



Medication Treatments for Diabetes and Obesity in Canada

*An independent IQVIA report on drug utilization data,
2020-2024*

Table of contents

Introduction	3
Treatments for diabetes and obesity	5
Highlights of national drug use for diabetes and obesity in Canada (2020–2024)	6
Medications used to treat diabetes	7
Prescribers	7
Evolution of prevalence by province	8
Demographic analysis	10
Recommendations for health interest groups	14
Data sources and methodology	15

Introduction

Diabetes is a chronic disease that occurs when the body does not produce enough insulin or cannot use it properly, leading to high blood glucose levels. The health consequences for people with diabetes are numerous. It can cause vascular damage in the heart, eyes, kidneys and nerves. The two main types of diabetes are:

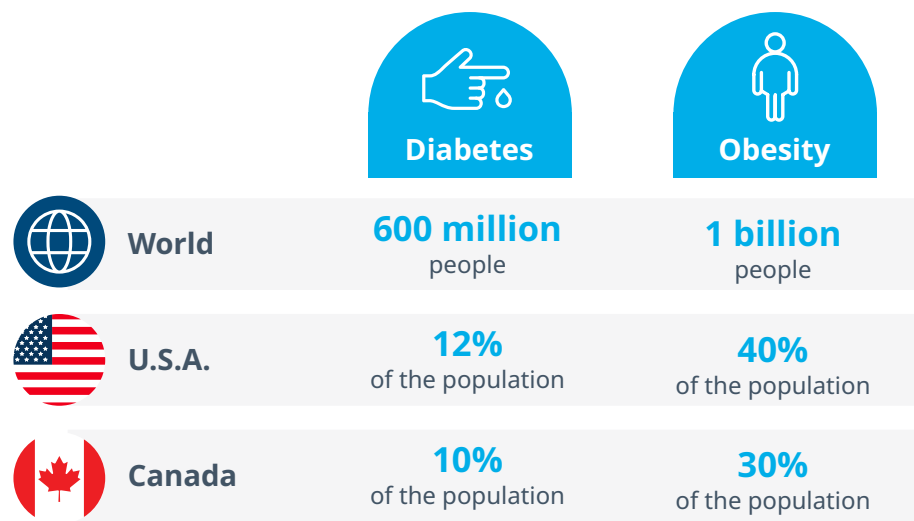
- **Type 1 diabetes:** an autoimmune disease requiring lifelong treatment with insulin. It accounts for between 5% and 10% of cases and cannot be prevented.
- **Type 2 diabetes:** accounts for 90% to 95% of cases and is generally associated with lifestyle habits, although genetic predispositions may also play a role.

Prediabetes is characterized by a blood glucose level higher than normal, but insufficient to be classified as type 2 diabetes. It represents a major public health issue that can be mitigated by preventive measures and early interventions.

Obesity is characterized by excessive accumulation of body fat and represents a significant risk factor for the development of type 2 diabetes, creating a vicious cycle that worsens health complications and increases the burden on healthcare systems.

Globally, it is estimated that nearly 600 million adults live with diabetes, while approximately 1 billion people suffer from obesity.^{1,2} In the United States, about 12% of the population — around 38 million people — are believed to have diabetes, and more than 40% of Americans are affected by obesity.^{3,4}

In 2024, our estimates indicate that 10% of the population in Canada – about 4 million people – would be living with diabetes. According to Statistics Canada, about 30% of Canadians are obese.⁵ The economic cost of diabetes in the country is estimated at \$30 billion, reflecting the extent of its impact on the healthcare system.⁶



1 Global Diabetes Data & Insights | IDF Diabetes Atlas
2 One in eight people are now living with obesity
3 National Diabetes Statistics Report | Diabetes | CDC
4 Adult Obesity Facts | Obesity | CDC
5 An overview of weight and height measurements on World Obesity Day - Statistics Canada
6 Diabetes rates continue to climb in Canada - Diabetes Canada

Our goal at IQVIA is to help optimize healthcare by providing data and factual information to better inform decision-makers in this critical field, with the utmost respect for data confidentiality and security. The statistics and analyses presented in this report come from the IQVIA Health Insights Dashboard, as part of a collaboration with the IQVIA Advisory Council for Health Advancement, a group of opinion leaders from various health sectors. The dashboard, which is based on fully anonymized data, allows for the analysis of medication usage in certain therapeutic classes. It is designed to answer three questions: how many prescriptions have been dispensed, how many users benefit from them, and which medical specialties prescribed them. See page 14 for the limitations on the use of IQVIA data.

Note to the Reader

For an accurate interpretation of the data presented in this report, the following points should be considered:

- Prevalence was estimated based on individuals who received at least one prescription for medication intended for the treatment of diabetes or obesity.
- The calculation of obesity prevalence is based solely on individuals who have used medication for obesity treatment, including those who received an antidiabetic drug from the GLP-1 agonist class without having diabetes.
- Individuals suffering from both obesity and diabetes are counted in the diabetes prevalence.

This report is independently produced by IQVIA Canada as a public service, without funding from industry or government. IQVIA aims to optimize healthcare by providing factual information that enables decision-makers to make informed decisions in this crucial sector, while ensuring strict data confidentiality and security. The company complies with all health information privacy laws and does not collect any prescription drug data that could identify a patient or be used for that purpose.



