

NLM Citation: LiverTox: Clinical and Research Information on Drug-Induced Liver Injury [Internet]. Bethesda (MD): National Institute of Diabetes and Digestive and Kidney Diseases; 2012-. Hydroxycut. [Updated 2018 Apr 12].

Bookshelf URL: https://www.ncbi.nlm.nih.gov/books/



HydroxycutUpdated: April 12, 2018.

OVERVIEW

Introduction

Hydroxycut is the commercial name a variety of multi-ingredient nutritional supplements (MINS) marketed for weight loss, body building and "fat burning". In 2004, Hydroxycut products containing ephedra were withdrawn from use in the United States because of cardiovascular risks and in 2009 because of hepatotoxicity. Nevertheless, Hydroxycut products with different ingredients are still commercially available and have continued to be implicated in cases of clinically apparent acute liver injury.

Background

Hydroxycut is the proprietary name of a series of multi-ingredient nutritional supplements that are typically marketed as weight loss, body building, "fat burning" and performance enhancement aids. Initial ingredients in the products included caffeine and ephedra which in animal studies led to weight loss. In 2004, the FDA banned the use of ephedra in nutritional supplements and the composition of Hydroxycut was altered, with removal of ephedra. The products were often labelled as "ephedra-free". Ingredients varied in different forms of the Hydroxycut products, but they generally included caffeine, green tea extract and proprietary mixtures of botanicals of undeclared concentration, source and purity. Hydroxycut products continued to be implicated in rare cases of acute liver injury. In 2009, after a review and identification of 23 cases of liver injury linked to Hydroxycut exposure, including one death, the FDA recalled all Hydroxycut products and mandated removal of products already in distribution. However, nutritional supplements under the name Hydroxycut continued to be marketed, but with different formulations. While reported cases of liver injury due to Hydroxycut decreased, they continued to appear. At present, several products labelled as Hydroxycut are available and still widely used. The table below lists several of the products with their full names and ingredients as listed on the product labels (reviewed: 02.24.2016).

Selected Hydroxycut Products (April 2018)

Product Name	Condition	Major Listed Ingredients
Hydroxycut Hard Core Elite [Muscle Tech]	Weight loss, fat burning, enhanced energy and mental focus	Caffeine [270 mg], L-threanine [100 mg], Yohimbe extract [56.3 mg], Coleus forskohlii extract [100 mg], Green coffee extract [Coffea canephora robusta seed: 200 mg], Cocoa extract [100 mg: supplying theobromine], Yohimbe extract [56.3 mg]
Hydroxycut Hardcore CLA Elite [Muscle Tech]	Weight loss, fat burning, enhanced energy and mental focus	Conjugated linoleic acid [CLA: 1000 mg], L-carnitine [250 mg], Garcinia indica extract [250 mg], Robusta coffee bean extract [200 mg], Raspberry ketone [125 mg]

Selected Hydroxycut Products continued from previous page.

Product Name	Condition	Major Listed Ingredients
Pro Clinical Hydroxycut Lose Weight	Weight loss	Calcium (145 mg), Robusta coffee bean extract (C. canephora robusta), Papaya, Blackberry, Saffron extract, Caffeine (200 mg), Maqui (Aristotella chilensis), Amia extract (Phyllanthus)
Pro Clinical Hydroxycut Gummies	Weight loss	Thiamine (1.5 mg), Riboflavin (1.7 mg), Vitamis B6 (1 mg) and B12 (1.2 mcg), Folic acid (400 mcg), Pantothenic acid (10 mg), Robusta coffee extract (200 mg).
Pro Clinical Hydroxycut Caffeine Free	Weight loss	Calcium [150 mg], Robusta coffee extract, papaya, maqui, blackberry, amla extract, saffron extract
Pro Clinical Hydroxycut Instant Drink Mix	Weight loss	Hydroxycut Blend [340 mg] with Robusta coffee extract, papaya, blackbery and saffron extract; and HydroxyBoost with caffeine [135 mg], Maqui and Amla extract
Hydroxycut Max for Women	Weight loss	Folic acid (200 mcg), Biotin (300 mcg), Iron (2 mg) Caffeine [225 mg], Mango, Kiwi, Avocado oil, Robusta coffee extract, hydrolyzed collage, silicon dioxide
Hydroxycut Platinum	Weight loss	Green coffee bean extract [200 mg], Red mango extract, white kidney bean extract, Ashwagandha extract, Bacillus coagulans, Caffeine [200 mg], Choline, L-theanine, Huperzine-A, Cherry stem, Lemon and Tangerine concentrates, Vitamins A, B6, B12, C, D, E and K, Folic acid, Riboflavin, Niacin, Biotin, Iron, Iodine, Pantothenic acid, Zinc, Selenium Copper and Chromium
Hydroxycut Black	Weight loss	Caffeine (200 mg), Robusta coffee bean extract (C. canephora robusta: 200 mg), Alpha lipoic acid (150 mg), Yohimbe extract, Black caraway extract, Purslane extract, Arugula extract, Chicory extract
Hydroxycut Max!	Weight loss	Folic acid (200 mcg), Biotin (300 mg), Iron (2 mg), Caffeine (225 mg), Mango, Kiwi, Avocado oil, Robusta coffee extract, hydrolyzed collagen

