

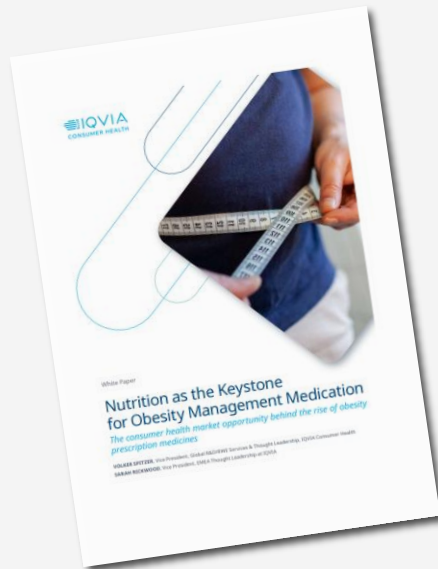


Nutrition as the Keystone for Obesity Management Medication

October 2025



A conversation with the experts behind our latest whitepaper



- + GLP-1 impact on eating habits
- + Risk of nutrient shortfalls
- + Appetite and portions decline
- + Nutrition strategies for safety
- + Opportunity for tailored solutions



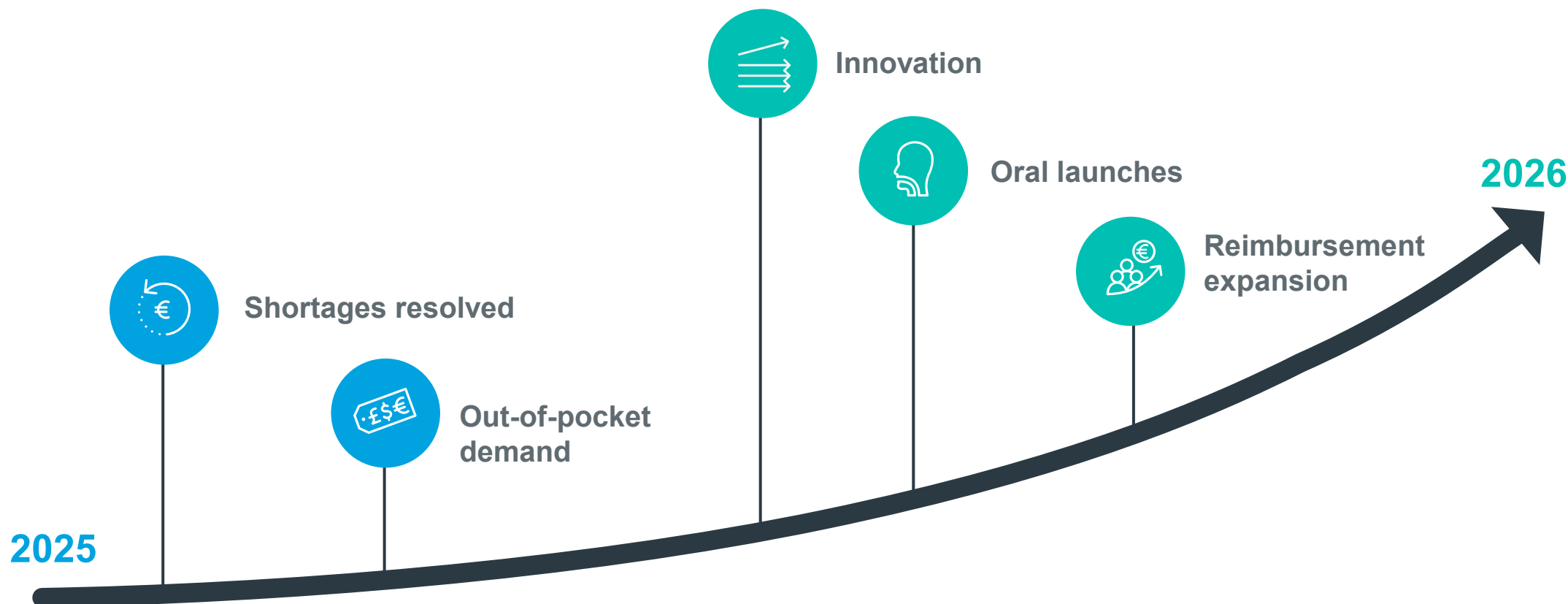
Dr. Volker Spitzer
*Vice President,
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Sarah Rickwood
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EMEA Thought Leadership,
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How big is the shift we are seeing in obesity care?