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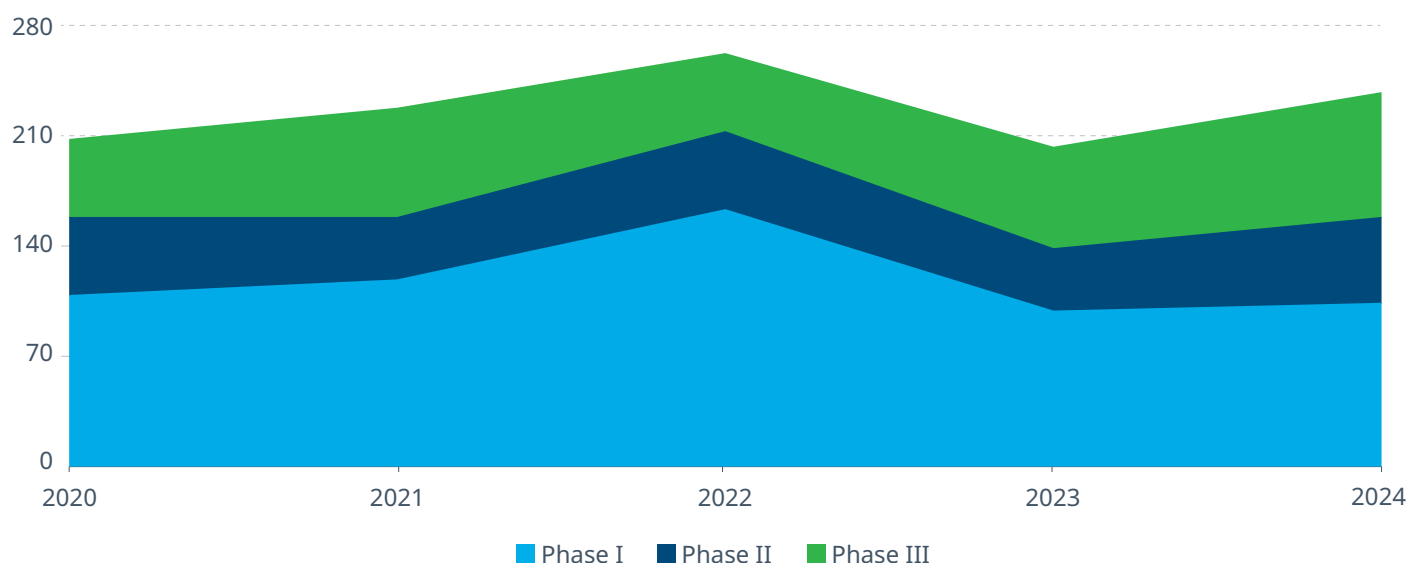
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Treatments for diabetes and obesity

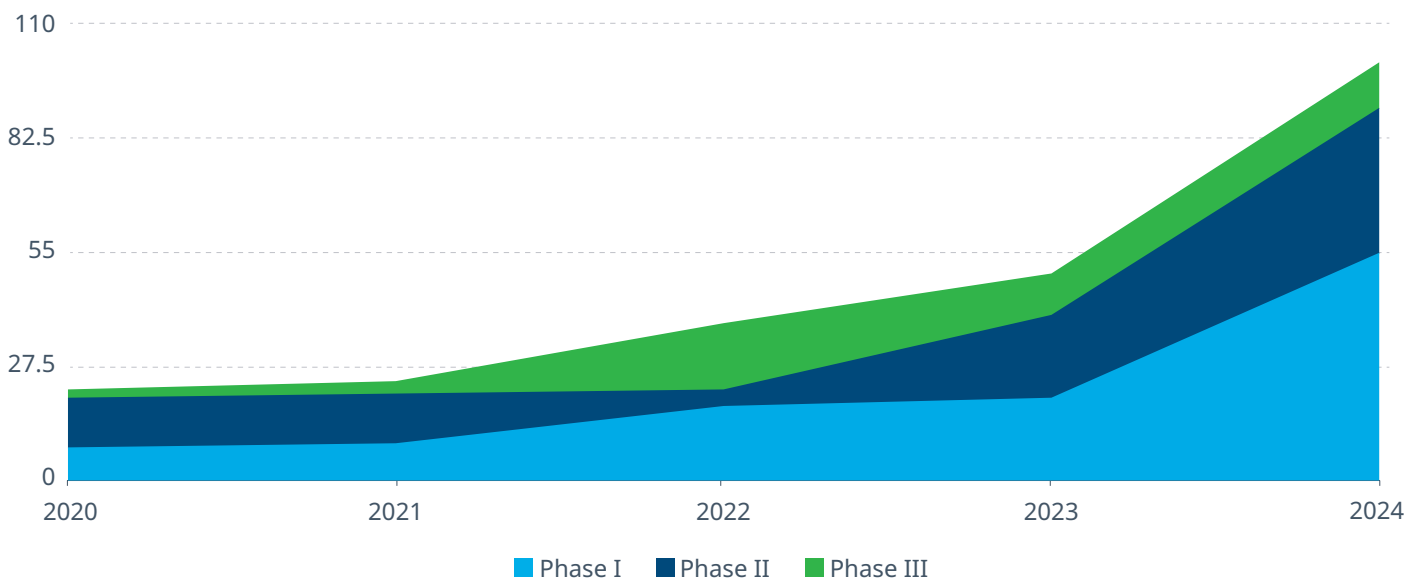
Some risk factors for type 2 diabetes and prediabetes, such as age and genetics, are non-modifiable. However, a healthy lifestyle – physical activity, balanced diet, healthy weight, and non-smoking – can help prevent or delay the disease and its complications. It is also recognized that populations facing social and economic inequalities are at higher risk of developing type 2 diabetes. Addressing the social determinants of health is therefore essential to improve health equity. However, for many people, lifestyle changes alone are not sufficient, and that is why medication treatments for diabetes and obesity are used.

In 2024, diabetes is the main area of research in metabolism and endocrinology, with nearly 250 clinical trials underway (phases 1 to 3).⁷ Research on obesity is also progressing very rapidly, with a total of more than 100 active trials, particularly on GIP/GLP-1 agonists, including oral formulations.

