

Compounded Metformin with Belmar



Metformin HCl / Naltrexone HCl / Oxytocin 100/8mg/100 IU Scored Tablet

- Suggested dosing
 - 1 tablet by mouth twice daily
- Weight management benefit
 - Metformin
 - Naltrexone and oxytocin
 - May affect areas of the brain involved in appetite regulation
 - Can impact cravings, metabolism, energy

*Topiramate
+ metformin
↑ risk of
lactic
acidosis*

Metformin Background

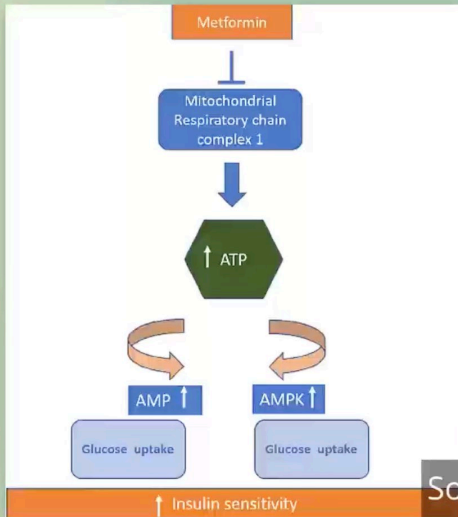
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- Biguanide derived from the French lilac plant
- Mainstay medication for Type II DM
 - First-line therapy
 - Blood sugar reduction without risk of hypoglycemia
- Affordable and accessible
- Established safety profile spanning 60 years
- Multifaceted nature and the indications are growing

Metformin Mechanism of Action

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- Metformin inhibits MC1 activating AMPK
- AMPK works as an energy sensor regulating metabolic pathways
 - Glucose and lipid metabolism
 - Energy homeostasis
- AMPK improves insulin sensitivity
 - Stimulates glucose uptake
 - Blocks hepatic gluconeogenesis
 - Encourages fatty acid oxidation

So metformin's primary target is inhibiting

Potential Side Effects

- Gastrointestinal
 - Nausea, vomiting, diarrhea, dyspepsia, flatulence, abdominal pain
 - Transient and dose dependent
- Headache and loss of energy/strength
- B-12 deficiency

Pharmacokinetics

- Onset of action within days, up to 2 weeks for maximum effect
- Half-life: 4-9 hours plasma; 17-18 hours blood
- Peak effect with IR formulation: 2-3 hours

Metformin Black Box Warning – Lactic Acidosis



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■ Description

- Metabolic condition resulting from overproduction of lactic acid
- Lactic acid is a byproduct of cellular metabolism

■ Nonspecific symptoms

- General discomfort, muscle pain, respiratory distress, sleepiness, abdominal pain

■ Risk factors

- Kidney or liver impairment, hypoxic states, excessive alcohol use, being ≥ 65 years
- Taking medications like topiramate (carbonic anhydrase inhibitors)

■ Contraindications

- Severe kidney dysfunction and metabolic acidosis

The Many Applications of Metformin

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Neurological
Disease



Diabetes



Longevity



CVD



PCOS



Weight
Management



Kidney
Disease



Cancer



Liver
Disease

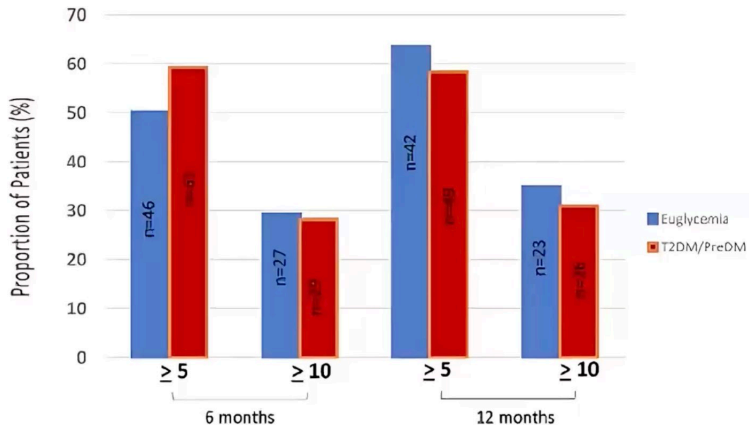
Metformin- Induced Weight Loss Study

Retrospective Cohort Study

- Patients received metformin as monotherapy for weight loss
 - Euglycemic (46% patients)
 - Average 1000 mg per day
 - T2DM/PreDM (54% patients)
 - Average 1500 mg per day
- Evaluated at 6- and/or 12-month follow-up

