

**ASSOCIATION OF ANTIDEPRESSANT USE AND OBESITY AMONG CHILDHOOD CANCER SURVIVOR STUDY
(CCSS) PARTICIPANTS**

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Background: Several agents used for the treatment of psychiatric disorders, including paroxetine (Paxil), risperidone (Risperdal) and valproate (Depakote) are associated with weight gain in the general population. **Methods:** We evaluated these exposures as well as demographic, lifestyle, and treatment factors that could be associated with obesity (body mass index (BMI) ≥ 30 kg/m²) among 9284 adult (> 18 years of age) CCSS survivors and 2861 adults within the CCSS sibling cohort (Sibs). **Results:** Adjusted for sex, race/ethnicity and age, neither overweight nor obesity was more prevalent among CCSS survivors than among Sibs ($p = 0.23$). In multivariable analyses restricted to the CCSS survivors, the relative risk (RR) of obesity (adjusted for age, sex, race/ethnicity) was higher among those who received cranial radiation (CRT) doses of 2000 – 3000 cGy (RR, 1.42, 95% CI, 1.19 to 1.69, $p < 0.01$), and among those who received paroxetine during the preceding two years (RR, 1.58, 95% CI, 1.19 to 2.09, $p < 0.01$); risks were lower among those who met Centers for Disease Control guidelines for vigorous physical activity (RR, 0.75, 95% CI, 0.65 to 0.86, $p < 0.01$) or reported leisure time physical activity during the previous month (RR, 0.87, 95% CI, 0.76 to 1.00, $p = 0.04$). Scores on the Brief Symptom Inventory depression, anxiety and somatic distress scores ≥ 63 were not associated with an increased RR for obesity in the multivariable model. **Conclusion:** These preliminary data suggest that antidepressant use may contribute to obesity in adult CCSS participants. This observation requires confirmation in a longitudinal study of BMI change in relation to the timing of psychiatric drug initiation and discontinuation.