Diabetes – Clinical trials



Obesity – Clinical trials



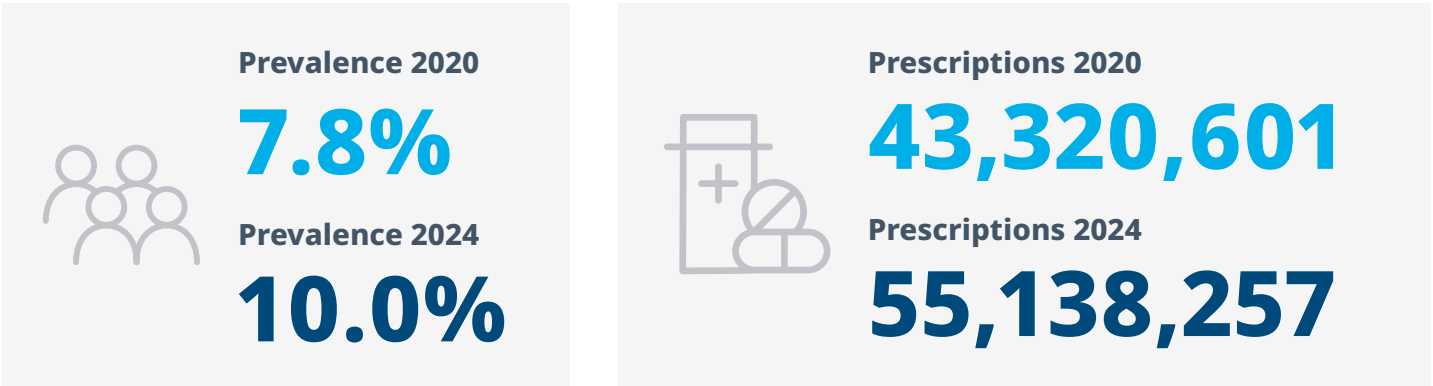
7 <https://www.iqvia.com/insights/the-iqvia-institute/reports-and-publications/reports/global-trends-in-r-and-d-2025>

Overview of the evolution of the use of medication treatments for diabetes and obesity in Canada (2020–2024)

Between 2020 and 2024, the use of medications to treat diabetes saw moderate growth in Canada, with the disease prevalence increasing from 7.8 to 10% and the number of prescriptions rising from 43.3 million to 55.1 million (+27%).

Medication treatments for obesity, on the other hand, experienced much more significant growth. The number of people treated increased sevenfold, from 94,322 to 678,910, while prescriptions increased tenfold, reaching 3.48 million in 2024.

General statistics on diabetes in Canada, 2020 - 2024



General statistics on obesity in Canada, 2020 - 2024



Drugs used to treat diabetes and obesity

Between 2020 and 2024, the treatment of type 2 diabetes in Canada saw significant changes, both in terms of the number of patients treated and the prescriptions issued. Metformin remained the most prescribed medication, with an 18% increase in the number of patients and a 15% increase in prescriptions, confirming its central role as a first-line treatment.

SGLT2 inhibitors, known for their cardiovascular benefits, saw their usage double over the period, both in terms of the number of patients and prescriptions. However, it was GLP-1 agonists that showed the most significant growth, reflecting increasing interest in their effects on both glycemic control and weight management.

At the same time, the use of sulfonylureas remained at a moderate level, while other therapeutic classes saw a decline, indicating a shift in practices towards newer and potentially more effective therapeutic options.

Type 2 Diabetes: Number of individuals and prescriptions dispensed in Canada, 2020 - 2024				
	Individuals		Prescriptions	
	2020	2024	2020	2024
Metformin	1,867,595	2,200,939	15,192,100	17,497,870
Sodium-Glucose Transport Protein 2 (SGLT2)	680,613	1,390,994	5,554,227	12,101,879
Glucagon-Like Peptide-1 (GLP-1)	244,014	780,503	1,492,794	5,605,126
Sulfonylureas	707,228	758,677	6,569,236	6,906,197
Dipeptidyl Peptidase-4 (DPP-4)	830,253	717,981	8,293,656	7,194,996
Postprandial Glucose Regulators (PPG)	34,406	26,981	416,087	302,495
Thiazolidinediones	13,863	9,124	107,457	60,741
Acarbose	9,039	9,390	66,423	66,312

Prescribers

In 2024, 55 million prescriptions for diabetes and 3.5 million for obesity were issued in Canada. General medicine was the main channel for prescriptions, accounting for 79.8% and 86.8% of prescriptions, respectively. Endocrinology and internal medicine followed, but at a distance. This distribution highlights the key role of general practitioners in managing these chronic diseases.

Number of prescriptions dispensed for diabetes and obesity by prescriber specialty									
NUMBER OF PRESCRIPTIONS IN CANADA IN 2024									
	Total	General medicine		Endocrinology		Internal medicine		Other specialties	
Diabetes	55,138,257	79.8%	44,000,329	9.3%	5,127,858	5.5%	3,032,604	5.4%	2,977,466
Obesity	3,484,916	86.8%	3,024,907	5.1%	177,731	5.0%	174,246	3.1%	108,032