2025 marks a turning point: from shortages and hype to structured, evidence-based obesity treatment.



Why does nutrition deserve equal billing with the medication in GLP-1 therapy?

Medication reduces appetite, but nutrition planning sustains health and prevents deficiencies



MEDICATION

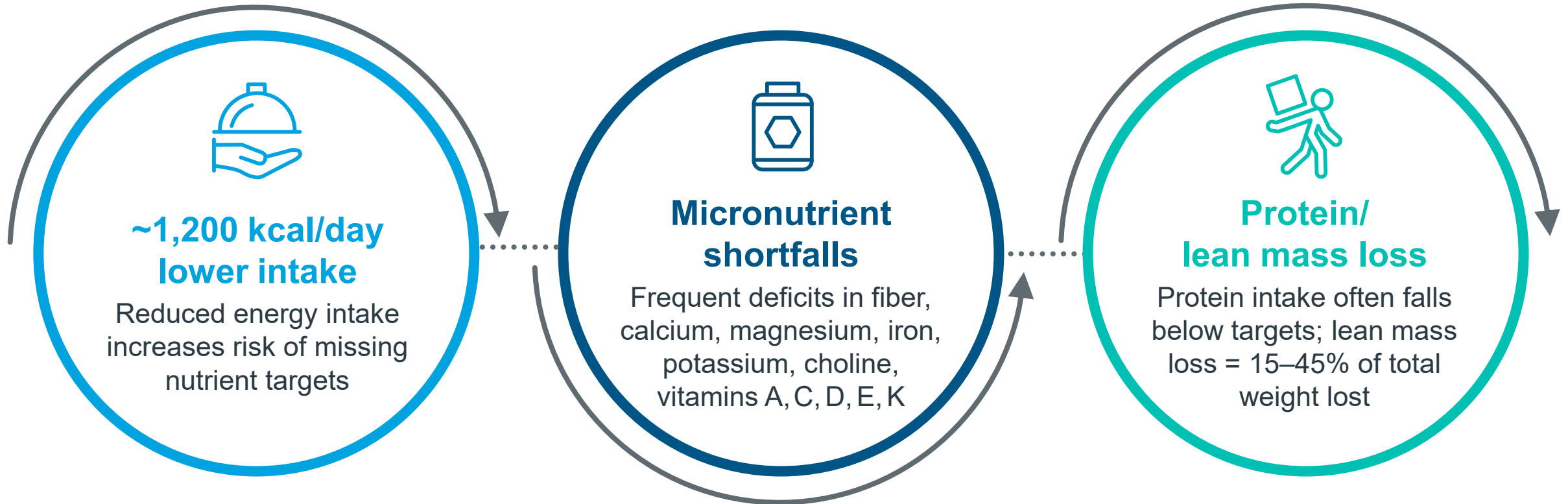
Appetite suppression +
slower gastric emptying

NUTRITION

Preserves lean mass,
prevents deficiencies,
sustains health

What does the science say about actual nutritional intake on GLP-1 medicines?

Lower energy intake drives nutrient shortfalls and lean mass risk



Gibbons, C. et al. Effects of oral semaglutide on energy intake, food preference, appetite, control of eating and body weight in subjects with type 2 diabetes. *Diabetes Obes. Metab.* 23, 581–588 (2021)

