Rx

The first and only once-weekly GLP-1 RA for weight management*

QUESTIONS+ANSWERS ABOUT Pr wegovy® ONCE-WEEKLY semaglutide injection

GO WITH WEGOVY®

In chronic weight management for patients living with obesity or overweight[1]

Recommended as an option by the Canadian Adult Obesity Clinical Practice Guidelines.[2]

What is Wegovy® indicated for?

Wegovy® (semaglutide injection) is indicated as an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management in adult patients with an initial body mass index (BMI) of 30 kg/m^2 or greater (obesity), or 27 kg/m^2 or greater (overweight) in the presence of at least one weight-related comorbidity such as hypertension, type 2 diabetes mellitus, dyslipidemia, or obstructive sleep apnea.[1]

Wegovy® should not be used in combination with any other semaglutide-containing drug (e.g., Ozempic®, Rybelsus®) or any other GLP-1 receptor agonist.[1]

What is the mechanism of action of Wegovy®?[1]**

GLP-1 is a physiological regulator of appetite and caloric intake.

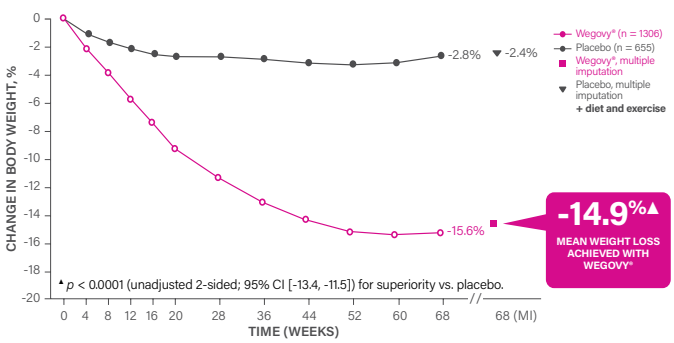
Semaglutide is 94% similar to human GLP-1 and acts as a GLP-1 receptor agonist that binds to and activates GLP-1 receptors. Compared to native GLP-1, semaglutide has a prolonged half-life of around 1 week. The principal mechanism of protraction is albumin binding, which results in decreased renal clearance and protection from metabolic degradation. Furthermore, semaglutide is stabilised against degradation by the DPP-4 enzyme.

What were the efficacy results of Wegovy® in the STEP 1 trial?

Efficacy was evaluated at week 68 in patients living with obesity or overweight and at least one weight-related comorbidity.[1†]

► **Wegovy® demonstrated powerful weight loss vs. placebo**[1]

Mean change in body weight (%) from weeks 0-68



Adapted from the Wegovy® Product Monograph.[1]
ITT population; MI analysis.
Mean body weight ± SD at baseline = 105.4 ± 22.1 kg (Wegovy®) and 105.2 ± 21.5 kg (placebo).[3]

► **Wegovy® demonstrated effects on waist circumference, blood pressure and A1C (2° endpoints).**[1,3] Data are supportive secondary endpoints not controlled for multiplicity. Wegovy® is not indicated to treat these parameters.

Waist circumference	Systolic blood pressure	Diastolic blood pressure	A1C

Effects at week 68 (Wegovy® [baseline], placebo [baseline], % difference vs. placebo [LS mean; 95% CI], respectively): Waist circumference: -13.5 cm (114.6); -4.1 cm (114.8); -9.4 (-10.3, -8.5) p < 0.0001 (unadjusted 2-sided) for superiority. **Systolic blood pressure:** -6.2 mmHg (126); -1.1 mmHg (127); -5.1 (-6.3, -3.9) p < 0.001 (unadjusted 2-sided) for superiority. **Diastolic blood pressure:** -2.8 mmHg (80); -0.4 mmHg (80); -2.4 (-3.3, -1.6). **A1C:** -0.5% (5.7); -0.2% (5.7); -0.3 (-0.3, -0.2).

What is the dosing schedule for Wegovy®?[1]

Wegovy® has a convenient, once-weekly dosing schedule. The 16-week dose escalation helps reduce the likelihood of GI-related events.

Wegovy® Treatment Week		Once-Weekly Wegovy® Dose
1–4	START at the lowest dose	0.25 mg
5–8	STEP UP the dose gradually	0.5 mg
9–12		1 mg
13–16		1.7 mg
17→	STAY at the maintenance dose	2.4 mg maintenance dose

For adult patients: If 2.4 mg is not tolerated, the dose can be temporarily decreased to 1.7 mg weekly, for a maximum of 4 weeks. Patients should re-escalate to 2.4 mg dose.

If your patient misses a dose, instruct them to:

- Inject Wegovy® as soon as they remember if it has been 5 days or less since they should have injected it. Their next dose can be injected as usual on the scheduled day.
- Skip their missed dose of Wegovy® if it has been more than 5 days since they should have injected it. Their next dose can be injected as usual on the scheduled day.
- NOT inject a double dose to make up for a missed dose.

For complete dosing information, please refer to the Product Monograph.

GLP-1 RA, glucagon-like peptide-1 receptor agonist; A1C, glycated hemoglobin; BMI, body mass index; CI, confidence interval; HDL, high-density lipoprotein; ITT, intent-to-treat; LDL, low-density lipoprotein; MI, multiple imputation; SD, standard deviation.

* Comparative clinical significance has not been established.

