



**BRIEF**

# Maintaining Weight Loss After GLP-1s:

## Outcomes of a 16-Week Analysis

By Jeanean B. Naqvi, PhD, Hope Chang, PharmD,  
Ashley Berthoumieux, MS, RD, Sarah Linke, PhD,  
MPH, Jenna Napoleone, PhD, MPH



**While demand for GLP-1s remains high, reports show that medication persistence is surprisingly low. GLP-1 discontinuation can be a concern for payers and patients alike, as clinical trial results indicate that people may regain a considerable amount of weight once they stop the GLP-1.**

**However, does weight health progress have to stop when people discontinue their GLP-1? Is it possible that virtual programs—which have long been in the business of weight health—offer tailored tools and support that could lead to successful weight maintenance?**

The Omada Insights Lab analyzed weight trends in members who opted into the GLP-1 discontinuation path within the Enhanced GLP-1 Care Track. At 16 weeks after discontinuing a GLP-1:



**Members in this path experienced an average -0.1% weight change**



**63.5% of members in this path experienced <2% weight gain since GLP-1 discontinuation**



**84.1% of members in this path experienced <4% weight gain since GLP-1 discontinuation**

## The impact of GLP-1s has shifted the obesity treatment conversation

Numerous clinical trials show significant weight loss, with newer agents demonstrating upwards of **18-21%** weight loss in one to two years. However, outside of clinical trials, patients taking GLP-1s face many real-world obstacles to maximizing the benefits of GLP-1s, including high costs, supply chain shortages, and limits to insurance coverage. These obstacles may contribute to the **low medication persistence**—the length of time spent taking a medication—seen with these medications.

### Real-World Perspectives on GLP-1 Discontinuation

**74.8%** of members discontinued due to access issues<sup>1</sup>

**47%** of patients expected to take GLP-1s for <12 months<sup>2</sup>

**30%** of patients stopped treatment within 4 weeks, before reaching the targeted dose<sup>3</sup>

1. Omada Health. [GLP-1 Discontinuation: Real-World Perspectives on a Complex Journey](#). November 2024.

2. Omada Consumer Research, November 2024.

3. Blue Health Intelligence. [Real-World Trends in GLP-1 Treatment Persistence and Prescribing for Weight Management](#). May 2024.



Omada's [GLP-1 Patient Journey](#) consumer research found that over 60% of individuals had a delay or challenge when it came to refilling their medication. The majority (65%) of people who stopped taking a GLP-1 altogether reported feeling anxious, stressed, and/or depressed after discontinuation, and of those 65%, over 75% regained weight once they came off a GLP-1. Randomized controlled trial findings show a similar pattern—participants in the [STEP 1 trial extension](#) regained two-thirds of the weight they lost after stopping semaglutide and lifestyle intervention.

This amount of weight regain may be concerning for health plans and employers making sizable investments to cover the medications, as well as for patients who want to maintain their weight loss.

## **If demand for GLP-1s continues to surge while real-world hurdles to long-term use don't let up, can lifestyle support programs help patients maintain weight loss after discontinuation?**

Omada's new Enhanced GLP-1 Care Track was specifically designed to [meet the needs of members using GLP-1s](#), from initiation to discontinuation. In member interviews, we found that members desire a specialized companion program that offers a multifaceted approach to care—including nutrition and exercise support from the start, as well as a path to self-efficacy through behavioral health content. [Early insights from members](#) in our Enhanced GLP-1 Care Track include increased engagement with program features, more tracking of healthy behaviors, and increased weight loss compared with members on GLP-1s who met similar eligibility criteria and received Omada's standard care.

Omada has developed a path specifically for members who have discontinued a GLP-1 for weight loss within our Enhanced GLP-1 Care Track, and as part of the [ANSWERS](#) (ANalyzing Success of WEight medication with Real-world evidence and Stats) Initiative—which examines real-world data from our weight health programs and shares insight—we analyzed weight trends among these members.

In this report, we evaluate the evidence on how members in the Enhanced GLP-1 Care Track's 16-week discontinuation path successfully maintained their weight after discontinuing their GLP-1s. Read on for the findings.

