Gillen JB, Gibala MJ. Interval training: a time-efficient exercise strategy to improve cardiometabolic health. Applied Physiology, Nutrition, and Metabolism. 2018;43(10):iii-v.
- 14. Keating SE, Johnson NA, Mielke GI, Coombes JS. A systematic review and meta-analysis of interval training versus moderate-intensity continuous training on body adiposity. Obesity reviews. 2017 Aug;18(8):943-64.
- 15. Forgione N, Deed G, Kilov G, Rigas G. Managing obesity in primary care: breaking down the barriers. Advances in therapy. 2018 Feb;35(2):191-8.
- Dani V, Yao X, Dani C. Transplantation of fat tissues and iPSC-derived energy expenditure adipocytes to counteract obesity-driven metabolic disorders: Current strategies and future perspectives. Reviews in Endocrine and Metabolic Disorders. 2021 Mar 22:1-8.
- Stoner L, Beets MW, Brazendale K, Moore JB, Weaver RG. Exercise dose and weight loss in adolescents with overweight–obesity: a meta-regression. Sports Medicine. 2019 Jan 25;49:83-94.
- Friedenreich CM, Ruan Y, Duha A, Courneya KS. Exercise dose effects on body fat 12 months after an exercise intervention: follow-up from a randomized controlled trial. Journal of obesity. 2019 Jan 20;2019..
- 19. Idrees Z, Cancarevic I, Huang L. FDA-approved pharmacotherapy for weight loss over the last decade. Cureus. 2022 Sep 17;14(9).

- Kushner RF. Weight loss strategies for treatment of obesity: lifestyle management and pharmacotherapy. Progress in cardiovascular diseases. 2018 Jul 1;61(2):246-52.
- Zhang T, Zhang L, Ke B, Sun J, Liu T, Huang Y, Chen X, Liu M, Li F, Luo D, Qin J. L-carnitine ameliorated weight loss in fasting therapy: a propensity score-matched study. Complementary Therapies in Medicine. 2019 Jun 1;44:162-5.
- Pooyandjoo M, Nouhi M, Shab-Bidar S, Djafarian K, Olyaeemanesh A. The effect of (L-) carnitine on weight loss in adults: a systematic review and meta-analysis of randomized controlled trials. Obesity reviews. 2016 Oct;17(10):970-6.
- Kucukgoncu S, Zhou E, Lucas KB, Tek C. Alpha-lipoic acid (ALA) as a supplementation for weight loss: results from a meta-analysis of randomized controlled trials. Obesity reviews. 2017 May;18(5):594-601..

- Koh EH, Lee WJ, Lee SA, Kim EH, Cho EH, Jeong E, Kim DW, Kim MS, Park JY, Park KG, Lee HJ. Effects of alpha-lipoic acid on body weight in obese subjects. The American journal of medicine. 2011 Jan 1;124(1):85-e1.
- Xu C, Wang X, Han F, Qi C, Li E, Guo J, Qin JG, Chen L. α-lipoic acid regulate growth, antioxidant status and lipid metabolism of Chinese mitten crab Eriocheir sinensis: Optimum supplement level and metabonomics response. Aquaculture. 2019 May 15;506:94-103.
- 26. Genazzani AD, Prati A, Genazzani AR, Battipaglia C, Simoncini T, Szeliga A, Podfigurna A, Meczekalski B. Synergistic effects of the integrative administration of acetyl-L-carnitine, L-carnitine, L-arginine and N-acetylcysteine on metabolic dynamics and on hepatic insulin extraction in overweight/obese patients with PCOS. Gynecol. Reprod. Endocrinol. Metab. 2020;1:56-63.