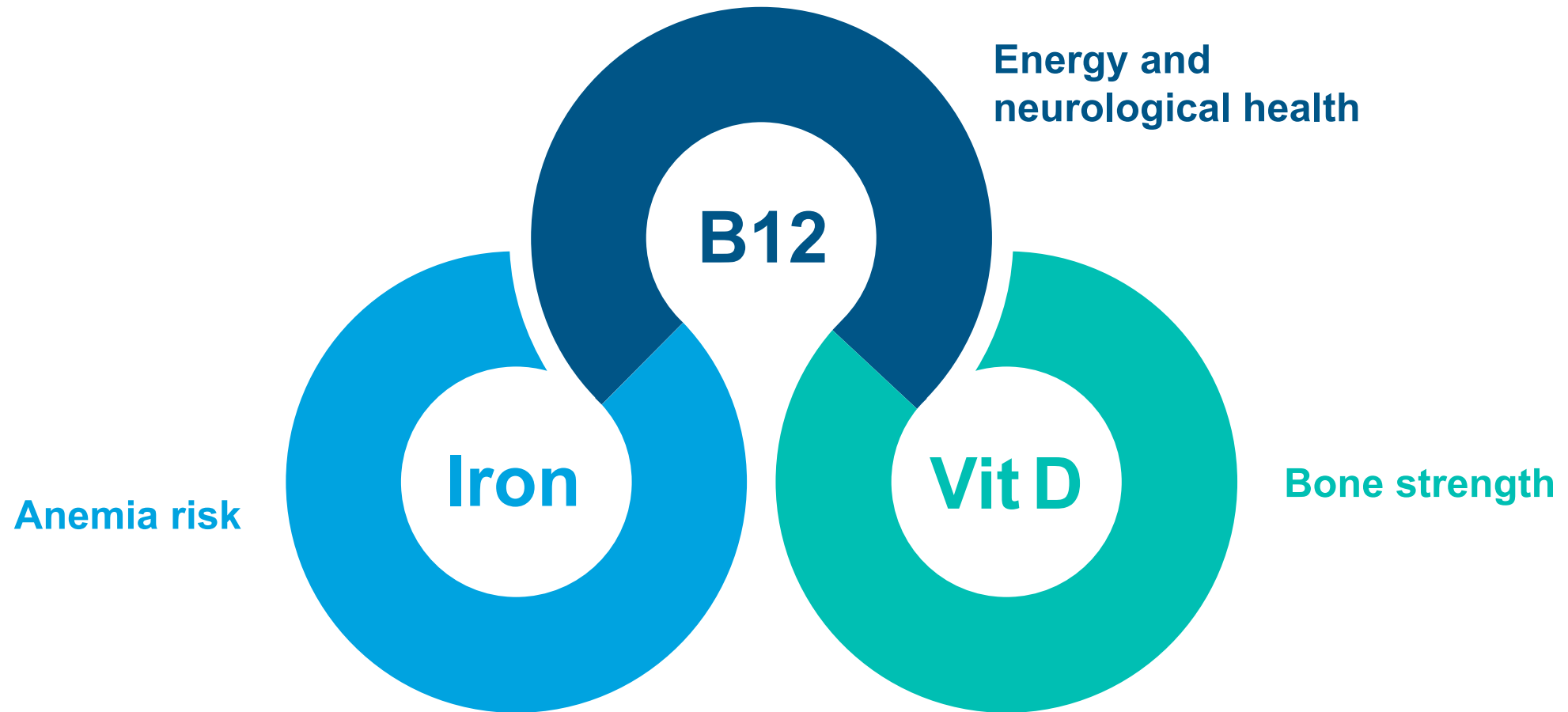
Johnson, B. et al. Investigating nutrient intake during use of glucagon-like peptide-1 receptor agonist: a cross-sectional study. *Front. Nutr.* 12, (2025).

Home. ASPEN <https://nutritioncare.org/>

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Which micronutrient deficiencies need close watch?

*Vitamin **B12**, **iron**, and **vitamin D** warrant the closest attention and routine monitoring*



Are there recommendations out there that HCPs and nutrition companies can lean on to build advice and plans for people using GLP-1s?

