

# Digital weight management care with semaglutide: real-world evidence from 1666 UK NHS patients with obesity

## Authors:

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### Background

In England, reimbursed access to weight loss medications is available for those living with severe obesity only through specialised multidisciplinary weight management services. Digital technologies for such services can enable broader, remote access. Real-world data from a digital service provider on patient baseline characteristics and treatment outcomes is presented.

### Methods

Service provider data (n=1666; F=1361; M=305) from participants with severe obesity (mean BMI: 46.91 kg/m<sup>2</sup>, SD: 8.69) entering a multidisciplinary treatment with semaglutide were extracted.

### Results

- **Outcomes:** At 3 months (n=1109), participants lost 4.39% (SD: 4.18) of initial weight; at 6 months (n=414), they lost 8.53% (SD: 6.26).
- **Ethnicity (n=1435):** The majority of participants were white Irish/British (68%, n=1184).
- **Socio-economic status/IMD (n=1617):** 22% (n=374) were inhabitants of the most economically deprived areas (IMD=1-2). Employment status: 41% full-time, 18% part-time, 13% unemployed.

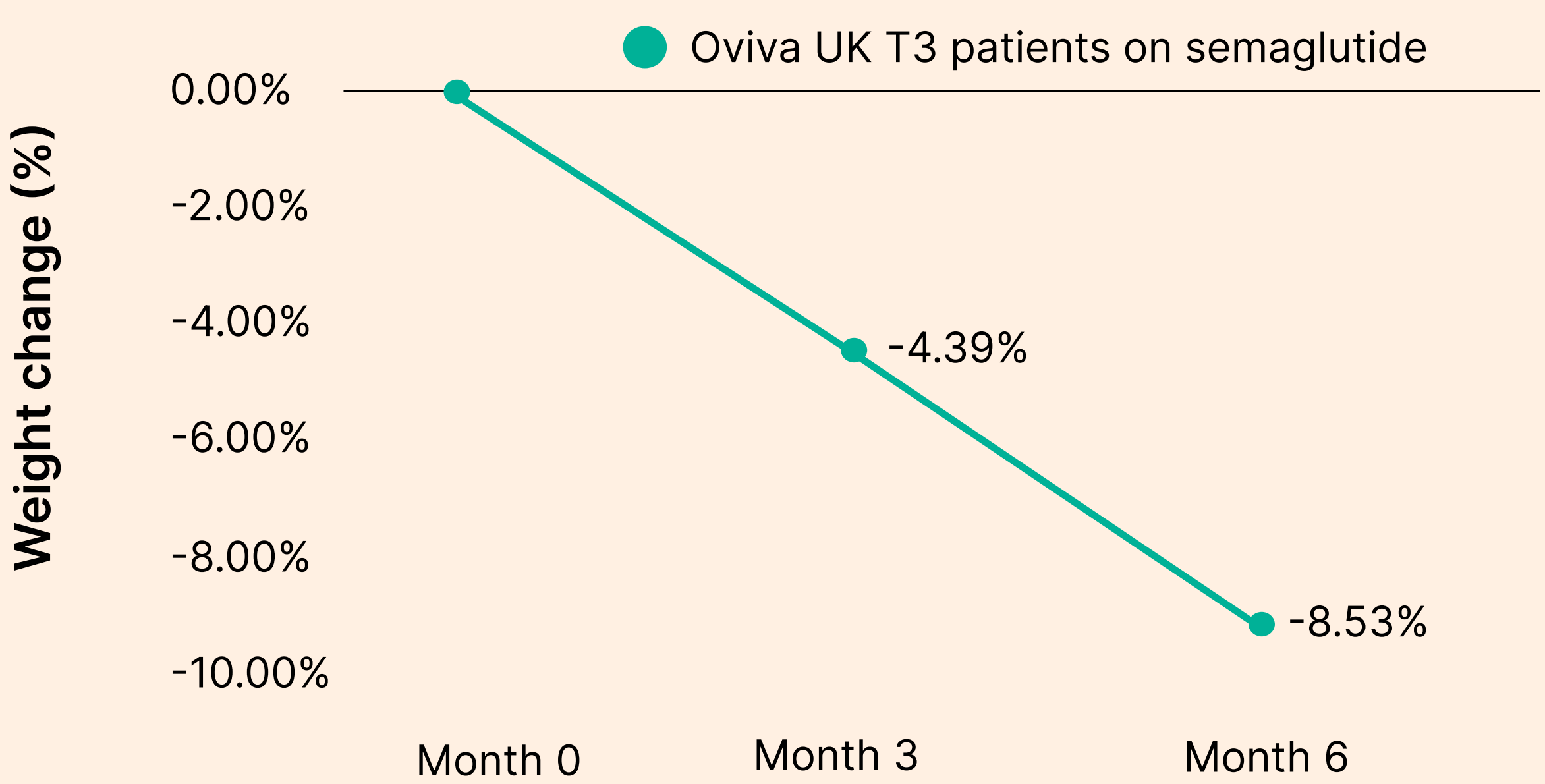


Figure 1. Weight change (%) from baseline to 6 months



- **Blood pressure (n=1158):** Mean systolic: 131.73 mm Hg (14.97); diastolic: 82.20 mm Hg (9.91), indicating elevated levels.
- **HbA1c (n=840):** Mean: 40 mmol/mol (10); adults above 50 years old and men reported 50 mmol/mol (10), suggesting diabetes.
- **Quality of life (EQ-5D, n=1495):** Participants reported a mean score of 36.93 (23.84), out of a maximum of 100 (best health), implying a significant impact of participants' weight and weight-related conditions on their perceived quality of life.
- **Depression (PHQ-9, n=853):** Participants reported a mean of 6.46 (5.52) - mild depression symptoms. Severity: 24% (n=408) mild, 14% (n=225) moderate, 10% moderately severe (n=160), 3% (n=54) severe.
- **Binge eating (BED-7, n=1331):** 29% (n=478) received 9-14 points and were triaged into further support from the psychotherapists. Mean: 6.23 (4.46); 63% reported binge episodes in the last 3 months. 29% (n=478) received 9-14 points and were triaged into further support from the psychotherapists.
- **Disabilities (n=489):** 29% had disabilities; 13% reported multiple. Most common were mobility/gross motor (20%) and behavioral/emotional issues (8%).
- **Self-efficacy (n=1587):** Participants assessed their confidence regarding abilities to self-manage their weight and weight-related conditions (score 1 to 10, 10 being very confident). Median value was 5.00 (IQR: 3.00-6.50). 11% of participants (n=178) scored the lowest possible result (1).
- **Health goals (n=1315):** For 76% of participants (n=1272) losing weight was their primary health goal. 64% (n=1062) wanted to feel healthier, 54% (n=894) prevent further health problems, 33% (n=547) improve their physical activity and 32% (n=533) their eating habits.

### Conclusion

Preliminary results indicate that participants in this digital intervention with weight loss medications achieved comparable outcomes as in clinical trials. Baseline data demonstrates that participants are living with multiple physical and psychological comorbidities, testifying to their urgent need for accessible, reimbursed support; especially for those from the lowest socioeconomic centiles or who are unemployed.