Egrifta Can Cut Abdominal and Liver Fat

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The drug Egrifta (tesamorelin), developed as a treatment for excess abdominal fat in people with HIV, may have an additional benefit of promoting liver health by reducing liver fat. Liver fat is very common in HIV-positive people and can prove damaging to the organ. Unfortunately, there is no strategy to reduce liver fat among the HIV population.

Enter Egrifta, which led to a drop in abdominal fat and a modest reduction in liver fat in a study of 50 people with HIV who received either the daily injectable drug or a placebo for six months. Those taking Egrifta lowered what is known as visceral adipose tissue by 34 square centimeters, compared with an 8 square cm reduction among those on the placebo. Lipid to water percentage, which is an indication of liver fat, lowered by a median 2 percent among those taking Egrifta, compared with a 0.9 percent median increase in the placebo group. In addition, liver enzyme tests, which indicate liver inflammation, were lower among those taking Egrifta.

According to the study's senior author, Steven Grinspoon, MD, director of the Massachusetts General Hospital Program in Nutritional Metabolism, whether such shifts in liver fat "will translate into significant effects on inflammation and reductions in mortality and morbidity, such as the development of fibrosis, remains to be determined. But I think it's a good first step."

Grinspoon and his team are looking to begin research that will take the next steps in answering such questions.

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