Metformin-Induced $\geq 5\%$ or $\geq 10\%$ Weight Loss

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Metformin- Induced Weight Loss Study

Weight Loss Results

- At 6 months
 - Euglycemic: 6.5 +/- 6.0%
 - T2DM/PreDM: 6.5 +/- 6.1%
- At 12 months
 - Euglycemic: 7.4 +/- 6.2%
 - T2DM/PreDM: 7.3 +/- 7.7%

Metformin may have a dose-dependent effect on food intake

- Promotes increased lactate production after meals
 - Suppressing appetite
- Affects the food-reward relationship in the CNS
 - Induces metabolic changes in the brain
- Impacts the gut-brain axis
 - Increases the secretion of **GLP-1**
 - Appetite suppressing neuropeptide
 - Increases GDF15 blood levels, decreasing food intake

Metformin and the Gut Microbiome

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- Obese patients have different microbial flora
- Gut bacteria may play a role in developing metabolic syndrome or T2DM
- Short chain fatty acids (SCFA) are anti-inflammatory
 - Strengthen the intestinal barrier
 - Activate AMPK



Metformin and the Gut Microbiome

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- Introducing metformin to the GI tract appears to change gut bacteria
- Metformin promotes bacteria good at increasing SCFAs
 - Less hepatic gluconeogenesis
 - Less free fatty acid release from adipocytes

Regulation of Obesity, Appetite, and Weight Loss by Metformin

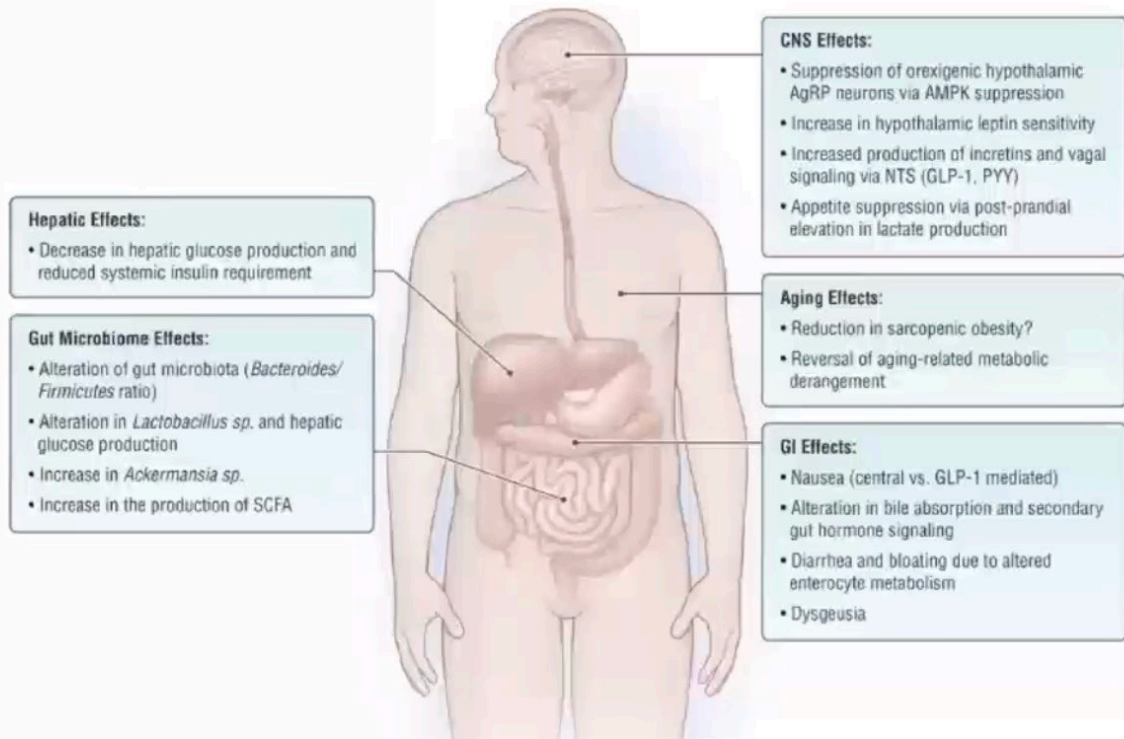
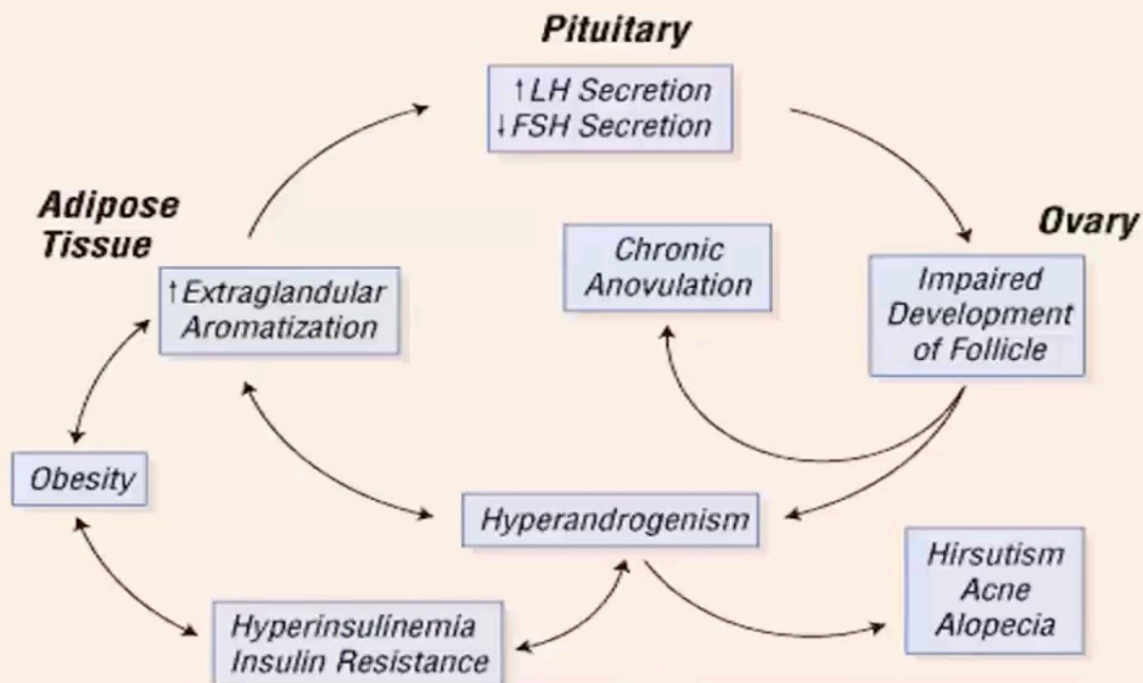