Hepatotoxicity

Hydroxycut has been associated with at least 50 instances of clinically apparent acute liver injury, but the specific Hydroxycut product implicated in different cases has varied and the specific ingredients responsible for liver injury remain unclear. In reported cases, the onset of injury was generally within 2 to 12 weeks of starting regular use. The typical presenting symptoms were fatigue, nausea, and abdominal pain followed by dark urine and jaundice. The pattern of liver injury was hepatocellular with serum aminotransferase levels as high as several thousand U/L, while alkaline phosphatase levels tended to be normal or minimally elevated (less than 3 times ULN). Liver biopsies showed an acute hepatitis-like picture, and severe cases were associated with confluent, submassive or massive necrosis. Immunoallergic and features were not common although autoantibodies were detected in a proportion of cases. The mortality rate overall was approximately 10% among cases with jaundice. In nonfatal cases, symptoms resolved within 1 to 8 weeks and laboratory tests return to normal within two to three months. The phenotype associated with Hydroxycut products was clearly an acute, self-limited viral hepatitis-like syndrome. Nevertheless, rare instances of cholestatic or mixed hepatitis with prolonged jaundice have also been reported in patients taking Hydroxycut products.

Likelihood score: B (likely cause of clinically apparent liver injury).

Mechanism of Injury

The cause of acute liver injury associated with Hydroxycut products was attributed to ephedra in the past and more recently to green tea extract (Camellia sinensis). Indeed, the clinical features of cases resemble those associated with the liver injury associated with green tea extracts. Green tea is rich in catechins, antioxidants that are oxidized by the fermentation processes that yield black tea. The most active catechin is epigallocatechin 3-

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gallate (EGCG), which is believed to be responsible for the antioxidant activity of green tea extract. In high doses, catechins and specifically EGCG causes acute hepatocellular injury in mice and rats, but the equivalent dose in humans (30-90 mcg/kg) is considerably higher than is usually administered in typical weight loss products (3-12 mg/kg). However, environmental and host factors may alter susceptibility to catechin injury, such as nutritional status, obesity, fasting and antioxidant status including hepatic glutathionine levels. This explanation of liver injury, however, does not explain recent cases of liver injury attributed to Hydroxycut cases, as the product now does not generally contain green tea extract (at least according to the product labels).

Outcome and Management

The acute hepatic injury associated with Hydroxycut exposure is usually self-limiting and resolves within 1 to 3 months. There is no evidence that corticosteroids are beneficial. Fatal cases of liver injury have been reported with Hydroxycut use. There is little information or cross reactivity to other weight loss products, but avoidance of green tea extract containing supplements is prudent. It is important to report cases of liver injury associated with HDS use and it is helpful to retrieve the actual product being used to verify the name, manufacturer and lot number as well as for possible future toxicologic analysis.

Drug Class: Herbal and Dietary Supplements, Nutritional Supplements, Multi-Ingredient

CASE REPORT

Case 1. 27 year old man with hepatitis attributed to Hydroxycut.

