

BRIEFING PAPER

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What are the experiences, views and perceptions of patients, carers and clinicians of glucagon-like peptide-1 receptor agonists (GLP-1 RAs)?

Overweight and obesity rates are increasing dramatically, with potentially severe individual and societal impacts^{1,2}. GLP-1 RAs are a class of drugs originally used to treat diabetes but are now also approved as a treatment option for weight loss in patients with overweight or obesity³⁻⁵. Qualitative evidence is crucial to understand the experiences of all stakeholders of taking or delivering GLP-1 RAs.

Therefore, we undertook a scoping review to establish the quantity, nature, and key characteristics of primary quantitative evidence which explores the experience, views, and perceptions of patients, carers, and clinicians regarding the use of GLP-1 RAs for any indication?

Key Findings

1. Of 25 included studies, 14 collected the experience, views and perspectives of **patients/the public**, seven included **healthcare professionals/clinicians** and seven were social media-based analyses.
2. Eleven of 25 studies declared some form of conflict of interest, including seven studies which were partially or fully funded by a pharmaceutical company.
3. Seven studies included **experiences of healthcare professionals/clinicians** with prescribing/deprescribing GLP-1 RAs.
4. Three elicited **patient experiences** of taking GLP-1 RAs for weight loss and eight for diabetes; meanwhile three studies investigated patients purchasing or choosing the drug class.
5. There was no evidence about the **experiences of carers** regarding the use of GLP-1 RAs
6. The **health professional/clinician** evidence base included discussion of themes including the complexities, practicalities, adverse events and costs involved in prescribing GLP-1 RAs
7. Meanwhile, examples of themes in the qualitative **patient** data included administration routes, treatment practicalities and side effects



This is a high-level overview of our research to inform decision-making. Further outputs including plain language summaries and academic papers are available:



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Adult obesity has doubled since 1990 globally, with approximately five million deaths attributed to weight-related health conditions¹.

The economic cost to the UK National Health Service by obesity and related illnesses is estimated at £6.1 billion a year².

There has been a rapid increase in GLP-1 RA research, with a recent systematic review demonstrating their potential in inducing weight loss⁶.

Why and how did we do this review?

Review rationale – the ‘why’

1. Obesity is a growing global health concern, with negative individual and societal impacts.
 2. Weight loss drugs (e.g. semaglutide or liraglutide), have become approved for use in recent years.
 3. This was the result of abundant quantitative literature emerging which evidenced its potential effects.
 4. Quantitative research supplements quantitative work by providing the opportunity to understand perceptions of the long-term efficacy, safety and acceptability of these drugs.
 5. Initial scoping showed, however, little qualitative data to supplement the large increase in quantitative data.
 6. Given the rapidly developing research landscape and changes in how these medications are prescribed and delivered, it would be useful to understand this qualitative evidence base to inform the delivery of services.
- **A scoping review will enable a better understanding of the key characteristics of the existing evidence base and thus inform future commissioning of further systematic reviews and/or primary research.**

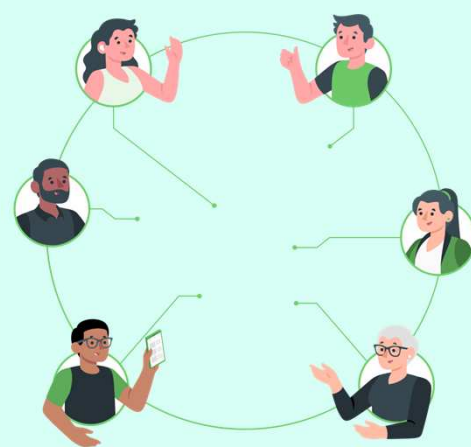
Patient and Public Involvement and Engagement

This review was strengthened by the involvement of a group of around 15 public collaborators, called PERSPEX. This culturally, geographically and demographically diverse group meet monthly, and brought carer, patient, or public perspectives to Isca Evidence: <https://www.exeter.ac.uk/research/groups/medicine/esmi/workstreams/perspex/>.

PERSPEX have been previously involved in GLP-1 RA review work and over the course of 12 months PERSPEX members and researchers discussed GLP-1 RAs at online meetings and other communications. These discussions highlighted safety and industry sponsorship as key areas of interest to patients and carers.

The reality of using GLP-1 RAs, beyond effect sizes for weight loss or safety risks, was of particular interest to our PPIE group. This reinforced the importance of aggregating this qualitative data.

PERSPEX were consulted and involved in multiple stages of the review: informing preliminary scoping work to define the research question; checking the initial search strategy; making suggestions for additional search terms; reading and discussing the draft review protocol; and discussing preliminary findings.