Figure 1

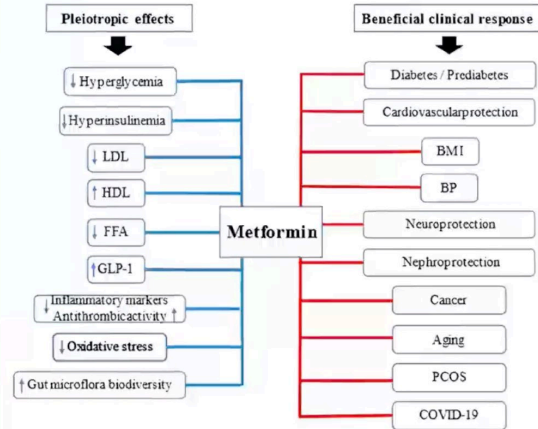
Pathophysiology of Polycystic Ovary Syndrome

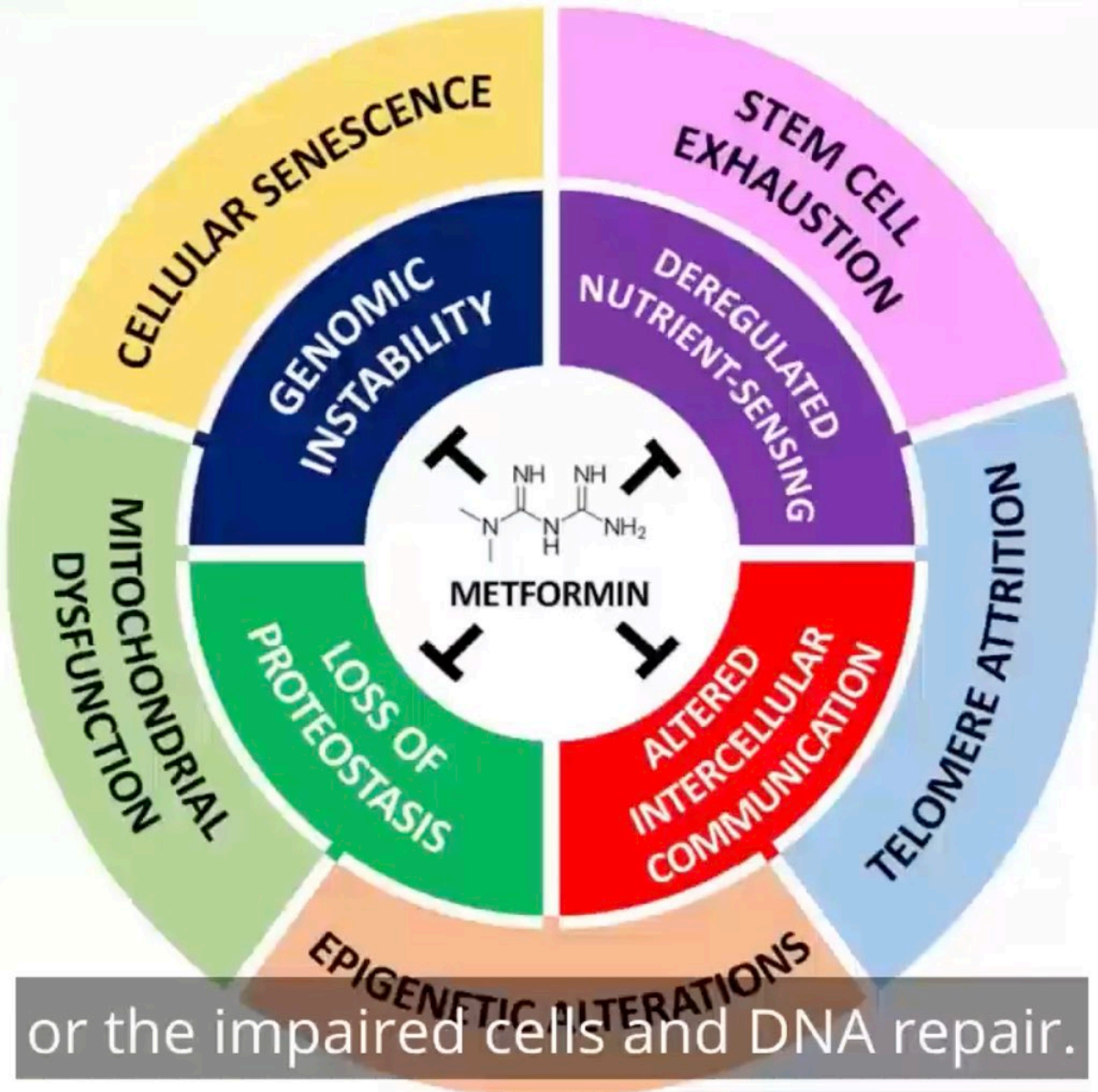


Metformin and Longevity

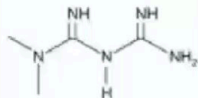
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- Glucose metabolism regulation
- Protective effect on cellular processes
 - DNA damage and ROS
 - Inflammation
 - Oxidative stress and apoptosis
- Cell senescence





Metformin



Galega officinalis



Cardiovascular benefits of metformin

- Lowered blood glucose
- Endothelium protection
- Antioxidative actions
- ↓ inflammation
- ↓ leukocyte adhesion
- ↓ blood pressure
- ↓ micro/macrovacular complications



- Metabolic, CV and anti-inflammatory actions decrease neurodegenerative disease.
- Antihyperglycemic-independent effects elicit GDF15-mediated weight loss.

- Lipid homeostasis
- ↓ adiposity

- ↓ gluconeogenesis and lipogenesis

- AMPK-dependent GLP-1 release
- Enhanced SGLT-1 activity?
- GI side effects
- ↓ vitamin B12 absorption

- Secretion via MATE/OCT transporters
- ↓ GFR leading to metformin accumulation and toxicity/lactic acidosis

will die of cardiovascular disease

Metformin and Longevity



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- Animal studies support promising future for metformin
 - Potential for extended disease-free lifespan
 - Evident in roundworm (*C. elegans*) and mice
- Meta-analysis involving 53 studies investigated metformin's geroprotective effect in humans
 - Reductions in all-cause mortality and age-related diseases
- Longevity mechanisms and targets are under research
 - No shortage of proposed theories

The TAME Trial

Targeting Aging with Metformin (TAME) Trial:

- Series of nationwide six-year clinical trials across 14 research institutions
- Involving over 3,000 patients between 65-79
- Focused on the idea that aging can be addressed with medication like other disease states

The TAME Trial

Study Design and Goal

- Patients will receive metformin 1500 mg/day for 6 years with a 3.5 year follow-up period
- The aim is to help achieve aging as an indication for metformin
- Still raising funds for launch