[Modified from Case 1: Stevens T, Qadri A, Zein NN. Two patients with acute liver injury associated with use of the herbal weight-loss supplement Hydroxycut. Ann Intern Med 2005; 142: 477-8. PubMed Citation]

A 27 year old man developed fatigue and jaundice 4 to 5 weeks after starting Hydroxycut (9 tablets per day) for weight loss. He denied previous liver disease, alcohol abuse, recent travel or risk factors for viral hepatitis. He denied taking any other medications or herbal preparations. Laboratory tests showed serum bilirubin of 7.8 mg/dL and marked elevations in serum aminotransferase levels (ALT 3131 U/L, AST 1808 U/L), with minimal increases in alkaline phosphatase (171 U/L) (Table). Liver tests worsened for a day and then rapidly improved.

Key Points

Medication:	Hydroxycut (1.8 grams C. sinensis extract per day)
Pattern:	Hepatocellular (R=54)
Severity:	3+ (jaundice, hospitalization)
Latency:	4-5 weeks
Recovery:	1-2 months
Other medications:	None

Laboratory Values

Time After Starting	Time After Stopping	ALT (U/L)	Alk P (U/L)	Bilirubin (mg/dL)	Other
	Started Hydroxycut (1.86 g green tea extract daily)				
5 weeks	0	3131	171	7.8	Admission
	2 days	3962			Peak values
9 weeks	4 weeks	304		1.3	
Normal Values		<40	<150	<1.2	

Comment

Green tea hepatotoxicity typically presents with jaundice and an acute viral hepatitis-like syndrome, and a markedly hepatocellular pattern of serum enzyme elevations and rapid improvement upon stopping. Hydroxycut contains high concentrations of green tea extract, although formulations frequently change. Because Hydroxycut, like many dietary supplements, is a brand of many products with many ingredients, it is difficult to implicate a specific ingredient of the product as the cause for liver injury. Other listed components of Hydroxycut products currently include calcium, chromium, potassium Garcinia cambogia, Gymnema sylvestre leaf extract, glucomannan, alpha-lipoic acid, willow bark extract, L-carnitine, caffeine, guarana extract, gelatin, silica and cellulose. The product implicated in this report from 2005, however, may have had other components including ephedra and green tea.

PRODUCT INFORMATION

REPRESENTATIVE TRADE NAMES

Hydroxycut*

DRUG CLASS

Herbal and Dietary Supplements

COMPLETE LABELING

Product labeling at DailyMed, National Library of Medicine, NIH

CHEMICAL FORMULAS AND STRUCTURES

DRUG	CAS REGISTRY NUMBER	MOLECULAR FORMULA	STRUCTURE
EGCG	989-51-5	C22-H18-O11	HO OH OH OH OH OH

Table continued from previous page.

DRUG	CAS REGISTRY NUMBER	MOLECULAR FORMULA	STRUCTURE
Ephedra sinica	OM54525000	Unspecified	Unspecified

ANNOTATED BIBLIOGRAPHY

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(Expert review of hepatotoxicity published in 1999; Hydroxycut is not discussed).

Seeff L, Stickel F, Navarro VJ. Hepatotoxicity of herbals and dietary supplements. In, Kaplowitz N, DeLeve LD, eds. Drug-induced liver disease. 3rd ed. Amsterdam: Elsevier, 2013, pp. 631-58.

(Review of hepatotoxicity of herbal and dietary supplements [HDS]; mentions that Hydroxycut has been implicated in cases of acute liver injury some of which were severe and even fatal).

Ma Huang. Ephedra sinica. In, PDR for Herbal Medicines. 4th ed. Montvale, New Jersey: Thomson Healthcare Inc. 2007: pp. 543-52.

(Compilation of short monographs on herbal medications and dietary supplements).

Green tea. In, PDR for Herbal Medicines. 4th ed. Montvale, New Jersey: Thomson Healthcare Inc. 2007: pp. 414-422.

(Compilation of short monographs on herbal medications and dietary supplements).

Haller CA, Benowitz NL. Adverse cardiovascular and central nervous system events associated with dietary supplements containing Ephedra alkaloids. N Engl J Med 2000; 343: 1833-8. PubMed PMID: 11117974.

(Systematic review of 140 reports of adverse events due to ephedra products submitted to the FDA over a 2 year period, including hypertension, palpitations, arrhythmias, myocardial infarction, seizures and stroke, 10 were fatal and 13 led to disability; no mention of hepatotoxicity).

Abourashed EA, El-Alfy AT, Khan IA, Walker L. Ephedra in perspective – a current review. Phytother Res 2003; 17: 703-12. PubMed PMID: 12916063.