*Restore **fiber**, maintain **hydration**, escalate **doses gradually**, and train **resistance 2×/week***

**Protein and
vegetables first**



**Titration and
tolerance**



**Fiber and
hydration**



**Strength and
movement**



Johnson, B. et al. Investigating nutrient intake during use of glucagon-like peptide-1 receptor agonist: a cross-sectional study. *Front. Nutr.* 12, (2025)

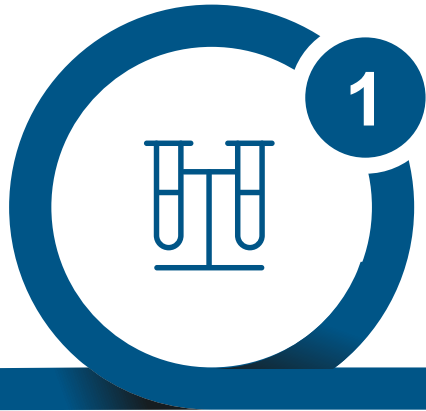
Leidy, H. J. et al. The role of protein in weight loss and maintenance. *Am. J. Clin. Nutr.* 101, 1320S-1329S (2015)

RDN, T. S., MS. Nutritional Considerations with Antiobesity Medications (AOM): Review Highlights. [culinahealth.com https://culinahealth.com/anti-obesity-medications-nutrition/](https://culinahealth.com/anti-obesity-medications-nutrition/) (2024)

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What is the role of healthcare professionals in making this real for patients?

Screen early, plan with dietitians, monitor regularly, and support adherence digitally



