

Update on Pharmacologic Therapy for Weight Loss: Considerations for Nurses

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Objectives

1. Identify Key Weight Loss Medications
2. Understand Clinical Implications
3. Recognize Side Effects and Warnings
4. Discuss Patient Education Strategies
5. Evaluate Safety and Efficacy
6. Highlight Nursing Considerations

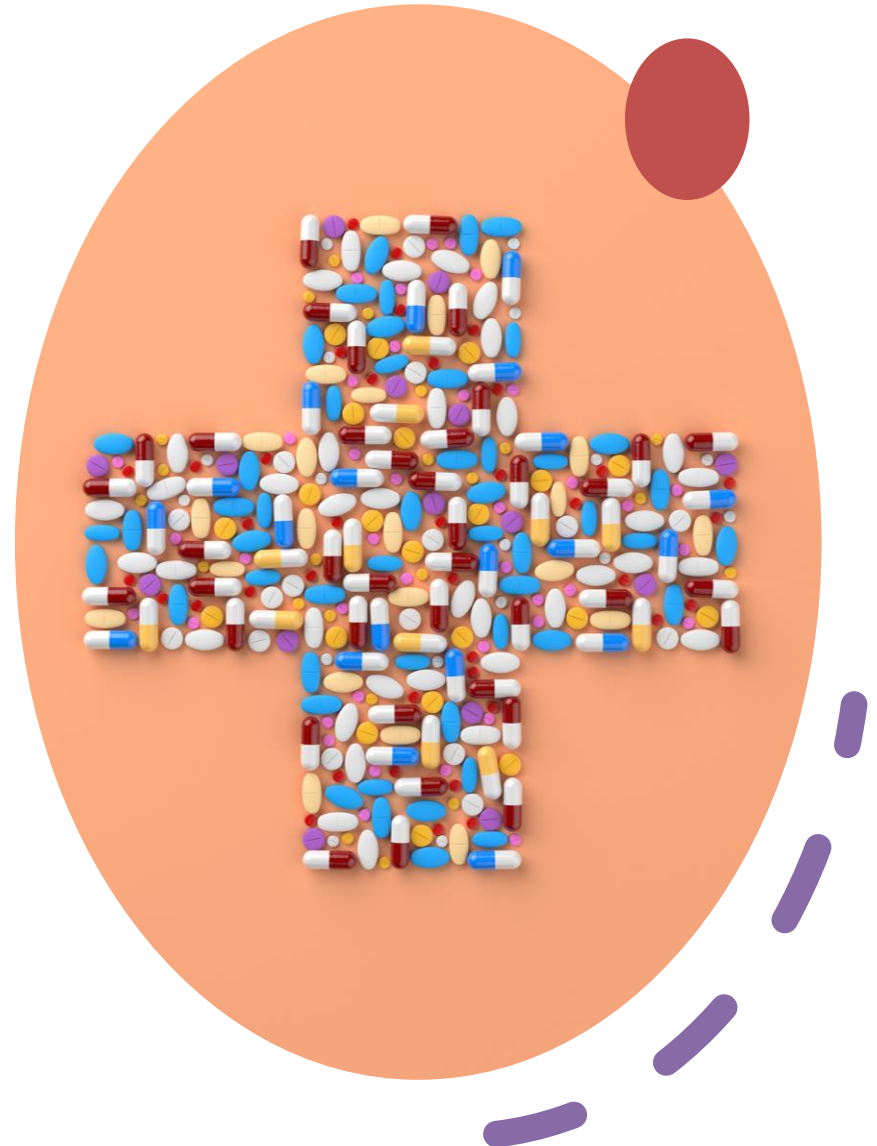
Myth Vs. Fact Activity

Let's assess your existing knowledge surrounding weight loss medications before we jump into discussion!

