Study indicates surge in GLP-1RA prescriptions to treat obesity and prevent its complications

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Investigators at Cedars-Sinai and other institutions conducted a nationwide, population-based study to identify trends in the use of
glucagon-like peptide-1 receptor agonists (GLP-1RAs)—prescription medications sold under popular drug names like Ozempic and Wegovy—in the United States.

The study results, published in *Annals of Internal Medicine*, could help researchers evaluate how the prescription patterns of GLP-1RAs have changed over time, particularly for the use for treating type 2 diabetes versus obesity.

GLP-1RA medications are a newer class of medications that were originally developed to treat patients with type 2 diabetes. However, given their promising results, in 2021 the U.S. Food and Drug Administration approved the medications for chronic weight management in adults with obesity or those who are overweight with at least one weight-related condition, such as high blood pressure, prediabetes or blood vessel disease.

Since then, the demand for these drugs has skyrocketed, with a marked surge in GLP-1RA prescriptions for weight loss management. However, the steady swell in demand has also had downstream effects, leading to nationwide drug shortage and issues with accessibility.

"Essentially, after the medication was approved for obesity, GLP-1RA use took off so quickly that we lost control and vision of how fast people were picking up these medications, and the trends of use are uncertain," said the study's co-first author Ali Rezaie, MD, medical director of the Cedars-Sinai GI Motility Program and director of bioinformatics at the Medically Associated Science and Technology (MAST) program at Cedars-Sinai.

"While GLP1-RAs offer several benefits, they are also associated with various common and uncommon side effects, necessitating careful monitoring of their prescription patterns."
To gain insight into how GLP-1RAs have been prescribed and consumed over the years, Cedars-Sinai investigators used a real-world nationwide database containing medical records of about 45 million individuals with at least one outpatient or inpatient visit in the U.S. from 2011 through 2023.

During this timeline, the investigators found approximately 1 million new GLP-1RA users and classified them based on whether they had diabetes, obesity or other related conditions when they were prescribed the medication.

The researchers noted that between 2011 and 2023, semaglutide (a GLP-1RA) users were disproportionately female, non-Hispanic white and with a body mass index of 30 or greater. During the same period, the data also revealed that the proportion of new users with type 2 diabetes decreased.

"On the contrary, new GLP-1RA prescriptions among those with obesity or relevant comorbid conditions without type 2 diabetes doubled, with a notable uptick in medication use especially since 2020," Rezaie said.

This noticeable shift and rising trend in GLP-1RA prescriptions for those with obesity, scientists say, is crucial.

"This data suggests that more health care providers are seeing the benefits of these medications for treating obesity, which is a significant public health shift," said Yee Hui Yeo, MD, co-first author of the study and a clinical fellow in the Karsh Division of Gastroenterology and Hepatology at Cedars-Sinai.

"However, it also raises concerns about potential medication shortages and the need to ensure that patients with diabetes still have access to these treatments."
The researchers believe that the study's findings can play a crucial role in developing strategies to address the growing popularity and demand for GLP-1RAs.

"We hope our findings will inform health care policies and promote equitable access to these essential treatments," Yeo said.

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