

Trends in Anti-Obesity Medication Prescribing Across General Practice, Cardiology, and Gynecology in Germany, 2019–2025



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Background

- Pharmacological treatment options for persons with obesity have expanded rapidly, but the extent of adoption across clinical specialties remains unevenly documented
- This study aimed to quantify changes in the proportion of practices prescribing Anti-Obesity Medications (AOM) from 2019 to 2025 across General Practice (GP), cardiology, and gynecology, and to assess trends in the number of persons with AOM prescriptions per practice and per prescriber

Methods

- This retrospective cross-sectional study was conducted using data from the IQVIA Disease Analyzer database, which contains anonymized records from more than 3,000 office-based physicians in Germany (1)
- We conducted a practice-level analysis (2019–2025) across three specialties: GP, cardiology, and gynecology
- For each year and specialty, we calculated the proportion of practices with any AOM prescribing, alongside descriptive measures of persons with AOM prescriptions per practice and per prescriber
- AOM was defined as at least one prescription of glucagon-like peptide-1 (GLP-1) receptor agonists and/or glucose-dependent insulinotropic polypeptide (GIP) receptor agonists approved for obesity treatment in individuals without diabetes
- Time trends were summarized descriptively, emphasizing absolute and relative changes within specialties

Results

- Among GP, the proportion of practices prescribing AOM increased from 7% in 2019 to 93% in 2025. In parallel, the average number of persons with AOM prescriptions per practice rose from 0.1 in 2019 to 13.1 in 2025, while the number of persons treated per prescriber increased from 1.6 in 2019 to 14.1 in 2025
- In cardiology, prescribing practices expanded from 10% in 2019 to 45% in 2025. The average number of persons with AOM prescriptions per practice rose from 0.4 in 2019 to 5.4 in 2025, while the number of persons treated per prescriber increased from 4.2 in 2019 to 12.0 in 2025
- In gynecology, prescribing practices rose from 1% in 2019 to 39% in 2025. The average number of persons with AOM prescriptions per practice increased from 0 in 2019 to 1.9 in 2025, while the number of persons treated per prescriber increased from 1.5 in 2019 to 4.9 in 2025

Conclusion

- Prescribing of AOM expanded rapidly across general practice, cardiology, and gynecology between 2020 and 2024, with clear increases in both the proportion of prescribing practices and the average number of persons treated per practice**
- Despite this growth, the overall number of persons receiving AOM remains far below the population burden of obesity. Limited access is largely driven by high out-of-pocket costs and the absence of statutory insurance reimbursement in Germany**
- These findings highlight both the growing clinical acceptance of AOM and the urgent need for policy changes to ensure equitable access for persons with obesity**