Go to the following website:

Join.nearpod.com

**Code will be
provided**



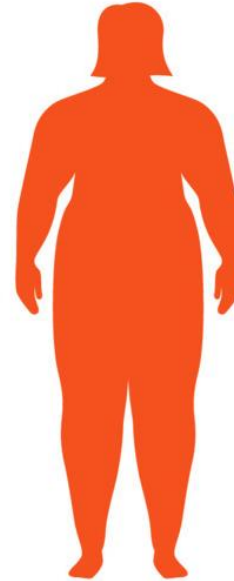
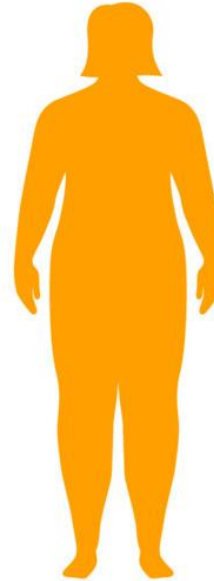
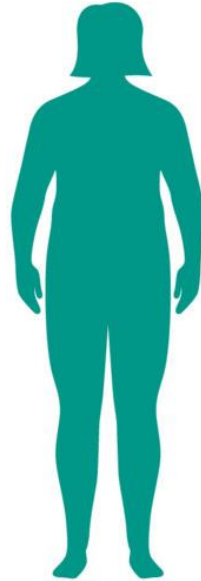
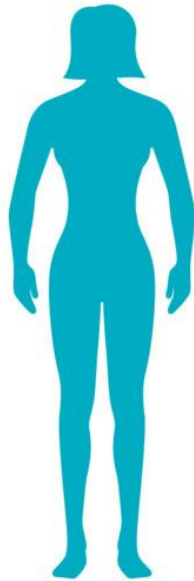
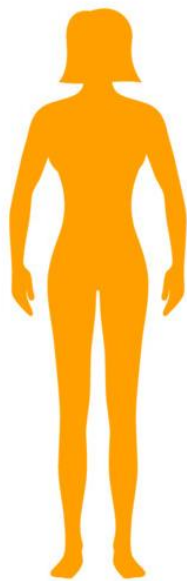
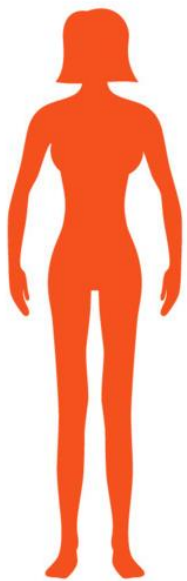
Examples of Social Media Influence

- <https://www.youtube.com/shorts/JmHPQzCK110>
- <https://www.youtube.com/shorts/YdvaYsYTWWA>
- <https://www.youtube.com/shorts/ia6LzdOUng>

Social Media & Weight Loss Medications: Hype vs. Reality

- Weight loss medications are trending across TikTok, Instagram, and YouTube
- Social media can amplify unrealistic body expectations
- Off-label use and misinformation are common
- Patients may pressure providers for medications they saw online
- Nurses play a key role in clarifying facts and setting expectations

BODY MASS INDEX (kg/m^2)



16 - 17

Moderate
Thinness

17 - 18.5

Mild
Thinness

18.5 - 25

Normal

25 - 30

Overweight

30 - 35

Obese
Class I

35 - 40

Obese
Class II

> 40

Obese
Class III

Obesity as a Chronic Condition

- Chronic, progressive, and relapsing disease
- Excessive fat accumulation that impacts health and increases the risk of conditions such as diabetes, hypertension, and cardiovascular disease.
- Influenced by multiple factors, including genetics, environment, metabolism, hormones, and behavior.
- Not just about diet and exercise—obesity involves complex neurohormonal regulation affecting appetite, satiety, and energy balance.

Obesity as a Chronic Condition

- Associated with systemic inflammation, which contributes to chronic diseases like type 2 diabetes and non-alcoholic fatty liver disease (NAFLD).
- Treatment requires a multimodal approach including lifestyle changes, behavioral therapy, medications, and in some cases, bariatric surgery.
- Weight loss of 5-10% can improve health outcomes, reducing the risk of cardiovascular disease, diabetes, and joint-related complications.
- Stigma and bias can impact treatment—healthcare providers should approach obesity with compassion and evidence-based strategies.