Baseline labs

Check B12, ferritin, vitamin D, and key labs before initiation



Dietitian pathway

Refer to dietitians to design meal patterns and supplement plans



Patient education

Provide clear, practical guidance on protein, fiber, hydration, and activity

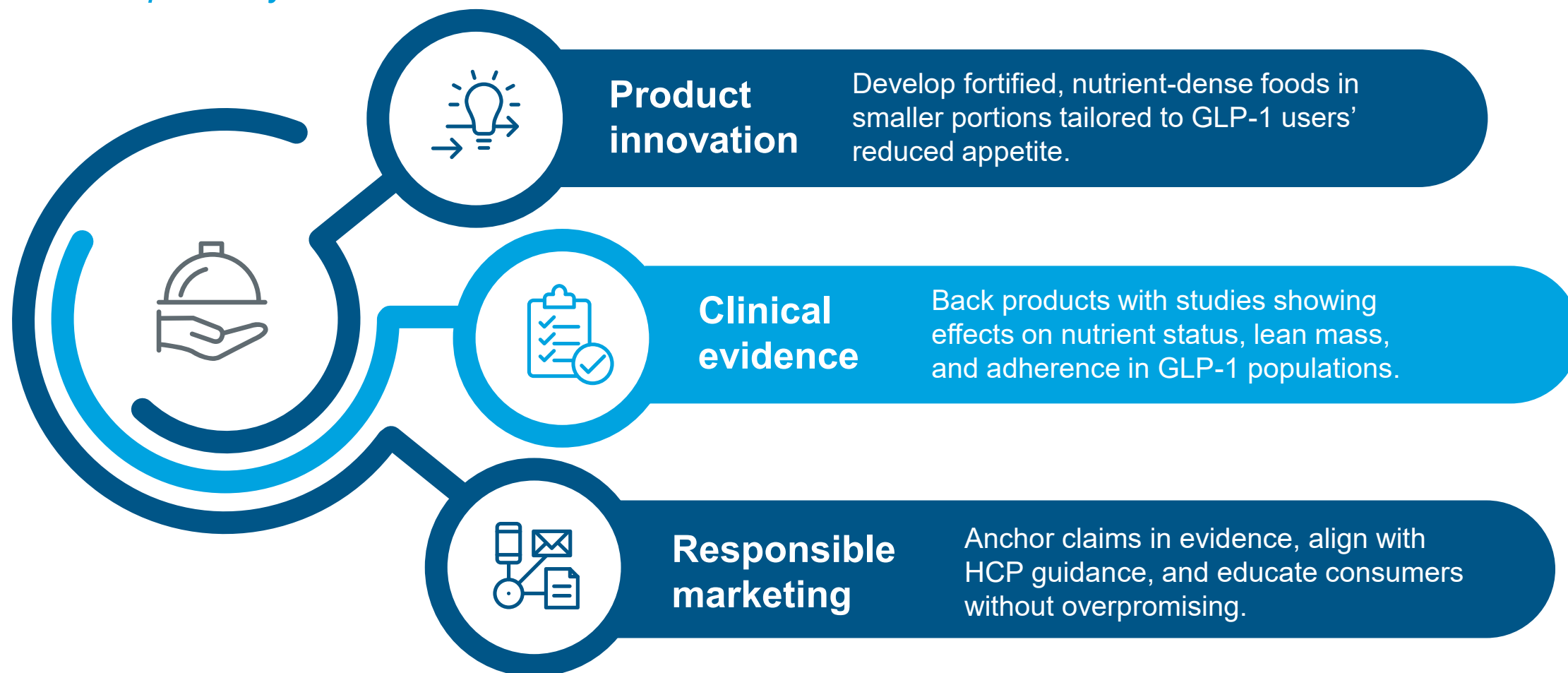


Digital support

Use apps to track intake, labs, and adherence; enable feedback loops

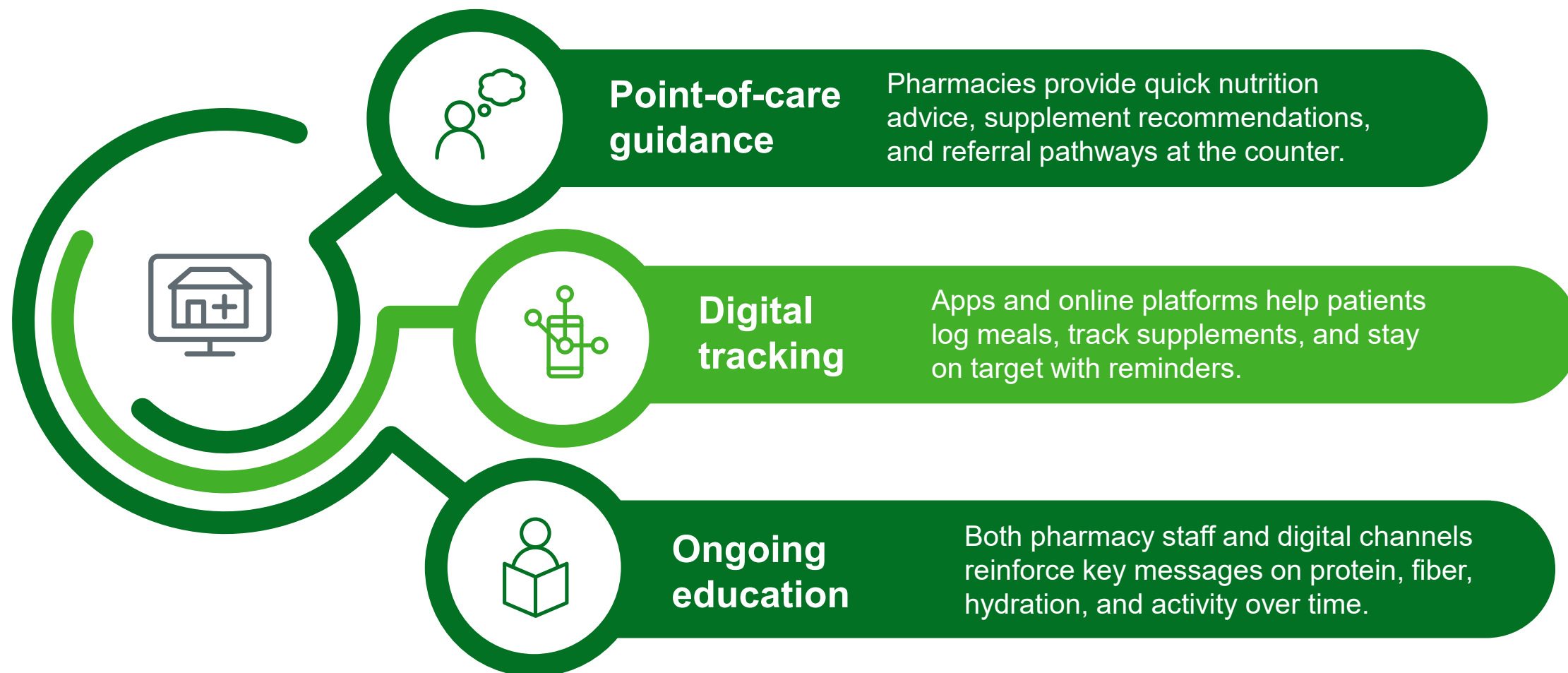
What should the food and medical nutrition industry do now?

