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Results of Clinical tests of women with diabetes mellitus type II, treated with ketoconazole.

Group 1 consists of 3 patients (mean age: 46 years) treated with ketoconazole for 2 weeks, administered orally 22.00 in the evening in the dose of 400 mg.

Group 2 consists of 5 patients (mean age: 51 years) treated with ketoconazole for 6 weeks, administered orally 22.00 in the evening in the dose of 400 mg.

Results are expressed as mean values within groups.

Variables studied	Group 1		Group 2	
	Before t.	After t.	Before t.	After t.
Fasting blood glucose (mmol/L)	10.20	8.77	7.20	7.10
Blood glucose (mmol/L) 2 hours after start of an i.v. glucose infusion	9.73	7.90	6.48	5.76
GIR (glucose infusion rate during euglycemic glucose clamp expressed as mg glucose per minute divided by lean body mass), indicating insulin sensitivity	0.9	1.85	2.97	4.32
Fasting serum total cholesterol (mmol/L)	5.80	5.67	4.80	4.10
Systolic blood pressure (mm Hg) measured after 5 min. in supine position. 2 measurements averaged	140	135	125	123
Diastolic blood pressure (mm Hg) measured after 5 min. in supine position. 2 measurements averaged	70	70	75	72
Serum-ASAT (μ kat/L)	0.36	0.33	0.26	0.25
Serum-ALAT (μ kat/L)	0.61	0.52	0.40	0.37

The use of ketoconazole or molecules resembling ketoconazole but with some side-chains, not affecting the biological activity compared to ketoconazole, changed, for the manufacture of drugs for medical treatment of diabetes mellitus type II as well as for counteracting the other risk factors being part of the metabolic syndrome (also known as “the deadly quartet” or “Syndrome X” or the “Insulin Resistance Syndrome”).

What is claimed is:

1. A method for the medical treatment of diabetes mellitus type II and for counteracting the risk factors forming part of the Metabolic syndrome (also known as “the deadly quartet” or “syndrome X” or the Insulin Resistance Syndrome) in a patient having increased cortisol activity, which method of treatment comprises decreasing said increased cortisol activity in said patient by the steps of providing an inhibitor of cortisol synthesis and administering an effective amount of said inhibitor to said patient in need thereof.

2. The method according to claim 1 wherein said inhibitor is a compound or mixture of compounds selected from the group consisting of:

ketoconazole; and

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derivatives thereof having a corresponding biological activity as compared to ketoconazole.

3. A method for the medical treatment of diabetes mellitus type II and for counteracting the risk factors forming part of the Metabolic Syndrome (also known as “the deadly quartet” or “syndrome X” or the Insulin Resistance Syndrome) in a patient having increased cortisol activity, which method of treatment comprises decreasing said increased cortisol activity in said patient by the steps of: providing an inhibitor of cortisol synthesis; providing testosterone; and co-administering to said patient in need thereof: an amount of said inhibitor effective to decrease the increased cortisol activity in said patient; and an amount of testosterone effective to normalize any decrease in said patient’s testosterone cause by said administration of said inhibitor.

4. The method according to claim 1, wherein the daily dose of the inhibitor is between 100 and 800 mg.

5. The method according to claim 2, wherein the daily dose of the inhibitor is between 100 and 800 mg.

6. The method according to claim 4 wherein 400 mg. of said inhibitor is administered to the patient in the evening.

7. The method according to claim 5 wherein 400 mg. of said inhibitor is administered to the patient in the evening.

8. A method for treating insulin insensitivity in a patient having increased cortisol activity, which method comprises decreasing the increased cortisol activity in said patient by the steps of providing an inhibitor of cortisol synthesis; and administering an amount of said inhibitor effective to decrease the increased cortisol activity to said patient in need thereof.

9. The method according to claim 8 wherein said inhibitor is ketoconazole, or derivatives thereof having a corresponding biological activity as compared to ketoconazole, or a mixture of both.

10. The method according to claim 8 wherein the daily dose of said inhibitor is between 100 and 800 mg.

11. The method according claim 10 wherein 400 mg. of said inhibitor is administered to the patient in the evening.

12. The method according to claim 8 wherein the patient is suffering from diabetes mellitus type II with insulin insensitivity.

13. A method of treating insulin insensitivity in a patient having increased cortisol activity, which method comprises decreasing the activity of cortisol in said patient by the steps of: providing an inhibitor of cortisol synthesis; providing testosterone; and co-administering to said patient in need thereof: an amount of said inhibitor effective to decrease said increased activity of cortisol in said patient; and an amount of said testosterone effective to normalize any decrease in said patient’s testosterone caused by said administration of said inhibitor.

14. The method according to claim 3, wherein the dose of the inhibitor is between 100 and 800 mg daily.

15. The method according to claim 3, wherein 400 mg of the inhibitor is administered to said patient in the evening.

16. The method according to claim 3, wherein the inhibitor is ketoconazole.

17. The method according to claim 13, wherein the dose of the inhibitor is between 100 and 800 mg daily.

18. The method according to claim 13, wherein 400 mg of the inhibitor is administered to said patient in the evening.

19. The method according to claim 13, wherein the inhibitor is ketoconazole.