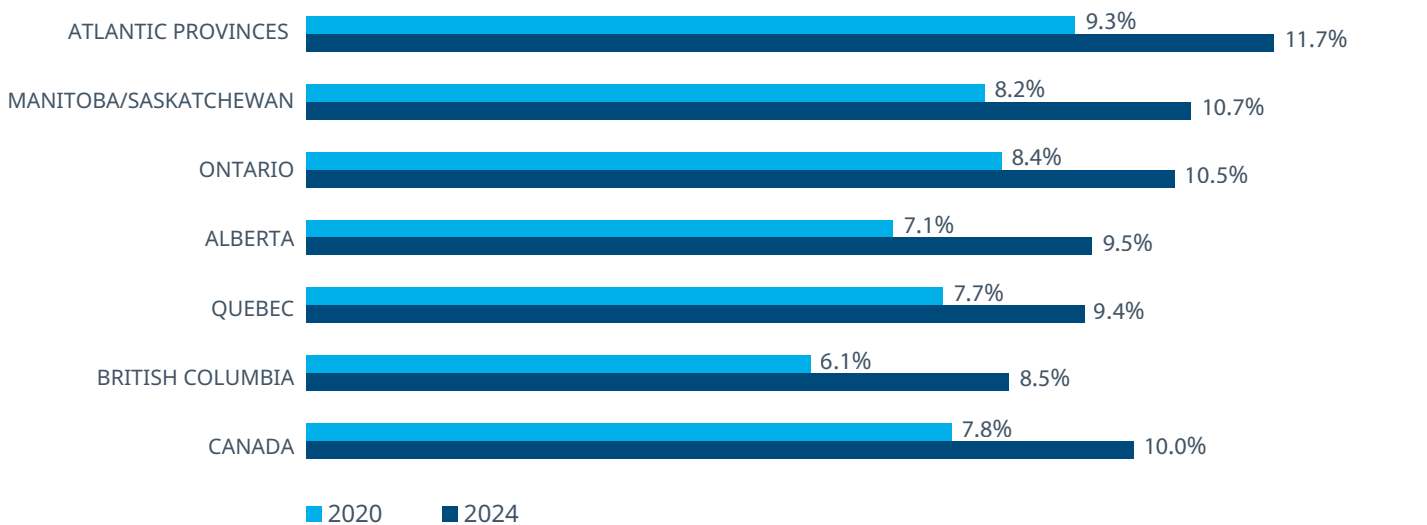
Data on prescribers is not available for Newfoundland, Prince Edward Island, Manitoba, and British Columbia.

Evolution of prevalence by province

Between 2020 and 2024, the prevalence of diabetes increased across all Canadian provinces, rising from 7.8% to 10% nationally, a 28% increase. In 2024, the Atlantic provinces had the highest prevalence (11.7%) and British Columbia the lowest (8.5%) but with the highest increase (+39%).

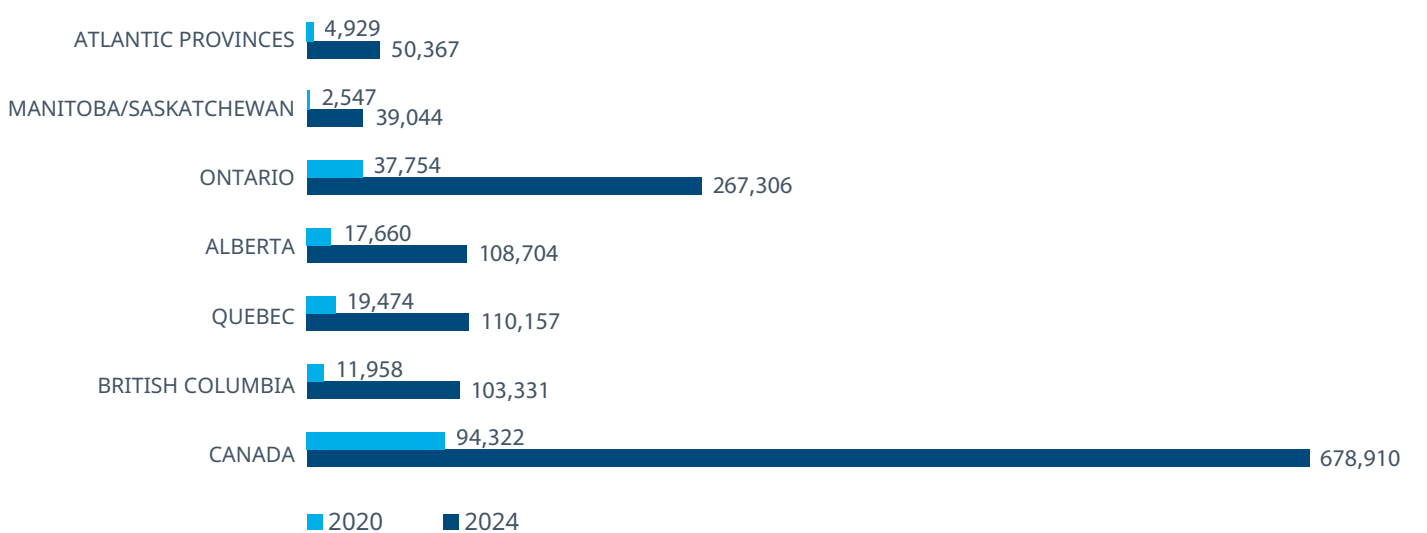
These data show different provincial dynamics in the treatment of diabetes, which could reflect differences in lifestyle, access to care, or prevention.

Diabetes prevalence by province



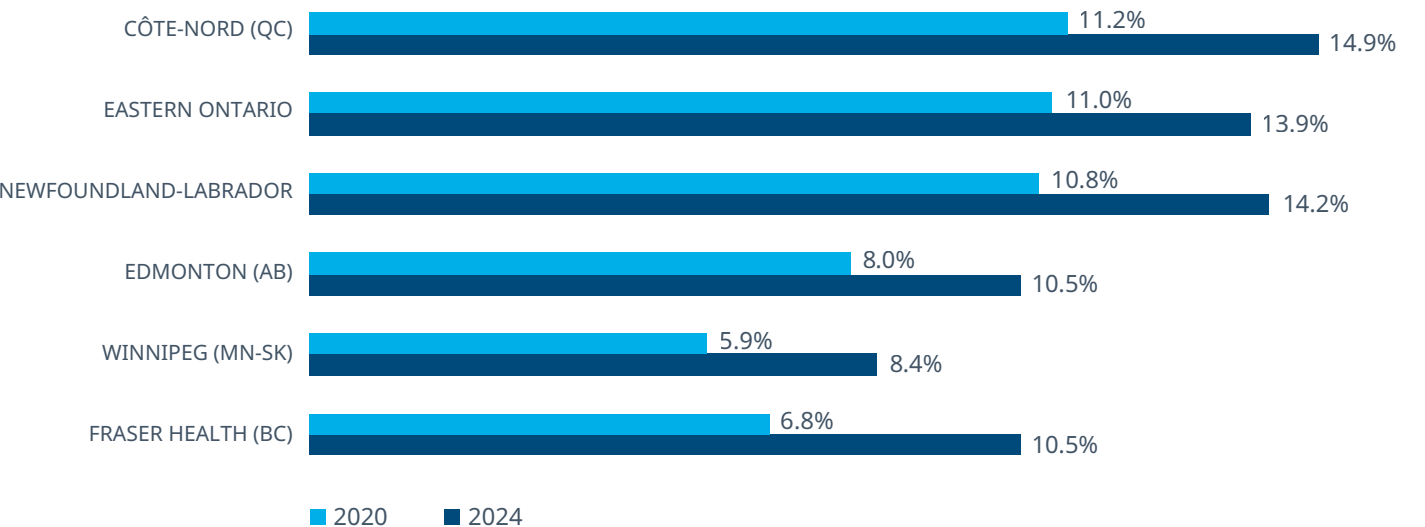
During the analyzed period, the number of people using medications to treat obesity significantly increased across all provinces. The approval of new medications, improved accessibility, and growing awareness of obesity-related issues could also explain this trend.