THE IMPACT OF GLP-1S HAS SHIFTED THE OBESITY TREATMENT CONVERSATION



# Omada's GLP-1 Discontinuation Analysis

Members in the Omada Enhanced GLP-1 Care Track discontinuation path who met the following criteria were included in this analysis examining weight maintenance following GLP-1 discontinuation:

- + **Program Enrollment:** Members *without diabetes* who were between week 2 and month 6 of the Omada for Prevention program or the Omada for Hypertension program, from March to May 2024
- + **GLP-1 History:** Self-reported taking a GLP-1 medication for weight management for >8 weeks
- + **Discontinuation:** Self-reported discontinuing their GLP-1 medication within 4 weeks of receiving the discontinuation path eligibility survey and confirmed that they were not currently taking a GLP-1 in a 12-week follow-up survey
- + **Opt in:** Opted into a specialized 16-week GLP-1 discontinuation path
- + **Weight Capture:** Recorded a weight at GLP-1 discontinuation and a weight at 16 weeks post-discontinuation using their Omada scale

Once members entered the 16-week discontinuation path, they were afforded access to a host of GLP-1-tailored care and resources, including:

- + Support from a health coach and a Certified Diabetes Care and Education Specialist (CDCES)
- + Weekly lessons geared to address many of the common barriers and challenges members experience after GLP-1 discontinuation (e.g., behavior and mindset, weight gain, weight tracking, calorie reduction, activity increase)
- + Access to a **GLP-1 topic-based community** to foster collaborative learning and social support from others facing similar experiences and challenges

“

**Many [members] haven't told family or friends about taking GLP-1s because they feel they would be shamed for it. Many have even been shamed by doctors. There are a lot of things going on emotionally. They express that the support and safety of this community is important.”**

—

**Jodi Moravec**

Omada Health coach and CDCES cardiometabolic specialist  
(Moderator of "Medication and Healthy Weight Loss" community  
with >4,000 all-time members)



# Weight Maintenance is Possible with Specialized Support

On average, Omada members who opted into the discontinuation path within our Enhanced GLP-1 Care Track and were included in the analysis experienced **no weight gain** 16 weeks post-discontinuation. Furthermore, nearly two-thirds (63.5%) of participants experienced weight loss or maintenance (<2% weight gain) at 16 weeks after GLP-1 discontinuation, and the majority (84.1%) of participants experienced <4% weight gain at 16 weeks after GLP-1 discontinuation.\*

## DEMOGRAPHICS

% white	61.9%
% female	87.3%
Average age	49 years

## CLINICAL CHARACTERISTICS

Average weight at GLP-1 start date:	220.0 lbs
Average weight loss on GLP-1:	15.1%
Average GLP-1 treatment duration:	35.2 weeks

