ERRATUM

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Due to a typesetting error, an abstract in the above issue of the *International Journal of Obesity* was omitted. The abstract is reproduced below and should have appeared on page S77 of the Supplement.

Efficacy of orlistat in overweight and obese patients with metabolic syndrome

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Aims: Excess weight is known to be associated with a variety of co-morbidities. The metabolic syndrome describes a clustering of abnormalities (e.g. hypertension, dyslipidaemia, abdominal obesity) that occur in obese patients (pts), putting them at risk of cardiovascular disease and type 2 diabetes. We performed a retrospective analysis of pooled data from 5 multicentre, double-blind trials to examine the effect of orlistat (ORL) in pts with metabolic syndrome (1503/2673 [56%] pts).

Methods: Overweight and obese ($\text{BMI} \geq 25 \text{ kg/m}^2$) pts with metabolic syndrome were analysed using the least square means decrease from baseline to the end of treatment between ORL 120 mg and placebo (PL).

Results:

Change vs baseline	ORL	PL	P value
Weight (kg)	-5.53	-2.17	0.0001
Waist (cm)	-6.26	-3.15	0.0001
FPG (mmol/L)	-0.73	-0.19	0.0001
Systolic BP (mmHg)	-7.60	-5.07	0.0017
Diastolic BP (mmHg)	-5.68	-4.30	0.0044
HbA _{1c} (%)	-0.21	+0.01	0.0001
Insulin (pmol/L)	-20.37	-7.50	0.0001

The changes in HDL-cholesterol and triglycerides showed a trend in favour of ORL. **Conclusions:** Weight loss is the only intervention that improves all metabolic abnormalities in pts with 'metabolic clustering', and weight loss with ORL further enhances this improvement compared with diet alone.