Weight Loss Medications

Oral Medications:

- - Phentermine (Adipex-P, Lomaira)
- - Orlistat (Xenical, Alli)
- - Naltrexone/Bupropion (Contrave)
- - Topiramate/Phentermine (Qsymia)

Injectable Medications:

- - Liraglutide (Saxenda)
- - Semaglutide (Wegovy)
- - Tirzepatide (Zepbound)

Clinical Pearls

- These medications are to be used in combination with dietary modifications and exercise
- AHA recommends **150 minutes of moderate intensity aerobic activity**



Mechanisms of Action: PO Meds

- **Phentermine:** Appetite suppressant
- **Orlistat:** Lipase inhibitor reducing fat absorption
- **Naltrexone/Bupropion:** Affects appetite and reward pathways
- **Topiramate/Phentermine:** Appetite suppression and increased satiety

Mechanism of Action: Vyvanse

- 1st FDA-approved medication to treat binge eating disorder
- Also used to treat ADHD
- Controls impulsive behavior
- Stimulant

Mechanism of Action:

Injectables

- **GLP-1 Agonists: (Liraglutide, Semaglutide, Tirzepatide):** Slows gastric emptying and promotes satiety, which decreases appetite.
- Increases the production of beta cells
- These injectables **are not insulin** but they do increase insulin production.

Semaglutide



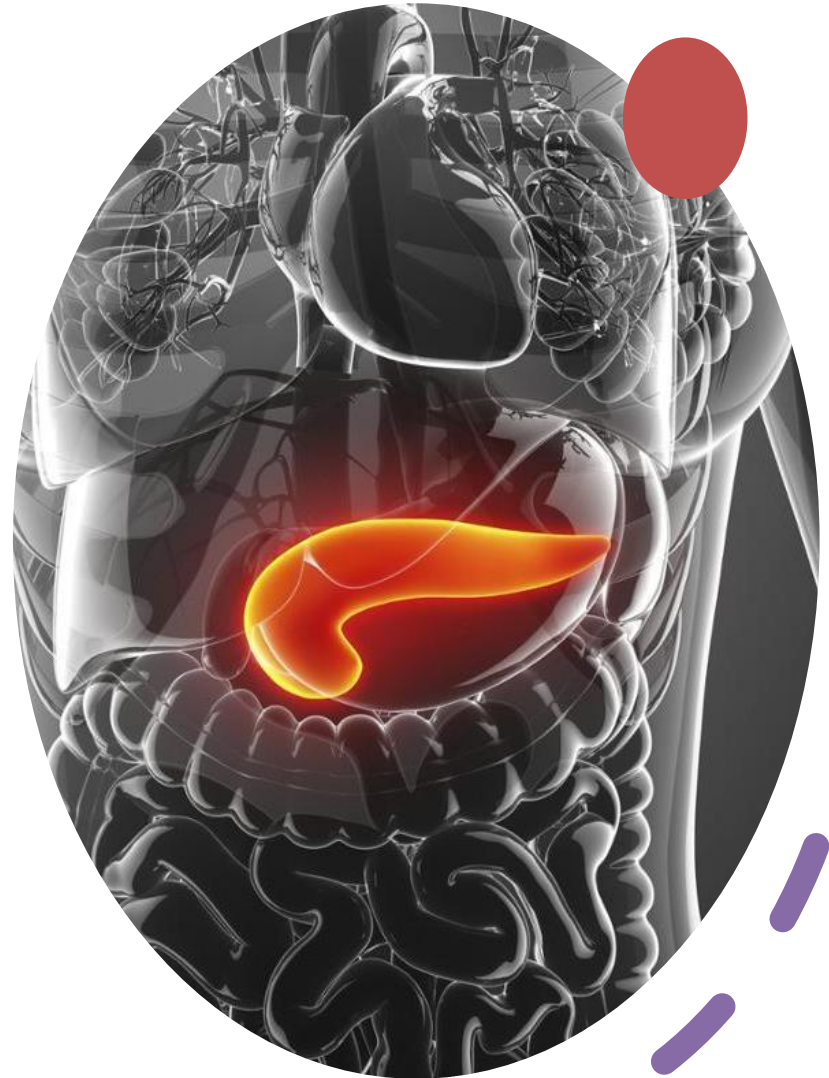
Clinical Indications for Weight Loss Mediations

Indications:

- - BMI ≥ 30 kg/m² or BMI ≥ 27 kg/m² with comorbidities
- - Patients with obesity-related conditions (e.g., diabetes, hypertension)

Contraindications

- Pregnancy and lactation
- Uncontrolled hypertension (Phentermine, Contrave)
- History of pancreatitis (GLP-1 agonists)
- Seizure disorders (Bupropion component of Contrave)



Side Effects & Black Box Warnings

Common Side Effects:

