Ozempic (semaglutide) versus Nonpharmacologic Interventions For Weight Management in Overweight Individuals

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NUR 456: Professional Practice Through the Lifespan

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February 27, 2024

Abstract

Ozempic (semaglutide) is a medication prescribed for individuals managing Type 2 Diabetes Mellitus by mimicking the action of a hormone called GLP-1, helping to regulate glucose levels by stimulating insulin secretion and reducing glucagon secretion. Many patients with Type 2 Diabetes Mellitus rely on Ozempic (semaglutide) as a weight loss aid as opposed to implementing healthy lifestyle changes. This information proposes the question: in overweight individuals taking Ozempic (semaglutide), a medication prescribed for those with Type 2 Diabetes Mellitus, for the management of weight loss, does the use of Ozempic (semaglutide) compared to non-pharmacologic weight loss strategies exaggerate the occurrence of adverse effects? A literature search was conducted using CINAHL and PubMed employing the following search terms: *ozempic, semaglutide, weight loss, non-pharmacologic weight loss, adverse effects,* and *obesity.* A total of 12 articles met the inclusion criteria. The research shows that Ozempic (semaglutide) is an effective but short-term weight management aid, as most individuals regain the weight lost within one year. Though Ozempic (semaglutide) demonstrated the highest percent weight loss achieved of any anti-obesity medication (11.85%), it also results in augmented adverse effects. Commonly experienced adverse effects of Ozempic (semaglutide) include vomiting, diarrhea, hypoglycemia, cholelithiasis, tachycardia, thyroid carcinomas, reproductive complications, and stomach paralysis. Nonpharmacologic interventions like diet and exercise were found to be sustainable and have significantly fewer adverse effects, with exercise causing on average a 20% weight reduction. Based on these findings, evidence exists to support implementing nonpharmacologic strategies over Ozempic (semaglutide) for weight loss in overweight individuals.

Keywords: ozempic (semaglutide), nonpharmacologic, weight loss

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