** Clinical significance has not been established.

† Study design: 68-week double-blind trial that enrolled 1,961 patients living with obesity (BMI ≥ 30 kg/m^2), or with overweight (BMI ≥ 27 kg/m^2 to < 30 kg/m^2) and at least 1 weight-related complication who were randomized to Wegovy® or placebo. All patients were on a regimen of a reduced-calorie diet and increased physical activity throughout the trial. The majority of patients had at least 1 weight-related complication. The primary efficacy outcomes were percent change in body weight from baseline to week 68 and percentage of patients who achieved ≥ 5% body weight reduction.[1]

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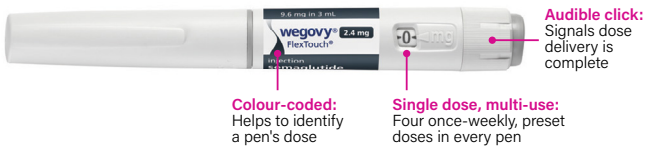
How is Wegovy® administered?[1]

Wegovy® comes in a pre-filled FlexTouch® pen designed for ease of use. There are 4 doses in each pen (needles included).



A new prescription is required for each dose strength. Each pen strength (0.25 mg, 0.50 mg, 1 mg, 1.7 mg, 2.4 mg) has a unique DIN, and therefore requires a separate prescription to be dispensed. Needles are included with every pen (no separate Rx).

- **Before each new pen is used for the first time**, the flow must be checked. Patients should **only check the flow before their first injection with each new pen**. For complete administration instructions, refer to the Product Monograph. Watch the video on how to use the FlexTouch® pen before getting started with Wegovy.

Watch this step-by-step video to help your patients learn how to **use and store** Wegovy® in a pre-filled FlexTouch® pen. wegovy.ca‡

How should Wegovy® be stored?[1]

Before first use: Store in a refrigerator (2 to 8°C).
After first use: Store below 30°C **or** in a refrigerator (2 to 8°C) for up to 8 weeks.

- Protect from excessive heat and light (keep the pen cap on). Do not freeze.
- Always remove the injection needle after each injection and store the pen without a needle attached.
- After the final dose of Wegovy® the pen should be discarded in accordance with local requirements.

What is the safety profile for Wegovy®?

In three 68-week, placebo controlled trials (STEP 1-3 trials), Wegovy® established a safety profile in over 2,000 patients.[1]

The most frequently reported adverse reactions (occurring in ≥ 10% of Wegovy® patients) were:

	Wegovy® N = 2,116 (%)	Placebo N = 1,261 (%)
Nausea	44	16
Diarrhea	30	16
Constipation	24	11
Vomiting	24	6.3
Abdominal pain	20	10
Headache	16	11
Fatigue	11	5.1

Most GI events were mild or moderate, of short duration, and did not lead to discontinuation.

Permanent discontinuation of treatment due to GI AEs occured in 4.3% of people treated with Wegovy® vs. 0.7% placebo.

Help your patients manage GI side effects with lifestyle tips by encouraging them to:[4]

- Eat smaller meals
- Be mindful of eating when they are full
- Increase their water intake
- Limit high-fat and spicy foods
- Limit their intake of alcohol or fizzy drinks

Is there a patient support program for Wegovy®?

Yes—encourage your patients to enrol in the the **wegovy*care*®** Patient Support Program by visiting wegovy.ca![‡]

Consider Wegovy® for your adult patients living with obesity or overweight.

Clinical use:
- Efficacy and safety in combination with other products intended for weight management have not been established.
- Wegovy® is not indicated in type 1 diabetes mellitus or diabetic ketoacidosis.

Contraindications:
- Personal or family history of medullary thyroid carcinoma (MTC) or Multiple Endocrine Neoplasia syndrome type 2 (MEN 2).
- Pregnancy or breast-feeding.

Most serious warnings & precautions:
Risk of Thyroid C-Cell Tumours: In both genders of rats and mice, semaglutide causes treatment-dependent thyroid C-cell tumours. Patients should be counselled regarding the risk and symptoms of thyroid tumours.

Other relevant warnings and precautions:
- Cardiovascular effects: heart rate increase, PR interval prolongation, and use in heart failure
- Risk of hypoglycemia with concomitant use of insulin or an insulin secretagogue (precaution with driving and operating machinery)
- Gastrointestinal events leading to dehydration
- Delayed gastric emptying
- Acute pancreatitis
- Acute gallbladder disease
- Hypersensitivity
- Retinal disorders in patients with type 2 diabetes
- Suicidal behaviour and ideation
- Acute kidney injury
- Use with caution in hepatic insufficiency
- Not for use in end-stage renal disease
- Fertility
- Contraception use recommended

For more information:
Please consult the Product Monograph at https://www.novonordisk.ca/content/dam/nncorp/ca/en/products/Wegovy-productmonograph.pdf for more information relating to adverse reactions, drug interactions, and dosing information, which have not been discussed in this piece. The Product Monograph is also available by calling Novo Nordisk at 1-800-465-4334.

AE, adverse event; GI, gastrointestinal; DIN, drug identification number; OW, once weekly.
‡ The website wegovy.ca is open to the general public.

References:
1. Novo Nordisk Canada Inc. Wegovy® Product Monograph. March 22, 2024. **2.** Pedersen SD, et al. Canadian Adult Obesity Clinical Practice Guidelines. 2022. **3.** Wilding JPH, et al. Once-Weekly Semaglutide in Adults with Overweight or Obesity. *N Engl J Med*. 2021;384(11):989-1002. **4.** Wharton S, et al. Managing the gastrointestinal side effects of GLP-1 receptor agonists in obesity: recommendations for clinical practice. *Postgrad Med*. 2022;134(1):14-19.

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