

Weight-Loss Meds Boost Liver, Heart and Gut Health

Popular GLP-1 weight-loss medications work well for people living with HIV

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Popular GLP-1 weight-loss medications work well for people living with HIV, and they may have multiple benefits beyond obesity and diabetes, according to studies presented at this year's Conference on Retroviruses and Opportunistic Infections. The meeting even included a plenary talk titled "GLP-1 Agonists: Are They a Cure for Everything?"

Weight gain and metabolic abnormalities are a growing concern for people with HIV as they age. Glucagon-like peptide-1 (GLP-1) receptor agonists, including semaglutide (Ozempic or Wegovy), mimic a natural hormone that suppresses appetite. Tirzepatide (Mounjaro or Zepbound) targets both GLP-1 and another gut hormone called GIP.

One study assessed the link between semaglutide and liver fibrosis. Based on a study of HIV-negative people, Wegovy was approved last year to treat metabolic dysfunction-associated steatohepatitis, or fatty liver disease. Over time, the buildup of fat in the liver can lead to fibrosis, cirrhosis and liver cancer. In this analysis of 1,850 people with HIV, semaglutide was associated with reduced fibrosis scores, with the greatest improvement seen in those with the worst fibrosis at baseline.

Another study looked at cardiovascular health in a randomized trial of semaglutide that enrolled 108 HIV--positive people with lipohypertrophy, or abdominal fat accumulation. Although the researchers saw "no discernible effects" on markers of subclinical vascular disease, they did observe improvements in overall cardiometabolic health and cardiovascular disease risk.

A third small study showed that the older GLP-1 agonist liraglutide (Victoza or Saxenda) led to decreases in various blood biomarkers of inflammation and favorable changes in gut tissue. Finally, a fourth study found that HIV-positive people who used semaglutide reduced their cigarette smoking by 26%.

Yet much remains to be learned about long-term use of GLP-1 agonists and related drugs among people with HIV, and they will only be a game changer if they are accessible and affordable worldwide.

“With the exception of antiretroviral therapy, I can’t think of another class of medications where there has been so much buzz,” said Todd Brown, MD, PhD, of Johns Hopkins Medicine, during his plenary talk. “This class of medications has really transformed the way that we treat multiple diseases, and we really are just at the beginning of this transformation.”

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