Number of individuals who used medications to treat obesity by province



The dashboard used to prepare this document covers the health regions of the following provinces: Ontario (26 regions), Quebec (16 regions), British Columbia (5 regions), and Alberta (5 regions). The table below presents a representative excerpt on some selected regions as examples. For more information, please contact IQVIA.

Prevalence of diabetes by selected health region

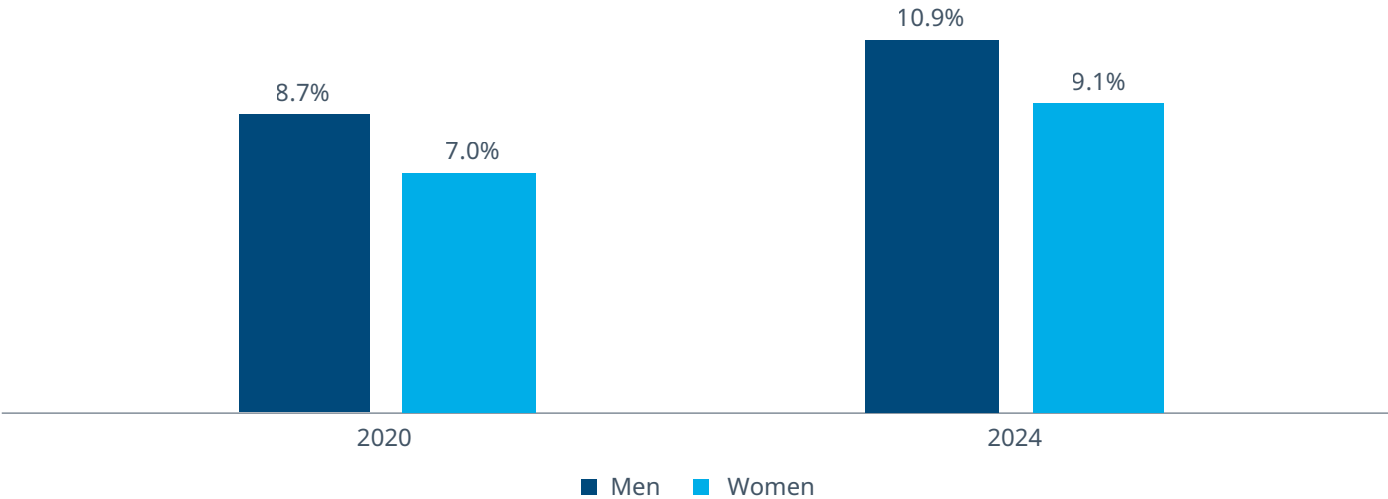


Demographic analysis

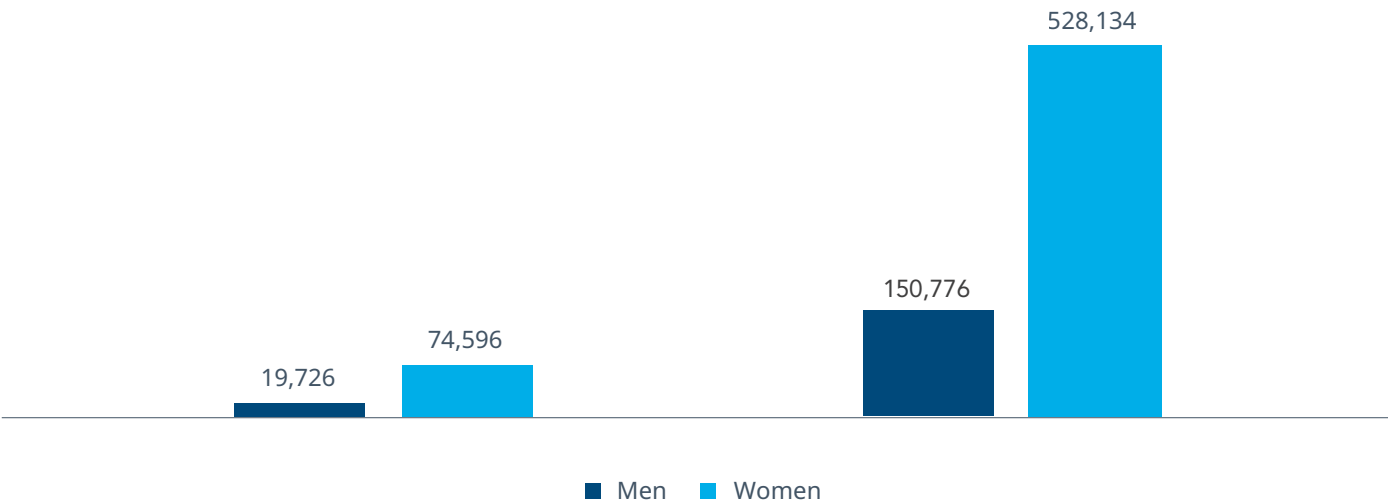
The increase in the prevalence of diabetes in Canada between 2020 and 2024 affected both men (rising from 8.7% to 10.9%) and women (rising from 7.0% to 9.1%).

