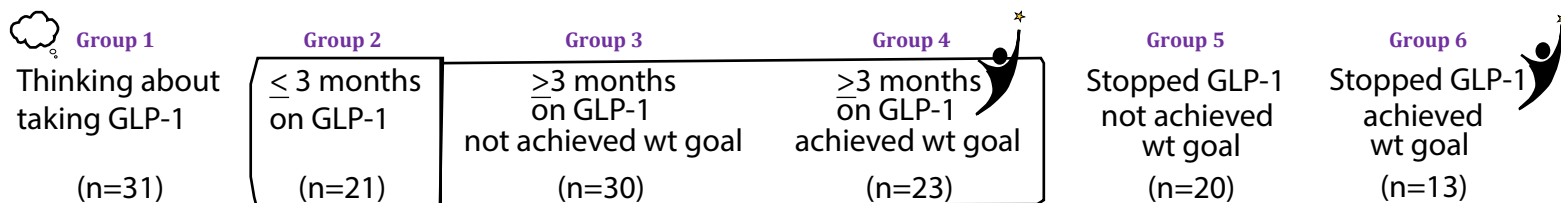


THANK YOU FOR ALL YOUR SUPPORT

SEPTEMBER 2025

wtmeds@umsystem.edu

Drs. DePietro and McElroy



## HERE'S WHO JOINED THE STUDY

Average age: 45 year old (range 19-79 years)

♀ 2/3<sup>rd</sup> ♂ 1/3<sup>rd</sup>

80% White, 5% Black, 5% Hispanic, 3% Multi

4% high school  
24% some college  
72% college grad

Income

31% < \$40K  
28% \$40-100K  
16% \$100K-175K  
25% > \$175K

## Important pointers as folks get going on the medication

Since a common effect of the medication is loss of appetite, prioritize to eat protein, protein, protein

Communicate with your doctor about dose increases or decreases, or change medication to address side effects

Plateau in weight loss is common that might mean going up in dose or it might mean adjusting food choices/amount and exercise routine.

## Food noise

"It's just really helps me live my life and not focus on food so much. I feel stronger. I feel this is how I always should have been. I feel I've been normal and have a little moment like, oh, this is how everyone feels; they're not constantly, thinking what are we going to eat" (33 yo Hispanic female)

"I feel like it's a lot of just reminding myself that it's like in my head and it's just food noise. I just need to worry about eating the way, that I've planned and how I've done it." (35 yo white female) Group 5

## Fears about availability of meds

In 2026, many insurers, including Medicaid and private plans, are limiting or dropping coverage for GLP-1 medications used solely for weight loss due to high costs.

"The thing right now is the financial aspect of it. It's tripled in price since last year and there's authorization issues. So that is a factor now, so that kind of worries me" (33 yo Hispanic female)

"I don't understand why insurance companies won't cover situations like this where it helps you lose weight so that you're healthier in the long run rather than become diabetic in 5-10 years down the road and insulin costs how much a month" (60 yo white female)

## Suggestions by those who are off the meds and achieved their weight

**Group 5 consistent message was to institute lifestyle changes while on the medication, such as portion size, smart dietary choices, and incorporating physical activity to have changes stick.**

"Make sure to keep up all the habits you were doing. That's the only thing that's going to help" (35 yo Black female)

"I put every pound back on [previous wt loss strategy] and I'm like that's because you're not making the changes, and I've told a number of people if you don't make those changes, this is what happens and we've got to make the lifestyle changes, not just the medicine. The medicine works wonders. That's proven. That's a given." (63 yo White female)

"I would say you have to mirror your life style, your choices to what you're doing with the medication. You can't just simply rely on the medication to be a wonder drug, which, quite honestly, I think it is...Because if you don't have that balance, then you're going to end up losing weight, bouncing back to where you were and be in the same position all over." (53 yo Hispanic male)

## Length on medication

32% plan to use it short term

26% don't plan to get off the meds

30% don't know

12% will talk with their doctor

"Boy I guess two thoughts. One I probably shouldn't be on medication the rest of my life if I don't need to be on it. Second, I don't want to go back to where I was and if this helps, it's like blood pressure medication..." (55 yo White male)

"I think I'm still hung up on it not being long-term ...I would see this as the equivalent of needing to speak to a psychiatrist or a marriage counselor to get through a point in time." (47 yo white male)

"When you think about diets or Paleo or whatever, they're not long term solutions. To me this could be a longer term solution" (51 yo white female)

If anyone knows any men who is not longer on GLP-1 medication and achieved weight loss, we would like to talk to a handful of more men to get their perspectives. Tough group to find. Any help is much appreciated.

Please pass on our link: <https://redcap.link/wtmed>

Group 1  
Thinking about  
taking GLP-1  
(n=31)

Group 2  
≤ 3 months  
on GLP-1  
(n=21)

Group 3  
≥ 3 months  
on GLP-1  
not achieved wt goal  
(n=30)

Group 4  
≥ 3 months  
on GLP-1  
achieved wt goal  
(n=23)

Group 5  
Stopped GLP-1  
not achieved  
wt goal  
(n=20)

Group 6  
Stopped GLP-1  
achieved  
wt goal  
(n=13)

## Goal Weight (percent wt loss)

Our group who reported current and goal weight  
had a **GOAL** percent weight loss of...