- - Nausea, vomiting, diarrhea, pancreatitis (**GLP-1 agonists**)
- - Dry mouth, insomnia (**Phentermine, Vyvanse**)
- - Oily stools, GI discomfort (**Orlistat**)

Black Box Warnings:

- Contrave**: Risk of suicidal thoughts (Bupropion component)
- **GLP-1 Agonists**: Risk of thyroid C-cell tumors (animal studies)
- Qsymia**: Risk of fetal harm (teratogenicity)

Literature Review

Animal Studies (Rodents):

- **GLP-1 receptor agonists caused C-cell tumors in rats and mice** when given long-term at high doses.
- The mechanism is believed to be GLP-1 receptor stimulation of C-cells, which are involved in calcitonin secretion in rodents.
- These findings led to a **black box warning** in the U.S. for medications like liraglutide (Saxenda) and semaglutide (Wegovy).

Patient Education Strategies

- Emphasize adherence to prescribed regimen
- Educate on potential side effects and warning signs
- Promote lifestyle modifications (diet, exercise)
- Set realistic expectations for weight loss
- Monitor for mental health concerns (acute psychosis from insomnia, suicidal ideation)

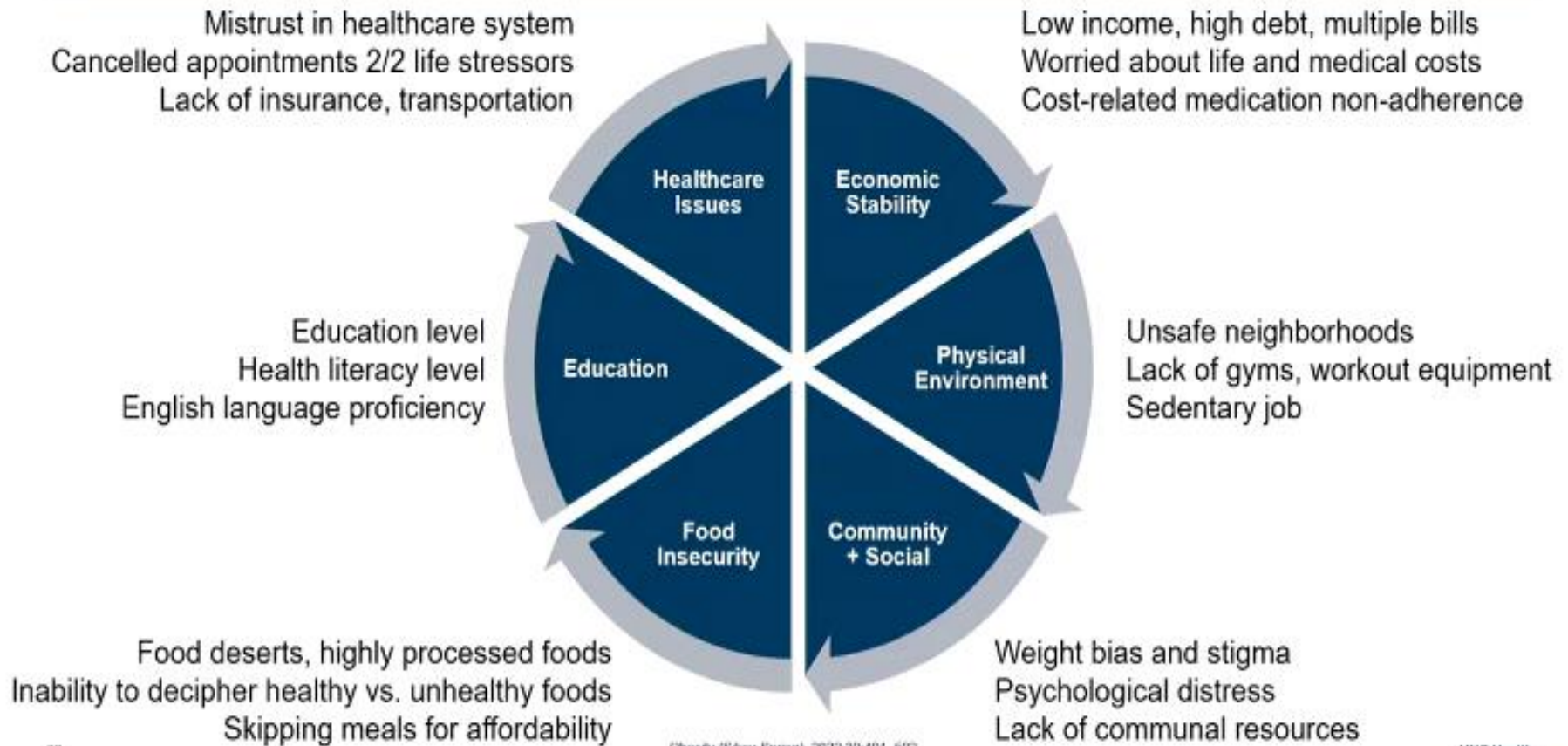
Safety and Efficacy

- **Semaglutide (Wegovy):** 14-15% weight loss in clinical trials
- **Tirzepatide (Zepbound):** Up to 20% weight loss
- **Qsymia & Contrave:** Moderate weight loss with lifestyle changes
- Long-term safety data still emerging, particularly for GLP-1 agonists

Efficacy Notes from the Literature

Medication/ Intervention	Average Weight Loss	Notes
Semaglutide (Wegovy)	~15% of body weight	Observed in STEP clinical trials