At the same time, the use of medications for obesity increased significantly for both sexes: the number of male users rose from 19,726 to 150,776, while the number of female users climbed from 74,596 to 528,134. Despite a comparable relative increase, women continued to represent the majority of treated individuals.

Diabetes prevalence by gender - Canada



Number of men and women who used medications to treat obesity - Canada



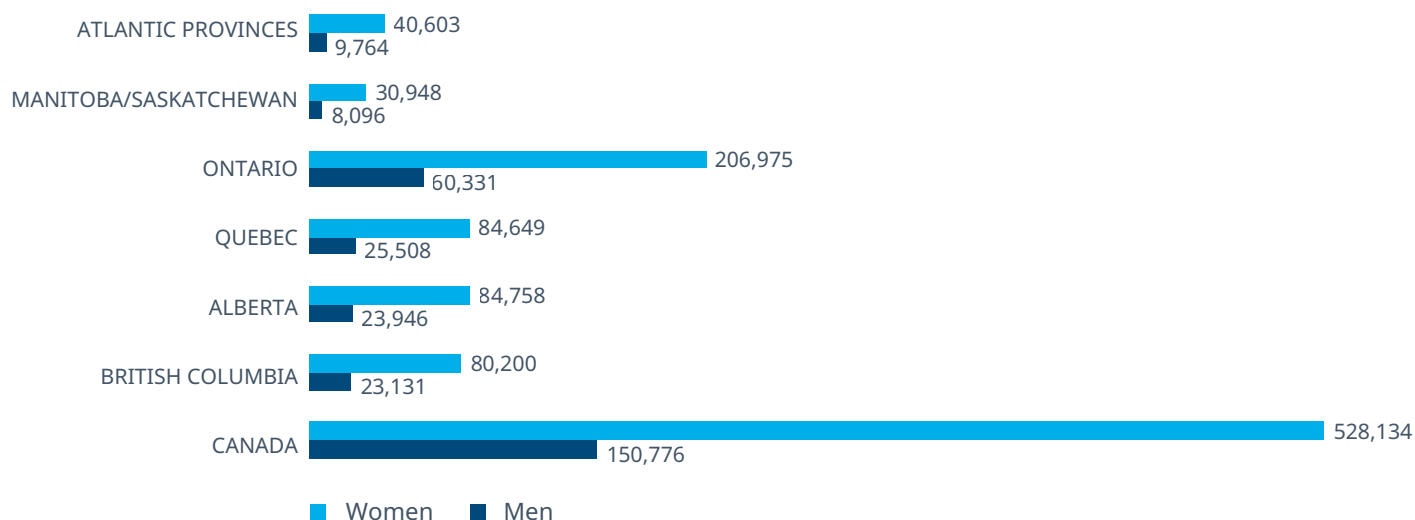
In 2024, the prevalence of diabetes remained higher in men than in women across all Canadian provinces. The highest rates were found in the Atlantic provinces (12.7% in men, 10.9% in women), while the lowest were recorded in British Columbia (9.3% in men, 7.8% in women). Nationally, the prevalence reached 9.1% in men and 7.0% in women, illustrating a consistent gender gap.

Diabetes prevalence by gender and province - 2024



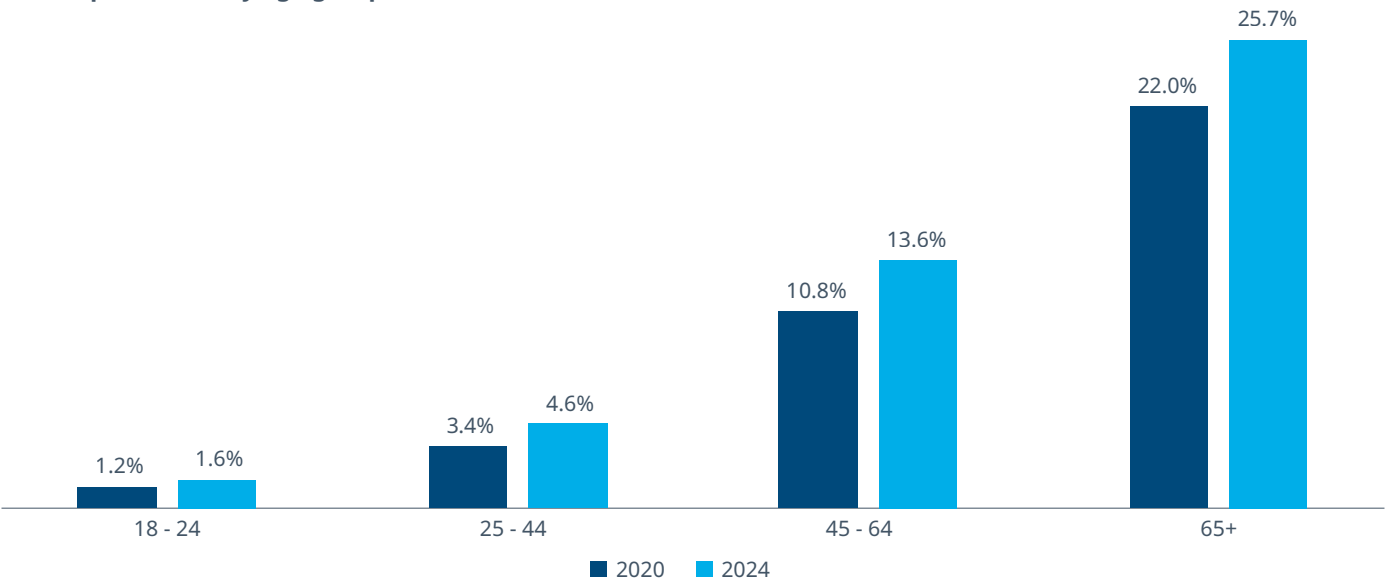
The use of medications to treat obesity showed a clear female predominance: of 678,910 users, nearly 78% were women. Ontario had the largest number of treated patients (60,331 men and 206,975 women), followed by Quebec and Alberta. This trend was consistent across all provinces, where women systematically used these treatments more than men.