# Omada Care Track Results Surpass Clinical Estimates

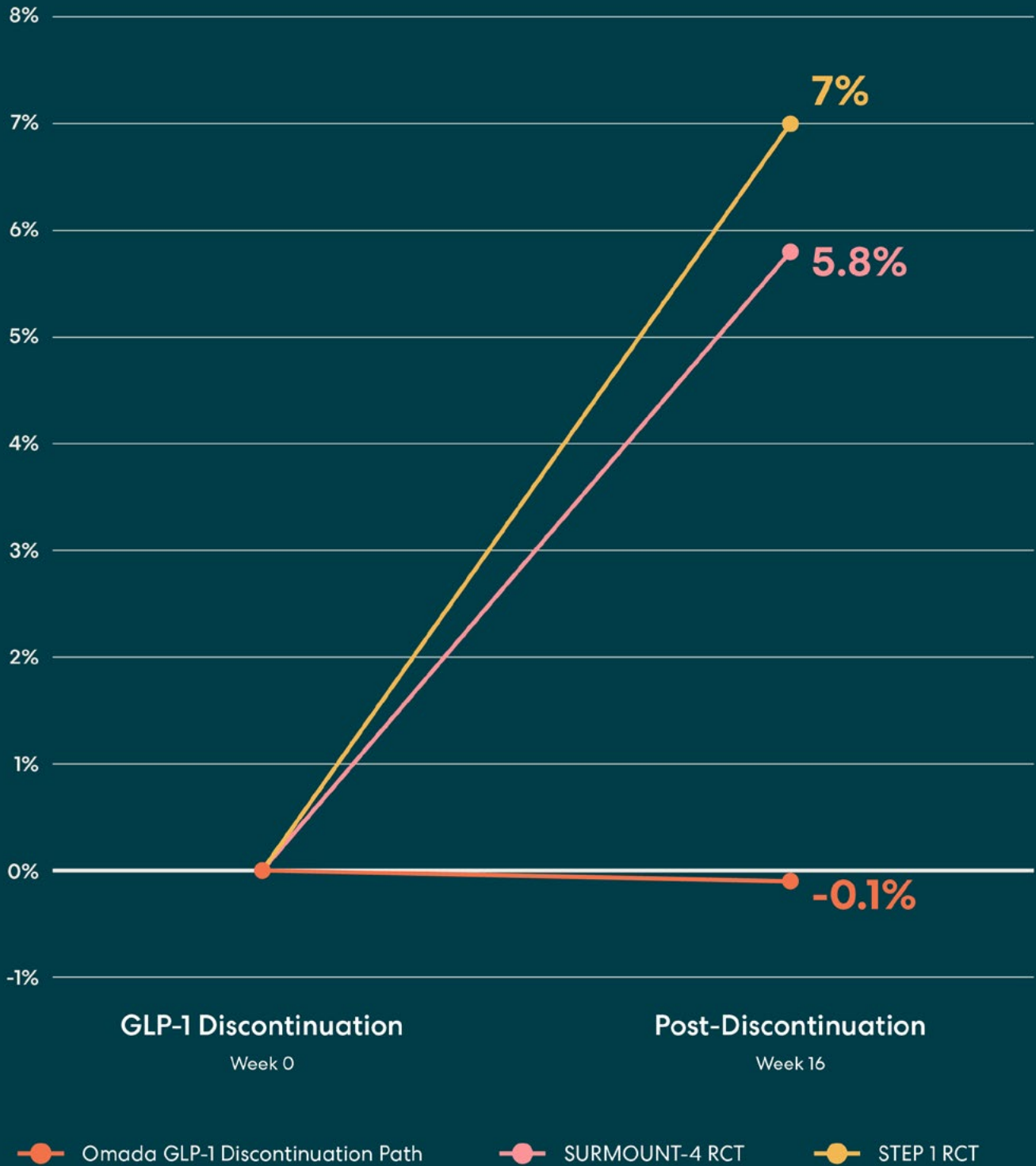
At 16 weeks post-discontinuation, members in Omada’s Enhanced GLP-1 Care Track discontinuation path demonstrated weight maintenance (-0.1% weight change on average), compared to an estimated average of 6-7% weight gain according to existing clinical trial data.

**These results indicate that, on average, members who had access to continued specialized GLP-1 discontinuation support maintained their weight 16 weeks after stopping a GLP-1.**

With a -0.1% average observed weight change, these early findings show potential for successful weight maintenance after discontinuing GLP-1s with specialized, tailored support. These results underscore the value of studying the real-world experiences of GLP-1 users, particularly after discontinuation, in order to refine care that helps achieve long-term weight maintenance.

\* A total of 63 members were included in this analysis. Weight change was calculated from weight at GLP-1 discontinuation to weight at 16 weeks post-discontinuation.

### PERCENT WEIGHT CHANGE 16 WEEKS AFTER DISCONTINUING GLP-1S



Footnote: Internal estimates for percent weight change at week 16 are based on data from SURMOUNT-4 and STEP 1 randomized clinical trial manuscript figures.



# The Journey Ahead

At Omada, we recognize the importance of gathering real-world evidence to understand the value and impact of GLP-1s. We are committed to delivering an innovative Enhanced GLP-1 Care track and evaluating, iterating, and continuously improving our offerings to best meet the needs of our members.

Informed by real-world evidence, Omada's Enhanced GLP-1 Care Track centers around the key components of a successful GLP-1 companion program: specialized content and care delivery grounded in behavior change science. This approach helps members navigate the twists and turns of their GLP-1 journey.

While GLP-1s represent immense potential in the space of obesity treatment, there are real-world issues of access that make long-term, continuous use difficult for many patients. Members need a multifaceted approach that helps address both

the physiological and psychological components of weight maintenance alongside GLP-1 use. Omada's Enhanced GLP-1 Care Track helps members access the specialized care and social support they need to manage their weight health through discontinuation and beyond. ●



The GLP-1 landscape is ever-changing. Omada stays ahead of the curve by offering science-backed, specialized lifestyle support that helps members through all the ups and downs of their weight health journey. Keep an eye out for more evidence to come on Omada's **Enhanced GLP-1 Care Track**.