Group 1: 17%  
Group 2: 27%  
Group 3: 30%  
Group 4: 24%  
Group 5: 20%  
Group 6: 37%

BODY MASS INDEX METER



Among us

**29% are Normal BMI Seekers** (goal BMI below 25)

"I'm not necessarily to the point where I want to lose anymore, it's more about gaining muscle now. and being more fit in life than the weight loss."  
(34 yo White female)

**48% are Overweight Acceptors** (goal BMI range of 25.0-29.9)

"It definitely changed my feelings about my body. I can look in the mirror and I see a different person than I was before the medication. So it's giving me a confidence boost when it comes to my body and my weight."  
(25 yo Hispanic male)

**23% are Obese and Motivated** (goal BMI of 30+)

"I don't want to gain the weight back ... nothing else has worked. I enjoy my current weight. I enjoy being smaller. I enjoy all of that." (42 yo White female)

An example of the Influence of Engagement on Digital Platform on weight loss in GLP-1 patients.

British researcher Johnson and colleagues evaluated a digital platform called Voy on weight loss in GLP-1 patients (like us) in ~50,000 participants from the UK.

<https://preprints.jmir.org/preprint/69466/accepted>

Voy program (direct-to-consumer access) via the web

Monthly subscription (US\$167/month) includes

medication (semaglutide or tirzepatide)-1 shot/month,  
lifestyle coaching (unlimited call check-ins),  
supporting resources (self-tracking tools)

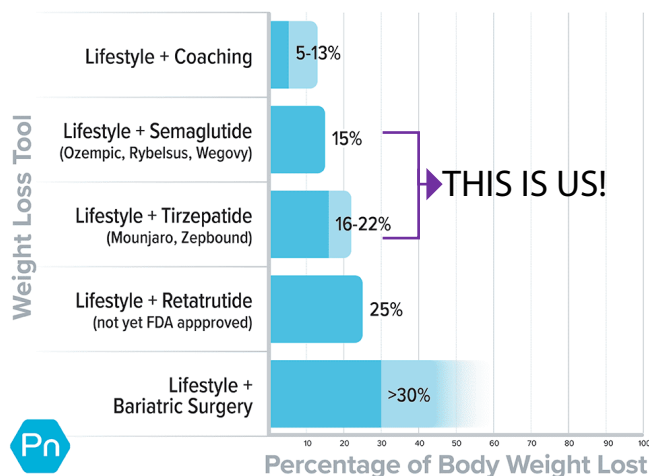
App's dynamic education content, adapts suggested content from patient's engagement with specific topics (nutrition, physical activity, lifestyle factors)

Lost 53% more weight than those using medication only.

**This finding supports our participants' advice**

"So I wasn't working out regularly prior to the medication, but I wanted to make sure that I was doing this the right way. So I started exercising more while I was taking the medication. So yes, I coupled it with that. I would like to say that the exercise helps, but quite honestly, I mean it might have helped save some muscle mass" (53 yo Hispanic male)

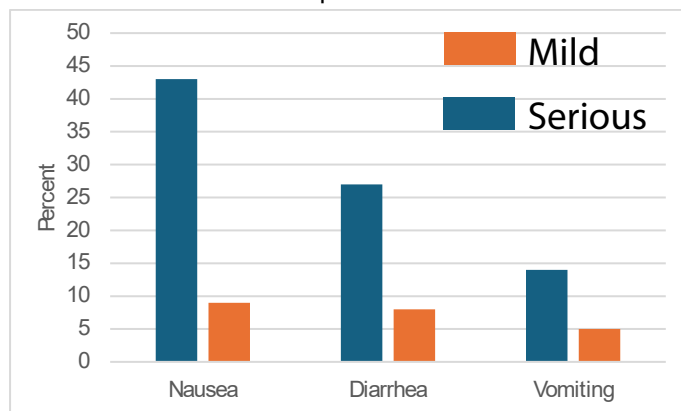
## EFFECTIVENESS OF COMMON WEIGHT LOSS TOOLS



## Side Effects

In the RAND American Life Panel (Apr-May 2025, n=1,262), 3 common side effects were nausea, diarrhea, and vomiting. **Besides these, our group also often reported burping & constipation. Many participants reduced severity by lowering the dose, switching meds, adjusting timing of shots or food choices or simply allowing time to pass, though these strategies did not work for everyone.**

Percent of GLP-1 users who reported mild or serious side effects



[https://www.rand.org/pubs/research\\_reports/RRA4153-1.html](https://www.rand.org/pubs/research_reports/RRA4153-1.html)

"I don't really work with Wegovy very well it made me nauseous. Very nauseous. But the Zepbound I've never had any issue, so it's just helps me control my cravings and it works really well for me. So I can almost be effortless with weight loss." (60 yo White male)

"When it first started, I was very, very nauseous, and couldn't stomach eating breakfast. Kind of had to force myself. That's gotten better."  
(30 yo White male)