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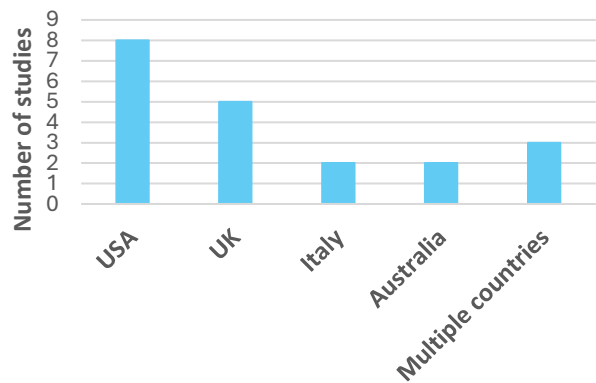
Overview of the evidence

Initially, the searches produced 1732 records. 187 duplicates were removed, 1468 were excluded at title and abstract stage, and 51 of the remaining 77 full texts were screened and deemed ineligible. This left 25 studies in 26 reports included in our scoping review.

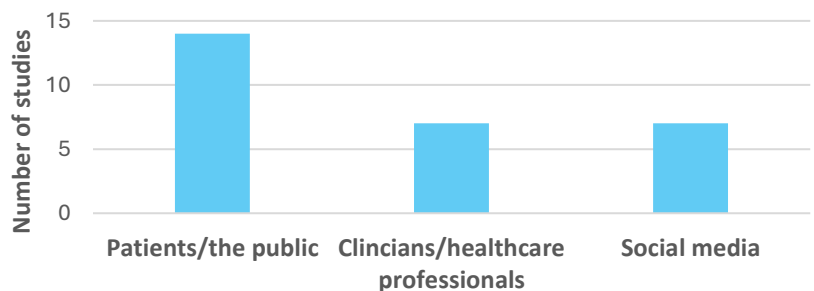
What did we find?

Study characteristics

Studies were mostly conducted in high income countries



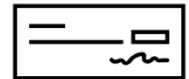
Studies were categorised as involving patients/the public, clinicians/ healthcare professionals, a mixture of both groups or social media-based studies



Data was mainly collected using interviews (n = 15), including face-to-face, telephone and online modes of delivery



15/25 studies reported on conflict of interest, and 11 declared some form of conflict. Funding sources were reported by 20 studies, with seven of them partially or fully funded by a pharmaceutical company



Overview of findings

Experiences of prescribing/deprescribing GLP-RAs (7/24 studies)

Five related to diabetes treatment, four discussed GLP-1 RAs alongside other treatments, two related specifically to weight loss.

Seven studies highlighted complexities, practicalities, costs and potential of adverse events of GLP-1 RAs. One study, with likely the richest qualitative evidence, reported a general willingness and trust in the medication.

Experiences of patients/public purchasing, choosing and taking GLP-1 RAs (15/24 studies)

Three related to experiences of choosing/purchasing GLP-1 RAs, three to taking them for weight loss and eight for taking them for diabetes. No studies related to the experiences of carers.

Common themes included treatment practicalities, the want for simple regime, administration routes, treatment adherence, side effects and social and emotional factors. Six studies highlighted the impact on weight whilst taking these drugs for diabetic management. One study focused on buying GLP-1 RAs for weight loss without prescription.

Social media-based studies (6/24 studies)

Four related to weight loss, one diabetes, and one any indication

A strong public interest in GLP-1 RAs and points on public perceptions or experiences of use are highlighted.

What are the implications of this review

This is the first scoping review to examine the evidence base relating to the experiences, views and perceptions of patients, carers and clinicians of GLP-1 RAs for any indication. This is of particular importance as despite the abundance of clinical effectiveness trials on GLP-1 RAs and the recent increase in notoriety, the evidence about **experiences** of these drugs trails behind. This qualitative data, from multiple stakeholders, could help the development and/or delivery of drugs, and as such form a vital component of the broader picture of effectiveness and acceptability of a drug.

Limitations and strengths

- ↓ This review was limited by the quantity and quality of primary qualitative research exploring patient, clinician and **especially carer** experiences of using GLP-1 RAs for any indication, but **especially for weight loss**.
 - ↓ Drawbacks in data collection and data analysis techniques often meant included studies had a limited focus on GLP-1-RAs, limiting the value of in-depth interpretation.
 - ↓ There was a distinct lack of transparency around the potential impact of conflicts of interest on the findings within included evidence.
- ↑ This review benefitted from a thorough search strategy encompassing database searching and supplementary search methods
- ↑ Our broad inclusion criteria, included any population with experience of GLP-1 RAs for any indication, ensured we captured all possibly relevant studies.

Future research

There are significant gaps in the evidence exploring the experiences, views and perceptions of patients, carers and clinicians with regards to the use of GLP-1 RAs for any indication (especially weight loss).

Future research must address the urgent need for high-quality qualitative evidence in this area. This could include either (1) qualitative evaluations attached to new randomised controlled trials, or (2) stand-alone studies able to recruit a diverse sample.

Once a body of primary evidence is established, qualitative evidence synthesis will be crucial to facilitate decision making, understand patients', carers' and clinicians' support needs, and inform service development.

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Isca Evidence

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