Food companies must create nutrient-dense products, prove their benefits, and support patients responsibly



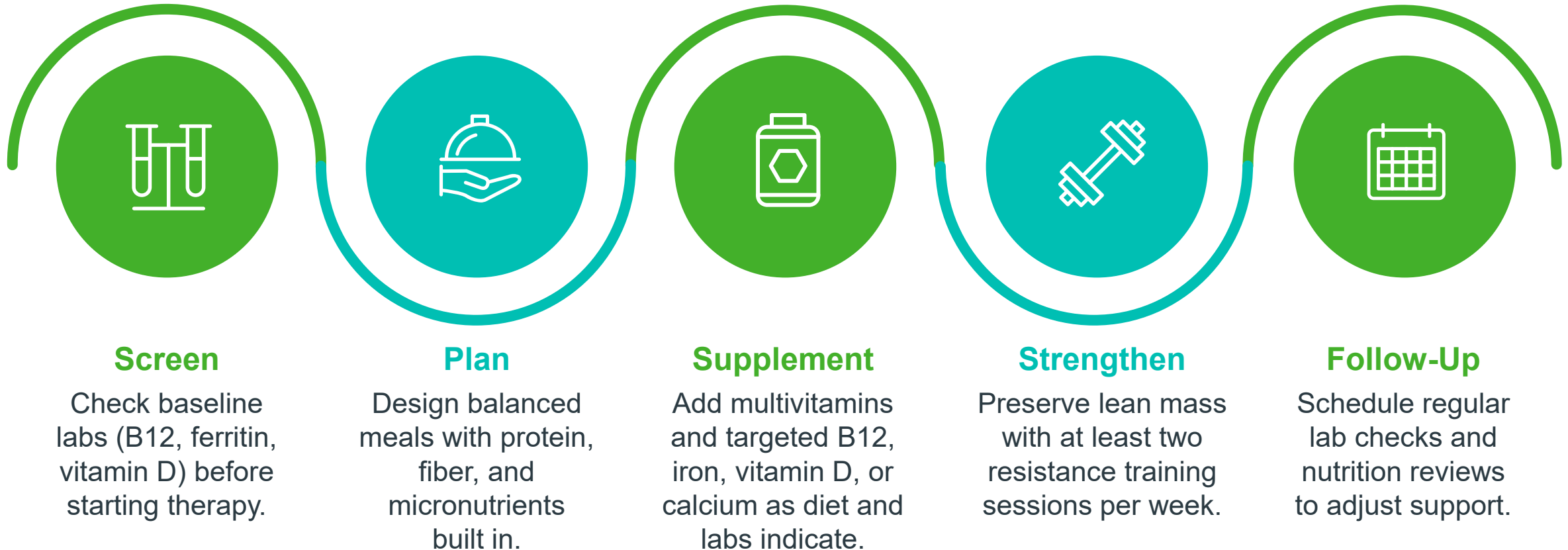
What about retail pharmacies and digital channels?

Pharmacies and digital platforms are front doors for patient education, monitoring and success



