

Can You Stop a GLP-1 Drug and Keep the Weight Off?

The trials say no

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The claim

A story on Apple News this week asks whether you can come off a GLP-1 drug and keep the weight off [5]. The headline says a doctor reveals the truth. The article gives two answers. Its expert, Umar Razzaq of Pharmacy Online, says most people put the weight back on [5]. The rest of the piece implies that you can keep it off. Mr Razzaq is a pharmacist, not a doctor [6]. His firm sells Mounjaro and Wegovy in the UK after an online consultation [6]. A seller is not a neutral witness on whether you need to keep buying. That does not make him wrong. It means the number has to carry the argument, not his title.

The number behind the hopeful answer is a Cleveland Clinic headline from March: 45% of people keep the weight off a year after stopping [2]. That figure is in most of the coverage. This paper looks at what it counts. The short version: the trials say most people regain most of what they lost, and the 45% does not say what the headline says it does.

What the trials counted

The STEP 1 trial of semaglutide (Wegovy) kept people on the drug for 68 weeks. Then 327 people from both arms of the trial were taken off their injections and weighed for another year [7]. Both groups kept getting diet and exercise counseling the whole time.

Take a person who started at 200 pounds, as an illustration. At week 68 the semaglutide group was down 17.3%, about 35 pounds. A year off the drug they were down 5.6%, about 11 pounds. They had put back 23 of the 35. The placebo group was down about 4 pounds at week 68 and ended the year about where it began [7].

A Cambridge group gathered six such trials, 3,236 people in all, and fitted a curve to the regain [1]. One year off the drug, 60% of the lost weight was back. The curve flattens at about 75% [1]. For the same 200-pound person, that is 21 of the 35 pounds back at one year, and about 26 back where the curve levels off, leaving about 9 pounds off. The trials only ran a year after stopping, so the leveling off is a projection.

So in trial populations, most people regain most of what they lost. Note who those people are. They stayed on a full dose to the end of a trial, were taken off it all at once, and got no further drug.

Where the 45% comes from

The 45% comes from a Cleveland Clinic study of its own patient records, not a trial [4]. The researchers found 7,938 adults in Ohio and Florida who started semaglutide or tirzepatide between 2021 and 2023

and stopped within a year, most of them because of cost or insurance [3, 4]. About half of them were back on some obesity treatment within the year, either the same drug again or a different one [4].

The headline count is from the 1,519 people treated for obesity who had a weight recorded both at stopping and a year later. Of those, 677 weighed the same or less a year on and 842 weighed more, which is 45 in 100 and 55 in 100 [4]. The average change in that group was a gain of 0.5%, one pound for a 200-pound person, against an average loss of 8.4% before stopping, about 17 pounds [4]. The 1,519 mix together people who restarted, people who switched, and people who did nothing, and the authors assume that the people with no second weight did about the same as those who came back for one [4]. The details are in the paper [4], and the press release gives the short version [2].

Fractions of what

Both numbers in this story are fractions of something, and neither report says how big the something is. "45% kept the weight off" is a relative figure. 45% of whom, and kept off how much? "Two-thirds of the weight came back" is another. Two-thirds of what?

In STEP 1 the something is the weight lost on the drug, 35 pounds for our 200-pound person. Two-thirds back is 23 pounds back, leaving 11 pounds off a year later [7]. "Regained two-thirds" and "still 11 pounds lighter" describe the same person. The first sounds like failure. A healthy skeptic asks for the pounds.

The same relative figure applied to someone who lost 10 pounds is 7 pounds back. Applied to someone who lost 60 pounds, it is 40. "Two-thirds" hides which person you are reading about.

A line at zero

Weight change after stopping is a continuous quantity, and the 45% comes from drawing a line through it and treating the two sides as different kinds of people. The Cleveland count draws its line at zero. Weigh one pound more a year later and you are among the 842 who gained. Weigh one pound less and you are among the 677 who kept it off.

The line tells you the sign of the change and nothing about its size. The average change, one pound in 200, says the typical move was small either way. A reader who hears "45% kept the weight off" pictures 45 people still 17 pounds lighter than when they started and 55 people back at their starting weight. The count does not say that. It says 677 people weighed the same or less than on the day they stopped and 842 weighed more, and it does not say by how many pounds.

The paper shows the individual changes in a figure, and they are spread widely in both directions [4, fig. 4]. The headline collapsed that spread to a line at zero and called one side success. That is what is wrong with the 45%. It is a real count of the wrong thing.

Which people were counted

A frequency counted in one group of people is not your own probability unless you belong to that group. Here there are two groups and two frequencies.

The trial frequency: about 2 in 3 of the lost pounds back within a year. It was counted among people who stayed on a full dose to the end of a trial, were taken off all at once, and had no further drug [7].

The clinic frequency: 45 in 100 at or below their stopping weight a year later. It was counted among people in one health system who stopped within a year of starting, most of them because of cost or insurance [3]. They had lost about half what the trial people lost, they came back for a weigh-in, and about half of them were back on some treatment [4].

Neither group is you. A reader who stopped after a year at full dose and took nothing else resembles the trial group. A reader whose insurance lapsed at month five and who moved to a cheaper drug resembles the clinic group. The hopeful half of the article gives you the second frequency as if it were yours. It belongs to people who stopped early, half of whom went on to something else. If you stop after a full course and take nothing further, the trial group is the one that describes you, and in that group most people regain most of the weight.

The question the study did not ask

The Cleveland study was built to answer one question, which is what the patients of one health system did after they stopped and what they weighed a year on [4]. It answers that. It was not built to answer the question the headline asks, which is what stopping does to your weight, because that needs a comparison. There is no group in the study that kept taking the drug and no group that never took it. There is one pool of people, on a mix of treatments by the time they were weighed, and a single average change of one pound in 200. Nothing in the study says what that pound would have been if they had all stayed on the drug or all gone without.

Reading the 45% more carefully does not fix this. The study has no comparison group, and no reading of its numbers can supply one. The press release reported what the patients weighed as if it showed what stopping did to them, and the article passed it on.

The takeaway

The answer to the article's question is no. If you stop a GLP-1 drug after a full course and take nothing in its place, you will put most of the weight back. The trials measured it: about two-thirds of the loss is back within a year, and the curve projects that about three-quarters comes back in the end [1, 7]. For our 200-pound person that is 26 of 35 pounds back. The article's own expert said as much.

The 45% does not change that answer. It comes from a study that never measured what stopping does, because it had no one to compare against. It counts people who quit early, half of them back on some treatment, and sorts them by whether they were a pound up or a pound down from the day they stopped [4]. It is a real number about a different question, and the press release and the article used it to answer this one.

References

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