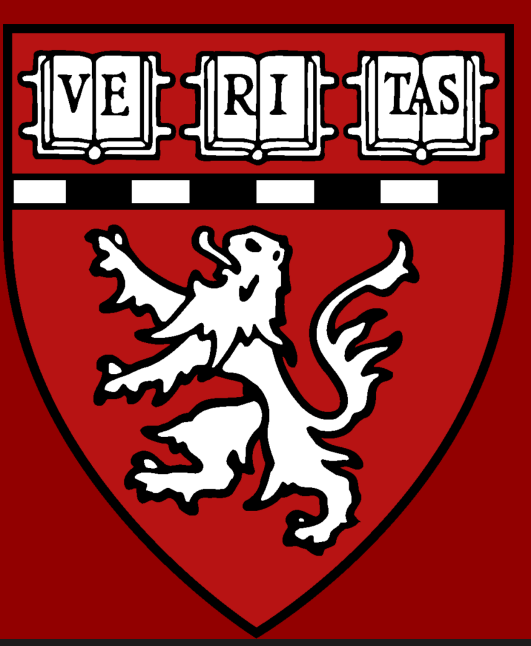


Inpatient Initiation of Pharmacotherapy for Obesity to Improve Liver Transplant Eligibility: A Case Report



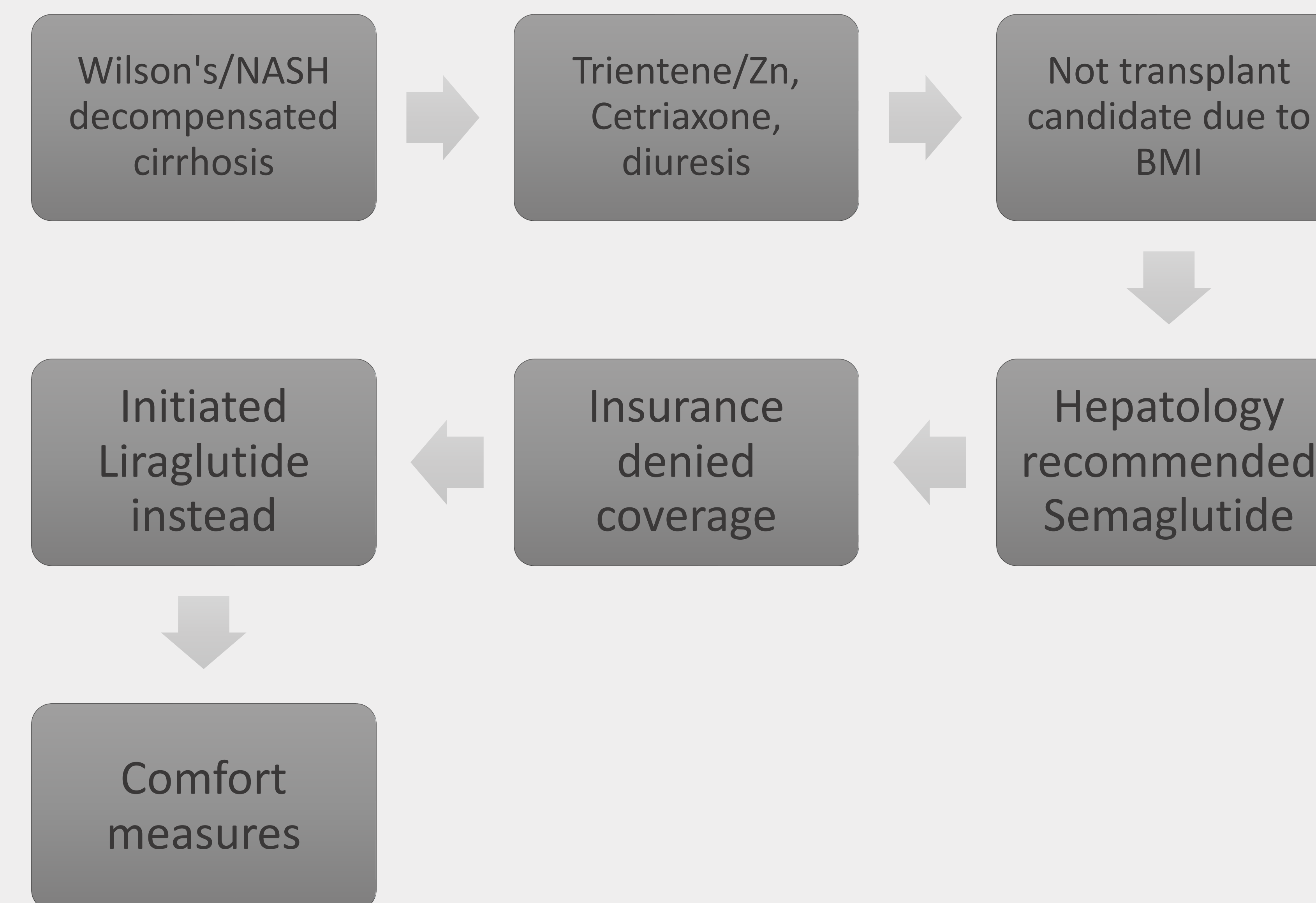
We advocate for increased access to pharmacotherapy for obesity in the inpatient setting and treatment as intensively as other chronic diseases

INTRODUCTION:

- Prevalence of obesity worldwide, associated cardiovascular disease, and reduced life expectancy
- Pharmacotherapy for BMI ≥ 30 (or ≥ 27 plus comorbidities)
- Lack of access to obesity pharmacotherapy due to inadequate insurance coverage
- Case of patient with Wilson's cirrhosis and obesity, admitted for decompensated cirrhosis, not listed for transplant due to elevated BMI

CASE DESCRIPTION:

- 36 year old woman with Wilson's/NASH cirrhosis and BMI >60 presented with decompensated cirrhosis (anasarca, transaminitis, hyperbilirubinemia, spontaneous bacterial peritonitis, and MELD-Na 36)
- Started on Trientine, Zinc, Ceftriaxone, and diuresis
- Per transplant surgery, her BMI would prohibitively increase peri-operative risk for liver transplantation and decrease chance of post-transplant success
- Recommended BMI of 50 or less for liver transplant



CASE DESCRIPTION (CONTINUED):

- Hepatology team recommended inpatient initiation of weekly subcutaneous Semaglutide (potential benefits $>$ risks)
- Semaglutide results in significantly more weight loss as compared to Liraglutide (Step 8 Randomized Clinical Trial)¹
- Insurance denied coverage for any weight loss drugs
- We initiated Liraglutide as inpatient (does not require prior authorization)
- Rate of decompensation outpaced our ability to get her to transplant eligibility
- Patient eventually transitioned to comfort measures

DISCUSSION:

- We review inpatient initiation of pharmacotherapy for obesity to improve eligibility for liver transplant
- Semaglutide would have been covered for diabetes but not for obesity
- Insurance barriers to obesity treatment are worsening existing health disparities
- We hope that insurance coverage will not present a barrier to potential life saving pharmacotherapy for obesity