Number of women and men who used medications to treat obesity by province, 2024



Between 2020 and 2024, the prevalence of diabetes increased across all age groups in Canada. People aged 65 and over remained the most affected, with a rate reaching 25.7% in 2024, an increase of 3.7 percentage points. Among those aged 45 to 64, the prevalence also increased, reaching 13.6%. Thus, although seniors remain the most affected, the rise in prevalence is gradually extending to younger age groups.

Diabetes prevalence by age group - Canada 2024



From 2020 to 2024, the prevalence of diabetes increased across all Canadian provinces, regardless of age and gender, with British Columbia generally showing the lowest rates.

Men aged 65 and over experienced the highest increases, reaching 33.9% in Ontario, compared to 23.5% in British Columbia.

Among women, the prevalence generally remained lower than that of men, except in the 25 to 44 age group, where it was higher. Notable increases were also observed among women in Manitoba/Saskatchewan aged 45 to 64 (+3.8%) and those aged 65 and over (+4.6%).

Prevalence of diabetes among men - Province and age group						
	25 - 44		45 - 64		65+	
	2020	2024	2020	2024	2020	2024
ONTARIO	3.2%	3.8%	13.3%	15.9%	29.0%	33.9%
ALBERTA	3.1%	4.3%	13.1%	16.4%	28.5%	33.1%
MANITOBA/SASKATCHEWAN	4.0%	5.0%	14.3%	18.5%	26.8%	32.3%
ATLANTIC PROVINCES	3.5%	4.4%	13.0%	16.4%	27.2%	31.0%
QUEBEC	2.6%	3.3%	11.9%	14.6%	27.1%	30.1%
BRITISH COLUMBIA	2.6%	3.6%	9.6%	13.4%	18.4%	23.5%
CANADA	3.0%	3.9%	12.5%	15.5%	26.6%	31.0%

Only age groups with significant prevalence are presented.

Prevalence of diabetes among women - Province and age group						
	25 - 44		45 - 64		65+	
	2020	2024	2020	2024	2020	2024
ONTARIO	3.8%	5.3%	9.7%	12.0%	20.2%	23.8%
ALBERTA	4.0%	5.9%	9.7%	12.6%	19.4%	23.1%
MANITOBA/SASKATCHEWAN	5.4%	7.2%	11.6%	15.4%	17.8%	22.4%
ATLANTIC PROVINCES	4.1%	5.7%	10.5%	13.5%	20.0%	22.5%
QUEBEC	3.3%	4.5%	8.0%	10.0%	17.0%	18.7%
BRITISH COLUMBIA	3.2%	5.0%	7.0%	10.0%	12.9%	16.4%
CANADA	3.8%	5.3%	9.1%	11.7%	18.1%	21.2%

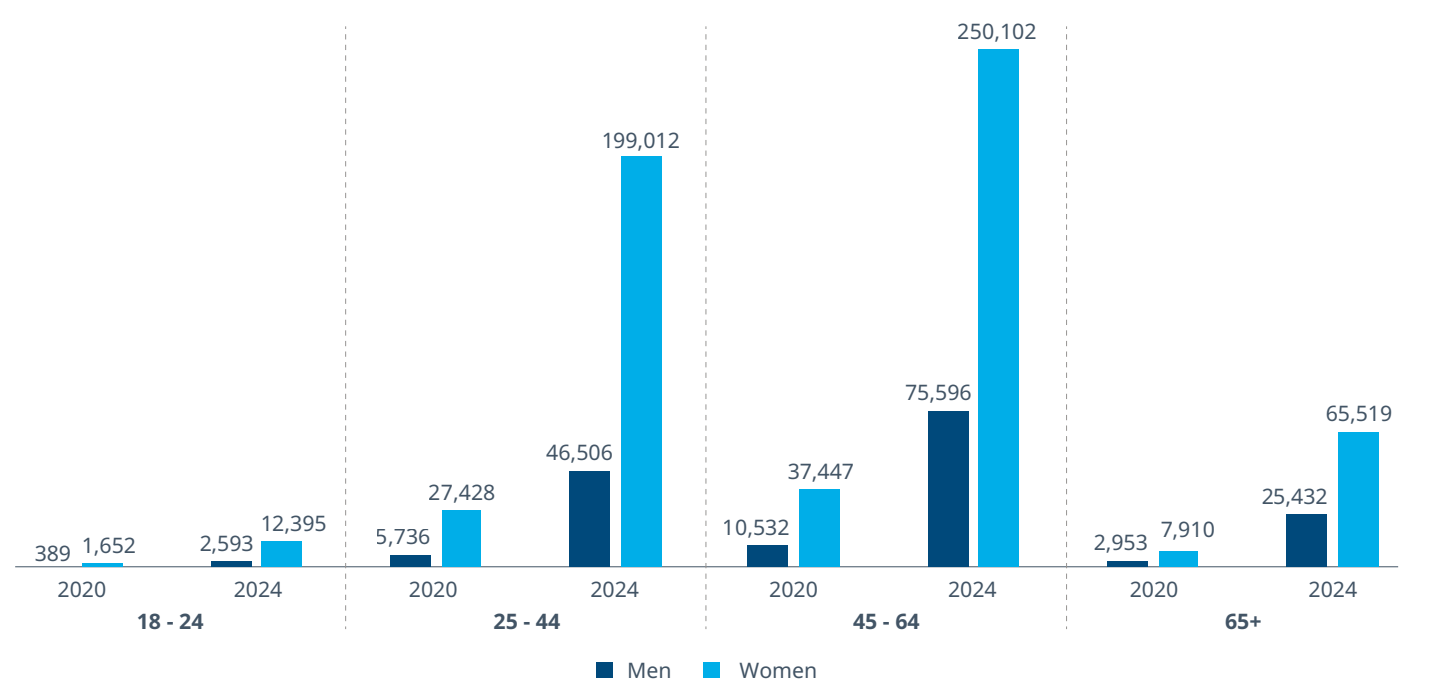
Only age groups with significant prevalence are presented.

