

GLP-1



GLP-1 Injection

PATIENT GUIDE

This guide covers how the medication works, what to expect with dosing and titration, and when to reach out to the clinical team.

What Is a GLP-1?

GLP-1 stands for glucagon-like peptide-1, a natural hormone your body produces after eating. GLP-1 medications work by mimicking this hormone to help manage appetite, blood sugar, and digestion, supporting weight loss and metabolic health as part of a clinician-guided treatment plan.

How GLP-1 Dosing Works

GLP-1 medications are typically given as a once-weekly subcutaneous injection. **See additional documentation for how to administer a subcutaneous injection.**

Patients generally stay on the same dose for about 4 weeks or more, which allows the body to acclimate before any change is considered.

Adjusting your dose over time, known as titration, is always a clinical decision made by your clinician, and it does not happen automatically on a fixed schedule. The goal is to find the lowest dose that results in steady weight loss without triggering side effects, which is different for each individual.

Based on the information provided at your initial medical intake and subsequent monthly checkins, your clinician determines your starting dose, whether and when to increase it, and your maximum dose, based on your individual health, response, and goals.

Why Titrating Gradually Matters

- Increasing your dose too quickly can cause side effects strong enough that your clinician needs to pause your titration or temporarily lower your dose
- Going higher than necessary for your goals can also negatively affect your metabolism

What to Expect

Weight loss can be slow to start. This is done intentionally to prevent any side effects and help introduce your body to the medication.

- Typical weight loss in month 1 is roughly 0 to 5 lbs for many patients
- May take 2 to 3 weeks to notice appetite suppression, reduced food cravings, or less "food noise"
- Some people see results quickly, while others need 2 to 3 months. **This varies by person**

Please note that if you are taking Semaglutide or Tirzepatide compounded with B12, the liquid may appear red. This is standard and caused by the B12 additive.

What if your weight loss plateaus? Some patients notice their weight loss plateaus after being on a dose for 3–6 months. If this happens, communicate this with your clinician. They may recommend switching from Semaglutide to Tirzepatide (or vice versa), since the medications work differently and switching can sometimes restart progress.

Storage & Expiration

Storage: It is recommended to store your medication in the refrigerator, but always follow the pharmacy-specific storage instructions included with your medication if they differ.

Expiration: This medication expires 28 days after first puncture, regardless of how much remains. After that time, it should no longer be used.

Other Medication Timing

This medication can slow gut motility and the absorption of certain other medications, including Tylenol, Digoxin, Warfarin, oral contraceptives, Metformin, statins, ACE-inhibitors, and Griseofulvin. Take these medications at least 1 hour before your GLP-1 dose.

Required Labs

Lab testing is not required to start a GLP-1 therapy. However, the following labs are **required at 90-days and annually**: comprehensive metabolic panel (CMP), fasting insulin, hemoglobin A1c, CBC with differential, TSH, free T4, free T3, and Vitamin B12.

This lab testing is used to monitor the impact of your treatment plan on your biomarkers in addition to what can be reported in the monthly checkins.

Restarting After a Break

- Less than 2 weeks since your last dose: you can generally restart at your previous dose
- More than 2 weeks: talk to your clinician about how to restart based on your individual history
- More than 30 days: plan to restart at the beginning dose

Long-Term Maintenance

Once you're near your goal weight, or your BMI reaches around 24, your clinician may begin gradually tapering your dose toward a maintenance level: one where your appetite stays reasonably controlled but you're no longer losing weight. This gradual process is also a form of titration, and like dose increases, it is directed by your clinician. **It is not recommended to stop abruptly**; a slow, clinician-guided taper is safer and more effective.

Some patients may choose to remain on a low maintenance dose indefinitely for ongoing benefits such as anti-inflammatory effects, migraine or arthritis relief, cardiovascular support, or help with PCOS or fatty liver disease. This is a decision to make with your clinician based on your health and goals.

Who Shouldn't Take GLP-1 Medications

Do not take this medication if any of the following apply to you:

- Pregnant or breastfeeding
- Insulin-dependent diabetes, or non-insulin-dependent diabetes managed with certain blood-sugar-lowering medications
- A personal or family history of medullary thyroid cancer
- A history of a different (non-medullary) thyroid cancer depending on the type
- A personal or family history of multiple endocrine neoplasia
- Known allergy or hypersensitivity to semaglutide, tirzepatide, or any component of the formulation
- History of pancreatitis or active gallbladder disease, unless you've had your gallbladder removed
- Diagnosed gastroparesis, bowel obstruction, or another major GI motility disorder
- Personal history of disordered eating (such as anorexia, bulimia, or ARFID)
- Currently using another GLP-1 or GIP/GLP-1 receptor agonist

Talk to your clinician if any of the following apply to you:

- Prior bariatric surgery — your clinician will coordinate with your bariatric care team
- Diabetic retinopathy or recent rapid blood sugar changes — may worsen on GLP-1 medication

Possible Side Effects

Individual responses vary. Side effects aren't guaranteed, and some people experience none at all.

Common:

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| • Nausea | • Dyspepsia | • Bloating |
| • Diarrhea | • Abdominal pain | • Flatulence |
| • Decreased appetite | • Headache | • Heartburn |
| • Vomiting | • Fatigue | • Anxiety |
| • Constipation | • Dizziness | |

When to Contact the Clinical Team

Contact your clinician through the portal if you experience side effects listed above that are disruptive to your lifestyle.

Go to your nearest Emergency Room or call 911 right away if you have difficulty breathing, feelings of lightheadedness or dizziness, or swelling of your face, lips, tongue, or throat.

Questions?

Ask your clinical team through the portal if you have any questions or concerns.

This Information is made available to you through Altro. All content was provided, reviewed, and approved by the medical director of the clinical team.

