

Here's What Doctors Really Think of GLP-1 Drugs

It seems like the most popular medication in the world right now is Ozempic (semaglutide), the weight-loss drug touted by [celebrities](#), singers and politicians. But Ozempic, a GLP-1 agonist, isn't just good for losing weight. It's also an FDA-approved treatment for patients with type 2 diabetes, and can help them lower blood pressure and improve cardiovascular health.

As popular as Ozempic has become, it has growing competition. Ozempic maker Novo Nordisk is facing increased pressure from Eli Lilly's newest GLP-1 product Mounjaro (tirzepatide), and older GLP-1 products like Trulicity (dulaglutide) and Saxenda (liraglutide) are still on the market. In the United States, where [36 million people have type 2 diabetes](#), doctors, scientists and investors are waiting to see which medication will come out on top.

In the fall of 2023, the [Deerfield Institute](#), a division of Deerfield Management Company, surveyed 88 endocrinologists who treat more than 980 patients with diabetes, 75 percent of which had type 2 diabetes. The data they found, publicly released here for the first time, shows how doctors view the growing GLP-1 landscape.

The Number of Patients on GLP-1 Drugs is Rising — Quickly

Three years ago, several GLP-1 medications were on the market — yet the class of medications had not reached their current popularity. Doctors surveyed by Deerfield Institute said that three years ago, less than 30 percent of their patients with type 2 diabetes were prescribed GLP-1 drugs. A year ago, that rate was 37 percent. And now, it has leapt to 48 percent — nearly half of all patients with type 2 diabetes.

The increase in prescribing GLP-1 drugs comes from several factors, the doctors said. One is more patient awareness of the drugs. “The demand has grown significantly for GLP-1 thanks to social media and direct consumer advertising,” one doctor said. Multiple doctors noted that they now have patients coming in to directly request GLP-1 drugs.

Another reason for the increase in GLP-1 prescriptions is better insurance coverage. “Since GLP-1s have become more available on the market over the last few years, I have seen a noticeable increase in insurance coverage for these products,” another doctor said.

Finally, doctors said that the high efficacy of the products for weight loss, as well as other health benefits, lead to them writing more prescriptions. Possible cardiovascular benefits were also mentioned by multiple doctors as a selling point.

Ozempic Still Reigns Supreme

When it comes to the most popular GLP-1 drug, Ozempic is still the product most frequently prescribed by physicians. Endocrinologists said that 39 percent of their patients used Ozempic (semaglutide), 24 percent of patients utilized Trulicity (dulaglutide), and 19 percent of patients used Mounjaro (tirzepatide). That means while Eli Lilly holds the second and third place, Novo Nordisk still holds the top spot.

Physicians said their reasoning for prescribing different products included efficacy, with newer GLP-1 products seeming to be more effective than older versions. They also cited that they preferred products where patients only had to self-inject once a week, versus daily. Many doctors said that they would prescribe Mounjaro more often, but insurance often does not cover the product. Among the newer class of GLP-1s, physicians said they rarely prescribed Wegovy, Novo Nordisk's other semaglutide offering, due to global shortages.

In general, however, no matter which GLP-1 drug their patients were on, the vast majority of doctors said that they were “satisfied” or “very satisfied” with the medication results. They saw reductions in their patients' blood sugar levels, weight, and need for insulin across the board.

Doctors Predict Long-Term GLP-1 Use

One thing researchers have learned from studying GLP-1 medications is that many people who stop taking these drugs end up [gaining a substantial amount of weight back](#). For some patients, GLP-1s may be lifelong, or at least years-long, medications. The doctors surveyed said that about half their patients who were taking GLP-1 drugs were on them for a long time — an average of 3.5 years. Furthermore, a quarter of patients who are taking Mounjaro are on it indefinitely.

For the patients that do stop taking GLP-1 drugs, the reasons are often complex. Sometimes, the doctors said, it is because they switched to another GLP-1. Other times, it is because there were supply issues, or the patient had intolerable side effects.

Still, the doctors predict that GLP-1 use will only continue to rise in the future. In fact, they predicted that in the near future even more patients — even those with a normal BMI — will be on Ozempic and Mounjaro.

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