Figure 1. Proportion of practices prescribing AOM in Germany

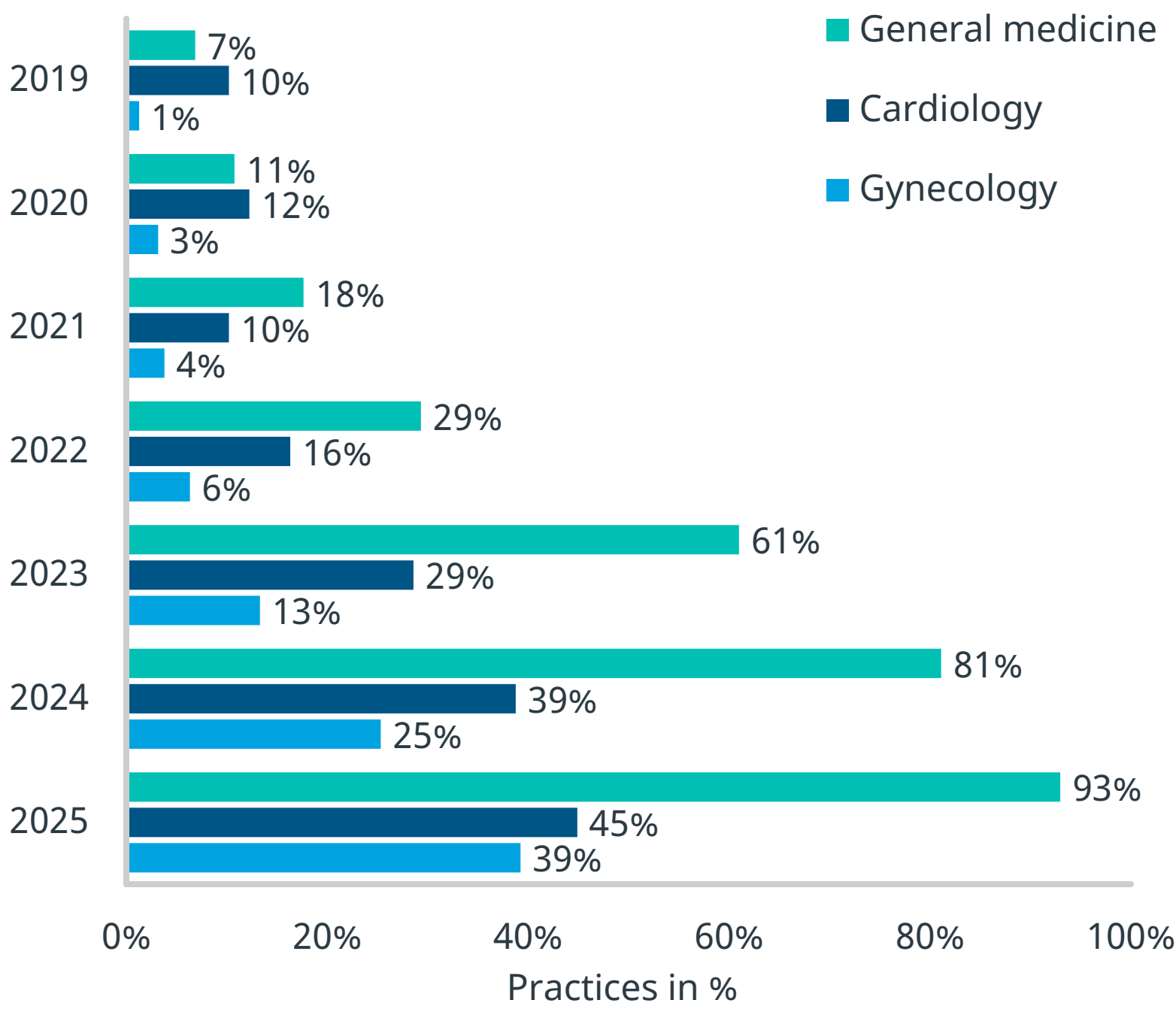


Figure 2. Number of persons with AOM prescriptions per practice

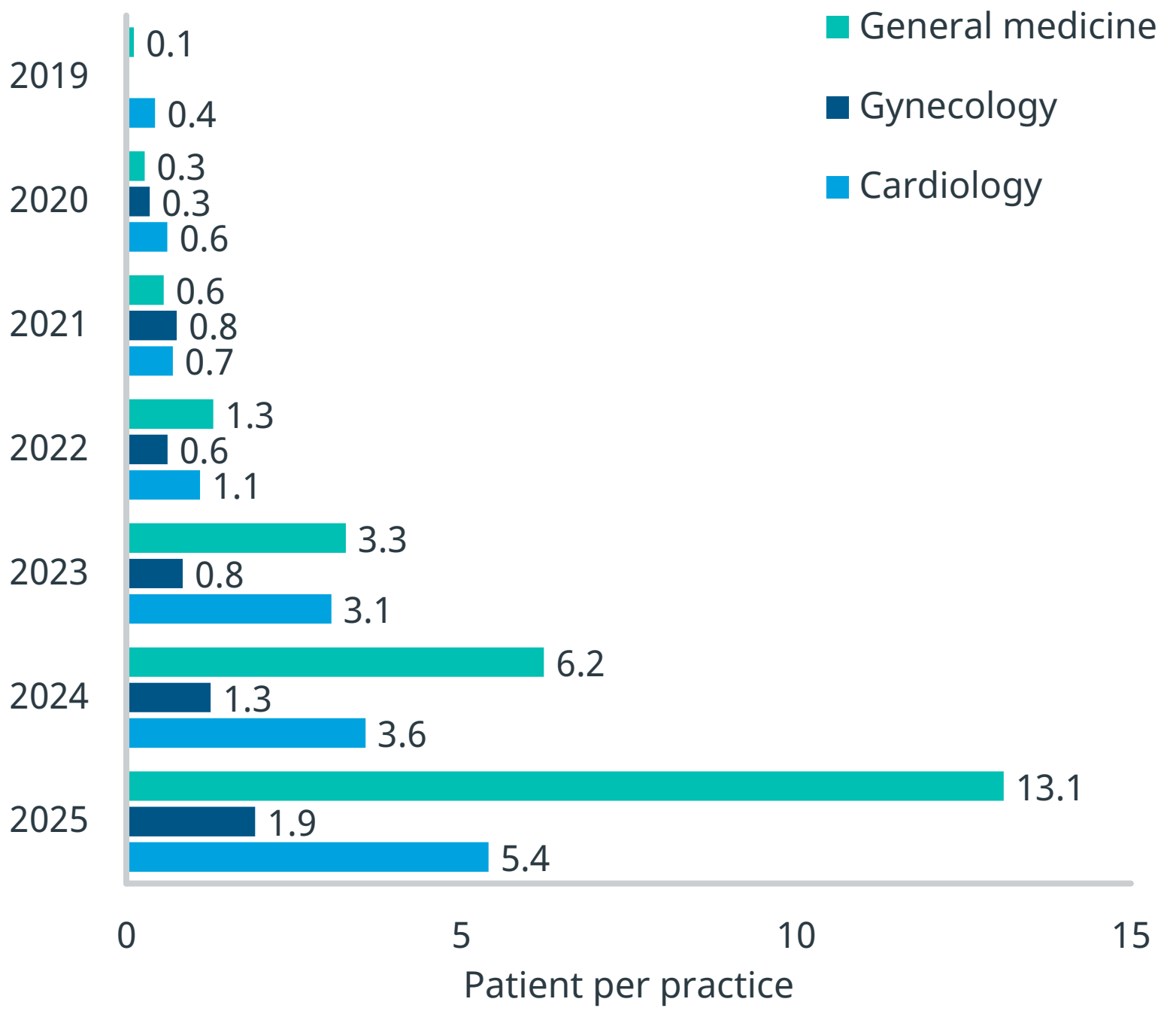
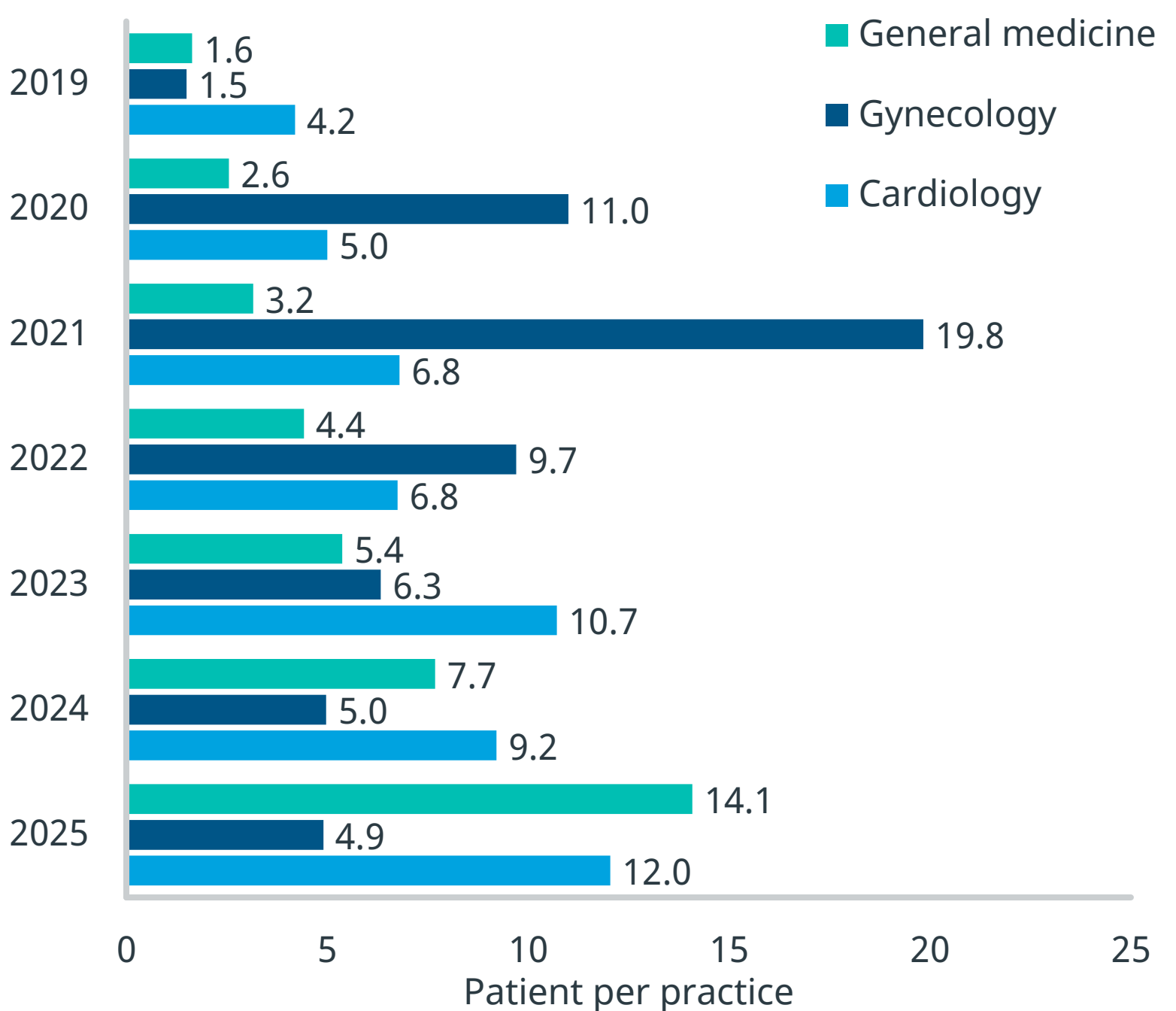


Figure 3. Number of persons treated with AOM per prescriber



¹Rathmann W., et al. Basic characteristics and representativeness of the German Disease Analyzer database. Int J Clin Pharmacol Ther. 2018 Oct;56(10):459-466