(Review of history, botany, chemistry, pharmacology, clinical efficacy and safety of ephedra; by the year 2000, the FDA had received 1000 injury reports, often attributed to misuse, abuse or mislabeling of the product; only one report of hepatitis).

Russo MW, Galanko JA, Shrestha R, Fried MW, Watkins P. Liver transplantation for acute liver failure from drug-induced liver injury in the United States. Liver Transpl 2004; 10: 1018-23. PubMed PMID: 15390328.

(Among ~50,000 liver transplants reported to UNOS between 1990 and 2002, 270 [0.5%] were done for drug induced acute liver failure, including 7 [5%] for herbal medications, one due to chaparral and one to kava; Ma Huang, ephedra and green tea not mentioned).

Nelson R. FDA issues alert on Ephedra supplements in the U.S.A. Lancet 2004; 363: 135. PubMed PMID: 14733193.

(Report on FDA ruling that ephedrine alkaloids present an unreasonable risk of injury, after review of \sim 155 deaths blamed on ephedra).

- Stevens T, Qadri A, Zein NN. Two patients with acute liver injury associated with use of the herbal weight-loss supplement Hydroxycut. Ann Intern Med 2005; 142: 477-8. PubMed PMID: 15767636.
- (27 and 30 year old men developed jaundice 2 and 5 weeks after starting Hydroxycut [bilirubin 7.8 and 7.8 mg/dL, ALT 3131 and 45 U/L, Alk P 171 and 530 U/L], resolving in 1-2 months: Case 1).
- Jones FJ, Andrews AH. Acute liver injury associated with the herbal supplement hydroxycut in a soldier deployed to Iraq. Am J Gastroenterol 2007; 102: 2357-8. PubMed PMID: 17897352.
- (19 year old male US Army soldier in Iraq developed jaundice 4 months after starting Hydroxycut for weight loss [bilirubin 11.7 mg/dL, ALT 1143 U/L, Alk P 153 U/L], resolving in 4 months of stopping).
- Dara L, Hewett J, Lim JK. Hydroxycut hepatotoxicity: a case series and review of liver toxicity from herbal weight loss supplements. World J Gastroenterol 2008; 14: 6999-7004. PubMed PMID: 19058338.
- (Two women ages 33 and 40 years with onset of symptoms 1 and 4 weeks after starting Hydroxycut [bilirubin 0.7 and 20.9 mg/dL, ALT 1150 and 934 U/L, Alk P 299 and 112 U/L], resolving rapidly, ingredients including green tea but not ephedra; review of liver injury due to weight loss supplements including Ma Huang, Lipokinetix, Kava, green tea, Shou Wu Pian, germander and usnic acid).
- García-Cortés M, Borraz Y, Lucena MI, Peláez G, Salmerón J, Diago M, Martínez-Sierra MC, et al. [Liver injury induced by "natural remedies": an analysis of cases submitted to the Spanish Liver Toxicity Registry]. Rev Esp Enferm Dig 2008; 100: 688-95. Spanish. PubMed PMID: 19159172.
- (Among 521 cases of drug induced liver injury submitted to Spanish registry, 13 [2%] were due to herbals, but none were attributed to a Hydroxycut product, green tea, ephedra or Ma Huang).
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- (Among 300 cases of drug induced liver disease in the US collected between 2004 and 2008, 9% of cases were attributed to herbal medications including at least one case attributed to a Hydroxycut weight loss product, but details were not provided).
- Shim M, Saab S. Severe hepatotoxicity due to Hydroxycut: a case report. Dig Dis Sci 2009; 54: 406-8. PubMed PMID: 18661239.
- (28 year old man developed jaundice 3 months after starting Hydroxycut [containing green tea extract] for weight loss [bilirubin 18.1 mg/dL, ALT 2272 U/L, Alk P 152 U/L, ANA 1:40], with rapid improvement on stopping).
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- (Overview of the regulatory environment, clinical patterns, and future directions in research on HDS with specific discussion of Hydroxycut and traditional Chinese herbal medicines).
- Chen GC, Ramanathan VS, Law D, Funchain P, Chen GC, French S, Shlopov B, et al. Acute liver injury induced by weight-loss herbal supplements. World J Hepatol 2010; 2: 410-5. PubMed PMID: 21173910.
- (Three women, ages 31, 37 and 53 years, taking Hydroxycut [n=1] or Herbalife [n=2] weight loss formulas developed jaundice 3, 4 and 12 months after starting product [bilirubin 15.3, 29.9, and 18.2 mg/dL, ALT 1227, 2068 and 983 U/L, Alk P 268, 185 and 292 U/L], resolving within 2-3 months of stopping).
- Fong TL, Klontz KC, Canas-Coto A, Casper SJ, Durazo FA, Davern TJ 2nd, Hayashi P, et al. Hepatotoxicity due to Hydroxycut: a case series. Am J Gastroenterol 2010; 105: 1561-6. PubMed PMID: 20104221.