During the study period, the use of obesity medications significantly increased in Canada across all ages and genders. The highest relative growth was observed among those aged 65 and over, with usage multiplying by eight. Although their numbers remained relatively low, young adults aged 18 to 24 showed an increase in both sexes.

Women, particularly those aged 25 to 64, represented the majority of users, with nearly 450,000 users in 2024. Among men, the increase was notable between the ages of 45 and 64, with a jump from 10,532 to 75,596 users.

This trend reflects an increased recognition of obesity as a medical issue and better access to treatments.

Number of individuals who used medications to treat obesity by gender and age group in Canada



Recommendations for health interest groups

Many programs have been implemented in Canada to reduce the incidence of type 2 diabetes, such as the Public Health Agency of Canada's "Type 2 Diabetes Prevention Challenge" and the "Diabetes Framework".^{8,9} These initiatives focus primarily on prevention, promoting healthy lifestyles, and the various service and treatment options available for diabetes and obesity. However, there is also a need to coordinate efforts across governments, healthcare organizations, and communities to detect and manage this disease early. Access to front-line clinicians, specialists when needed, and timely test results are essential to meeting the challenge of reducing the negative impacts of this chronic disease.

At IQVIA, our goal is to drive improved care by providing healthcare stakeholders with reliable, regularly updated data, including:

- Systematically and dynamically review national, provincial and regional prescription data to identify current and emerging trends that may impact providers, patients, governments and regulators.
- Track regional variations in prevalence and prescribing to assess the effectiveness of programs.
- Focus efforts on provinces and regions where diabetes prevalence is increasing the most and develop targeted strategies to raise awareness and educate professionals.

Finally, we believe that integrating prescription data with government databases and electronic medical records (EMRs) would be extremely beneficial for patients and healthcare professionals. This comprehensive approach would improve the quality of care by strengthening epidemiological surveillance, trend analysis, treatment effectiveness assessment and interdisciplinary collaboration, all within a scalable, efficient, and secure framework. The launch of regional pilot projects in certain provinces could represent an excellent opportunity to develop expertise in the integration of diabetes and obesity data.

Limitations

There are limitations to the use of IQVIA data, which does not include information on:

- Prescriptions written but never dispensed
- Prescriptions dispensed in hospitals and prisons
- Medications that were not consumed by patients
- Diagnoses for which prescriptions were dispensed
- Clinical indication or morbidity

8 <https://impact.canada.ca/en/challenges/type-2-diabetes-prevention-challenge/applicant-guide>

9 <https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/diseases-conditions/framework-diabetes-canada/cadre-diabete-canada.pdf>

Data sources and methodology

The statistics are generated from fully anonymized prescriptions for antidiabetic drugs and to treat obesity dispensed by a panel of community pharmacies for the years 2019 to 2023 and correspond to approximately 80% of all prescriptions dispensed in Canada (new Rx and refills). Estimation algorithms were used to assess the missing 20%, thus obtaining a complete picture of the dispensing of these drugs and allowing a representative analysis. Population data from Statistics Canada was used to calculate prevalence.¹⁰

This report is based on the following IQVIA data services: IQVIA Geographic Prescription Monitoring (GPM), IQVIA Longitudinal Prescription data, and IQVIA Prescriber-level data.

List of molecules included in this analysis:

Diabetes	Obesity
Insulin	Naltrexone SR/bupropion SR
Basal	Liraglutide
Bolus	Orlistat
Premix	Semaglutide
Non-insulin	Tirzepatide
Biguanide (metformin)	
Sodium-glucose transport protein 2 (SGLT2)	
Dipeptidyl peptidase-4 (DPP-4)	
Sulfonylureas	
Glucagon-like peptide-1 (GLP-1)	
Postprandial glucose regulators (PPG)	
Thiazolidinediones	
Acarbose	

10 Data tables, 2021 Census of Population

ABOUT IQVIA

IQVIA is a leading global provider of advanced analytics, technology solutions, and clinical research services to the life sciences industry. IQVIA creates intelligent connections across all aspects of healthcare through its analytics, transformative technology, metadata resources and extensive domain expertise. IQVIA Connected Intelligence™ delivers relevant insights with speed and agility—enabling its customers to accelerate the clinical development and commercialization of innovative medication treatments that improve healthcare outcomes for patients. With approximately 88,000 employees, IQVIA conducts operations in more than 100 countries.

Established in Canada since the 1960s with over 1,600 employees, IQVIA is a leading provider of evidence-based health information services to the Canadian medical and pharmaceutical industry. Its excellent reputation is based on its ability to forge partnerships with various stakeholders in the public and private sectors who share the same goal: to constantly improve the quality of health care in a more connected ecosystem.

Offering the world's largest source of healthcare data, IQVIA provides Canada-wide data for both the public and private sectors. IQVIA's insights and execution capabilities help biotech, medical device, and pharmaceutical companies, medical researchers, government agencies, payers, and other healthcare stakeholders tap into a deeper understanding of disease, human behaviour, and scientific advances to improve patient health.

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