



Weight-Loss Drugs for People With HIV

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Weight gain is a growing concern for people living with HIV, but medications such as semaglutide (Wegovy or Ozempic) and tirzepatide (Zepbound or Mounjaro) look promising. Eating a healthy diet and getting enough exercise is sound advice, but lifestyle changes are often not enough to shed excess pounds.

Semaglutide is a glucagon-like peptide-1 (GLP-1) receptor agonist that suppresses appetite, regulates insulin and blood sugar and slows emptying of the stomach. Tirzepatide mimics the action of both GLP-1 and a second hormone called GIP.

There hasn't been much research on weight-loss meds for people with HIV, but data are starting to emerge. In one small retrospective study, HIV-positive people with type 2 diabetes, most of whom used older GLP-1 agonists, lost an average of 23 pounds, and over half achieved at least 5% weight loss—more than their HIV-negative peers. A larger study found that people with HIV who used GLP-1 drugs, mostly semaglutide, lost about 12 pounds, and nearly a quarter achieved greater than 5% weight loss.

A third study assessed the effects of semaglutide on lipohypertrophy, or excess abdominal fat. Here, 108 HIV-positive nondiabetic adults were randomly assigned to receive semaglutide or a placebo for 32 weeks. Body weight fell by 8.3% in the semaglutide group while rising by 0.2% in the placebo group. People taking semaglutide lost more visceral and trunk fat than placebo recipients, but they also lost more limb fat and lean body mass, raising concerns about wasting.

Together, these studies suggest that weight-loss drugs are a feasible option for people with HIV who struggle to lose weight or reduce abdominal fat, though they are not without drawbacks, including gastrointestinal side effects and high cost.

"GLP-1 agonists are revolutionizing the treatment of obesity in the general population, and I have no doubt they will do the same in people with HIV," says Rajesh Gandhi, MD, of Harvard Medical School.