(Details of 17 US cases of hepatotoxicity due to Hydroxycut in the US reported to the FDA between 2002 and 2009; latency to onset 2-12 weeks [2 outliers at 1 and 2 years], hepatocellular pattern of injury, often severe, 4 were fatal or led to liver transplantation).

- Reuben A, Koch DG, Lee WM; Acute Liver Failure Study Group. Drug-induced acute liver failure: results of a U.S. multicenter, prospective study. Hepatology 2010; 52: 2065-76. PubMed PMID: 20949552.
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- Rashid NN, Grant J. Hydroxycut hepatotoxicity. Med J Aust 2010; 192: 173-4. PubMed PMID: 20121691.
- (23 year old woman developed jaundice approximately 8 weeks after starting Hydroxycut [bilirubin 6.6 mg/dL, ALT 2950 U/L, Alk P 121 U/L], resolving within 4 weeks of stopping).
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regulations regarding herbal and dietary supplements and role of FDA, Department of Agriculture, Federal Trade Commission and Office of Dietary Supplements of the NIH in assessment of safety of HDS products including actions taken against Hydroxycut, Lipokinetix and OxyELITE Pro when reports of liver injury appeared in postmarketing phase).

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- (Review of the frequency, clinical features, patterns of injury and outcomes of HDS hepatotoxicity with specific mention of anabolic steroids, black cohosh, germander, green tea, kava, pyrrolizidine alkaloids and proprietary multiingredient nutrition supplements [MINS] such as Hydroxycut products).
- Vega M, Verma M, Beswick D, Bey S, Hossack J, Merriman N, Shah A, et al; Drug Induced Liver Injury Network (DILIN). The incidence of drug- and herbal and dietary supplement-induced liver injury: preliminary findings from gastroenterologist-based surveillance in the population of the State of Delaware. Drug Saf 2017; 40: 783-7. PubMed PMID: 28555362.
- (A prospective, population based registry of cases of drug induced liver injury occurring in Delaware during 2014, identified 20 cases [2.7 per 100,000] overall, including 6 due to HDS products, all of which were proprietary multiingredient supplements, but none were Hydroxycut products).
- Navarro VJ, Khan I, Björnsson E, Seeff LB, Serrano J, Hoofnagle JH. Liver injury from herbal and dietary supplements. Hepatology 2017; 65: 363-73. PubMed PMID: 27677775.
- (Review of the problems of liver injury and HDS products and challenges for future research concludes that stronger regulations are needed to address the increasing number of cases of HDS induced liver injury, particularly those linked to use of multiingredient dietary supplements such as Hydroxycut products).
- Adike A, Smith ML, Chervenak A, Vargas HE. Hydroxycut-related vanishing bile duct syndrome. Clin Gastroenterol Hepatol 2017; 15: 142-4. PubMed PMID: 27151488.
- (49 year old woman developed jaundice 4 weeks after starting Hydroxycut for weight loss [bilirubin 6.9 mg/dL, ALT 115 U/L, Alk P 299 U/L], which improved after stopping but was followed by persistent Alk P elevations [237 to 253 U/L] without jaundice while liver biopsy showed bile duct loss).

Hu J, Webster D, Cao J, Shao A. The safety of green tea and green tea extracts consumption in adults - results of a systematic review. Regul Toxicol Pharmacol 2018 Mar 23. [Epub ahead of print] PubMed PMID: 29580974.

(Extensive review of published toxicology of green tea concludes that hepatotoxicity may occur with high doses, the safe level in adults being 338 mg of EGCG daily when taken as pills or powder and 704 mg daily in tea preparations in beverage form).