

Talking Points

AB-82: Dietary supplements for weight loss and over-the-counter diet pills

Introduced by: California Assembly Member Akilah Weber

1. In 2019, American households spent over \$2.5 billion on weight-loss supplements, and the sector is estimated to increase to \$4 billion in annual revenue by 2027.¹ Although supplements sold for weight loss are not recommended by doctors, they are widely used in the United States, with one in five women and one in 10 men reporting ever using these products.²
 - Dietary supplements can easily be purchased by people of all ages at pharmacies, grocery stores, health food stores, and other retailers. These products are under-regulated by the U.S. Food and Drug Administration (FDA) and are not screened by the FDA for safety or efficacy before they are released on to the market.³
2. Research shows that dietary supplements sold for weight loss are too often laced with prescription drugs and dangerous chemicals and are associated with serious health risks, including stroke, and severe liver injury, sometimes requiring transplants or even leading to death.⁴⁻⁸
 - The rate of liver failure caused by dietary supplements has risen 185% in the past decade⁹, and 16% of cases of serious drug-induced liver injury in the United States are attributed to dietary supplements, the vast majority being those sold for weight loss.¹⁰
3. There are many types of diet pills on the market. One over-the-counter drug for weight loss—a form of the medication orlistat—has been approved by the FDA; however, this drug was not approved for people under the age of 18 years.¹¹ Despite this, there are currently no measures in place to prevent minors from purchasing this drug or other over-the-counter weight loss products.
 - Experts in the field have raised serious concerns about people with eating disorders abusing diet pills, including orlistat.¹² These products serve as a gateway to eating disorders among girls. Adolescent and young adult women who use diet pills have six times the risk of being diagnosed with an eating disorder within the next three years compared to non-users.¹³ Banning the sale of diet pills to minors could help prevent misuse and abuse of this drug by youth in California who are struggling with eating disorders.
4. Weight-loss supplements exacerbate gender and racial/ethnic health inequities. Girls and women are two times more likely to use weight-loss supplements in their lifetimes than are boys and men, and Black and Latino communities have a higher lifetime use of weight-loss supplements than white communities.¹⁴ One study revealed Latino teens had nearly 40% higher risk of using over-the-counter diet-pill in the past month than their white non-Latino peers and these disparities are just getting worse over time, with 1 in 10 Latina girls reporting over-the-counter diet-pill use in the past month.¹⁵
5. The American Academy of Pediatrics has strongly cautioned against teens using weight-loss supplements¹⁶. California has a responsibility to protect its youth from potentially dangerous products sold for weight loss.
 - California Assembly Member Akilah Weber has introduced a bill that, if passed, would regulate the sale of dietary supplements for weight loss and over-the-counter diet pills. This bill would ban the sale of these products to minors younger than 18 years old, require that these products be moved behind the counter or into a locked case in stores.

References

1. Vig H, Deshmukh R. Weight loss and weight management diet market: Global opportunity analysis and industry forecast, 2021-2027. 2020. <https://www.alliedmarketresearch.com/weight-loss-management-diet-market>. Accessed January 20, 2021.
2. Blanck HM, Serdula MK, Gillespie C, et al. Use of Nonprescription Dietary Supplements for Weight Loss is Common among Americans. *Journal of the American Dietetic Association*. 2007;107(3):441-447. doi:10.1016/j.jada.2006.12.009.
3. Pomeranz JL, Barbosa G, Killian C, Austin SB. The Dangerous Mix of Adolescents and Dietary Supplements for Weight Loss and Muscle Building. *Journal of Public Health Management and Practice*. 2015;21(5):496-503. doi:10.1097/phh.000000000000142.
4. Cohen PA. Hazards of Hindsight — Monitoring the Safety of Nutritional Supplements. *New England Journal of Medicine*. 2014;370(14):1277-1280. doi:10.1056/nejmp1315559.
5. Abdel-Rahman A, Anyangwe N, Carlacci L, et al. The Safety and Regulation of Natural Products Used as Foods and Food Ingredients. *Toxicological Sciences*. 2011;123(2):333-348. doi: 10.1093/toxsci/kfr198.
6. Fong TL, Klontz KC, Canas-Coto A, et al. Hepatotoxicity Due to Hydroxycut: A Case Series. *American Journal of Gastroenterology*. 2009;105(7):1561-1566. doi: 10.1038/ajg.2010.5.
7. Grundlingh J, Dargan PI, El-Zanfaly M, Wood DM. 2,4-Dinitrophenol (DNP): A Weight Loss Agent with Significant Acute Toxicity and Risk of Death. *Journal of Medical Toxicology*. 2011;7(3):205-212. doi:10.1007/s13181-011-0162-6.
8. Guyda HJ. Use of Dietary Supplements and Hormones in Adolescents: A Cautionary Tale. *Pediatric Child Health*. 2005;10(10):587-590.
9. Navarro VJ, Barnhart HX, Bonkovsky HL, et al. The Rising Burden of Herbal and Dietary Supplement Induced Hepatotoxicity in the U.S.A. Program and Abstracts of the 64th Annual Meeting of the American Association for the Study of Liver Diseases; November 1-5, 2013; Washington, DC. Abstract 113.
10. Navarro V, Barnhart H, Bonkovsky H, et al. Herbal and dietary supplement induced hepatotoxicity in the U.S. *Gastroenterology*. 2012; 142(5 Supp 1): S-41.
11. Orlistat (marketed as Alli and Xenical) Information. U.S. Food & Drug Administration Website. <http://www.fda.gov/Drugs/DrugSafety/PostmarketDrugSafetyInformationforPatientsandProviders/ucm180076.htm> Updated July 8, 2015. Accessed January 2, 2017.
12. Cumella EJ, Hahn J, & Woods BK. Weighing Alli's Impact: Eating Disorder Patients Might Be Tempted to Abuse the First FDA-Approved Nonprescription Diet Pill. *Behavioral Healthcare*. 2007;27(6): 32-34.
13. Levinson, JA, Sarda V, Sonnevile K, Calzo JP, Ambwani S, Austin SB. Diet Pill and Laxative Use for Weight Control and Subsequent Incident Eating Disorder in US Young Women: 2001–2016. *Am J Public Health* 2019; e1-e3
14. Pillitteri JL, Shiffman S, Rohay JM, Harkins AM, Burton SL, Wadden TA. Use of dietary supplements for weight loss in the United States: results of a national survey. *Obesity (Silver Spring)*. 2008;16(4):790-796.
15. Vitagliano J, Beccia A, Mattei J, Cory H, Austin SB. Disproportionate risk of over-the-counter diet pill use among Latinx youth: Results of a national study (In preparation).
16. Golden NH, Schneider M, Wood C. Preventing Obesity and Eating Disorders in Adolescents. *Pediatrics*. 2016;138(3). doi:10.1542/peds.2016-1649.