

The Ozempic and Wegovy Craze

By Dr. Derek Conte

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Do Ozempic and Wegovy help to cause significant weight loss without really trying? Yes. That's why millions the world over are clamoring to get these drugs, making them scarce. Are they a safe, healthy way to lose weight? That's an important question, so let's explore them here.

Ozempic had its origins in 1988, when research was done on the hormone, GLP-1 (Glucagon-Like Peptide) GLP-1, which raises insulin levels in the blood, making glucose (a type of sugar) available to produce energy for our bodies. Some wondered: "Could this be re-engineered and given to diabetics to normalize blood sugar levels?" The result was named, "Semaglutide", and in 1993, Denmark tested it on humans for the first time.

In December of 2017, the FDA approved Ozempic for use with type II diabetes via self-injection into the skin once a week for the rest of one's life. It has since also been approved by the FDA for teenagers. The monthly cost for semaglutide can be \$1,300 or more --- 4 to 12 times higher than in Japan or Europe. This is because other nations negotiate with the drug makers, while the US does not. Source: Healthline (fact-checked) <https://www.healthline.com/health-news/heres-how-much-more-ozempic-costs-in-the-u-s-compared-to-other-countries>

Warnings include pancreatitis, retinopathy, hypoglycemia, kidney damage, hypersensitivity reactions and thyroid cancer. If the drug is stopped, there is an eventual rebound to the old weight, often to a higher weight than before. Source:

FDA https://www.accessdata.fda.gov/drugsatfda_docs/label/2020/209637s003lbl.pdf

How exactly does Ozempic work on the body of type II diabetics to lower blood sugar? It does this by tricking the hunger center of the brain into thinking you have eaten, even if you have not, even when your stomach is empty. It tells the brain "you're full" --- inducing a bodily state that logically led to significant weight loss in the diabetics using it.

The word got out and was an invitation to non-diabetics with weight problems (or anyone) to get the drug themselves, so they could eat whatever they wanted and still lose weight. Doctors started prescribing Ozempic "off-label" and the drug companies released Wegovy, a stronger version of Ozempic for the expressed purpose of weight loss. Source:

FDA https://www.accessdata.fda.gov/drugsatfda_docs/label/2021/215256s000lbl.pdf

These drugs slow (or arrest) the digestive process and stomach emptying (gastroparesis), reducing absorption of vital nutrients (malnutrition). The more people ate, the more undigested food remained in the stomach, leading to bloating, nausea, vomiting, diarrhea and constipation. But the darker side is that while casual observation noted the weight loss, we now know it was coming from good, lean muscle as well as fat.

The human body is very resourceful and will cannibalize energy stores from non-fatty body-tissues if forced to do so, especially in a starvation state which, in a way, is what these drugs strategically do. This is why those taking them are strongly advised to eat high protein diets and do high-resistance physical training to maintain lean muscle mass and bone strength.

Several my patients on Ozempic for a while began to appear thinner indeed, but also looser in the skin and less energetic, even frail due to the rapidity of the weight loss, rather than trimmer and more energetic. They also complained of a lot of body soreness. They talked with their doctor and got off the drug.

Another middle-aged male patient has always been grossly obese, and no previous amount of counseling or his efforts to lose weight were sufficient to make a dent in his problem. I have feared for his early demise over the years. He recently came in and proudly said he'd lost 40 lbs in two months --- a very rapid loss of weight. He has been using Wegovy. I discussed in detail how it works, the advisories on risks, diet and exercise, and asked if his prescribing physician had explained these things to him. They had not. I advised him to do some research on his own. In this particular patient's case, however, the benefits of the weight loss, long-term, may offset the negatives.

The old saying is true; "There is no free lunch". Someone's got to pay the bill. To get something you want, you must sacrifice something in return. This implies personal responsibility and personal agency to act positively in your own interest. Talk to you doctor, do your research, examine your motives, and pray for the resolution of spirit to take better care of yourself going forward. God is always there, talking to us. We only have to listen.

Dr. Derek Conte is co-founder of Chiropractic Specialists at 1154 Concord Road in Smyrna. For questions, call: 404-784-6008. For more articles, photos, info, go to: drderekconte.com