Tirzepatide (Zepbound)	15–22% of body weight	Based on SURMOUNT trials
Phentermine/Topira mate (Qsymia)	~9% of body weight	Oral combination medication
Orlistat (Xenical)	~5% of body weight	GI side effects, modest efficacy
Lifestyle changes alone	~5–7% with intensive support	Often difficult to sustain long-term

Barriers to Weight Management: Social Determinants of Health



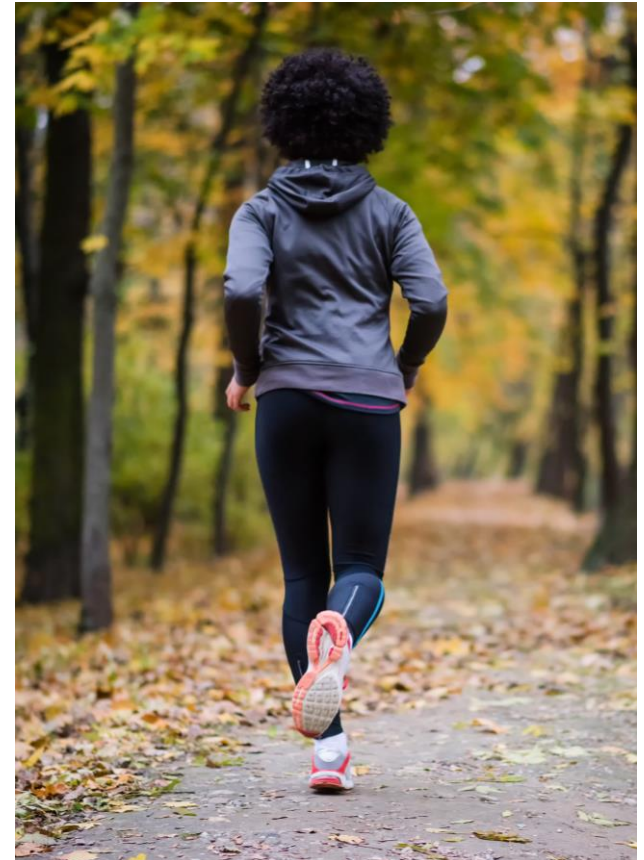
Nursing Considerations

- Monitor patients for adverse effects and adherence
- Assess vital signs, especially blood pressure
- Educate on proper medication administration (e.g., injection sites for GLP-1s, titrating doses safely)
- Counsel patients on lifestyle interventions
- Screen for contraindications and drug interactions



Occupational Health Nursing Considerations

- Consider **workplace wellness opportunities**: safe spaces to exercise, nutrition support.
- **Emphasize realistic expectations**: 5-10% weight loss is clinically significant.
- **Reinforce lifestyle changes**: Meal planning, hydration, stress management.
- Discuss stigma and **promote body-positive language in the workplace**.
- Be mindful of **equity in access**—some meds are costly or not covered.
- Reinforce the importance of ongoing support.



Key Take-aways

- Weight loss medications are valuable tools but require careful monitoring.
- Nurses play a key role in education, adherence, and safety.
- Always consider patient-specific factors when recommending weight loss interventions.

Questions?

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