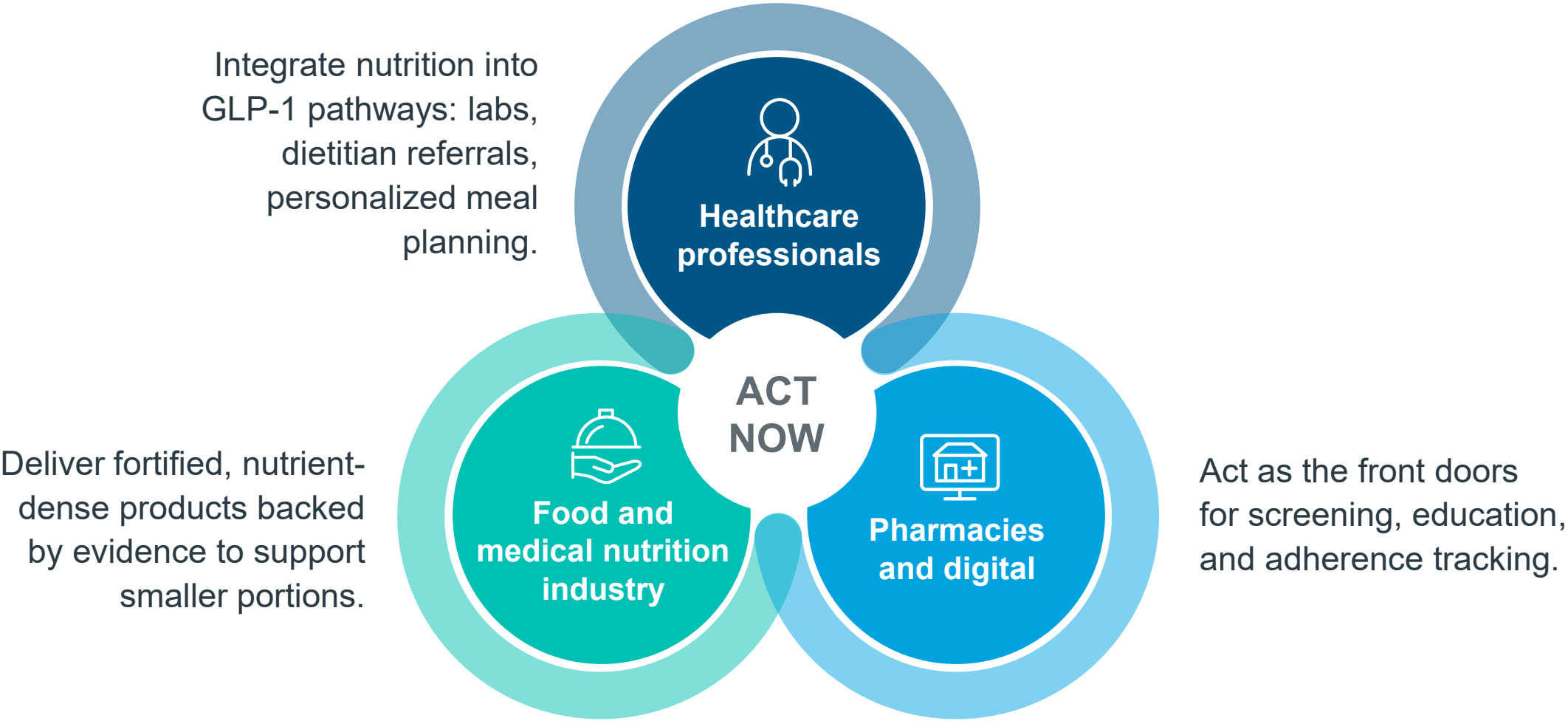
If you had to distill your advice into a starter checklist that could be used by HCPs or offered by food and nutrition companies, what would it be?

Five essentials for safe and effective GLP-1 nutrition



Conclusion: Best-practice next steps

Medication starts the process; nutrition sustains the results



Get in touch



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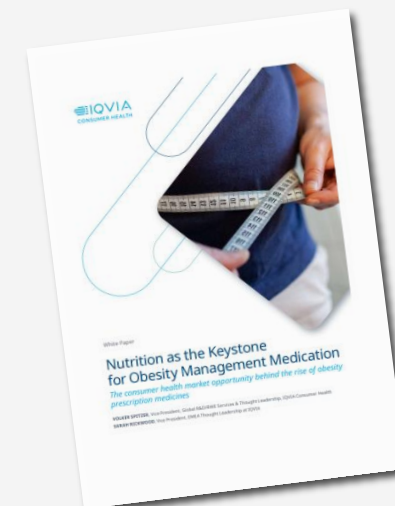


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Whitepaper



DOWNLOAD

Thank you!

