Why People Won't Quit a Weight Loss Drug—Even When It Makes Them Feel Sick

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Patients who use semaglutide for weight loss, like Ozempic, are more likely to continue the medication if they perceive it as effective, even when facing unpleasant side effects, according to Rutgers Health researchers.

Their study, published in Journal of Medical Internet Research, found perceived effectiveness – reductions in weight, appetite or food cravings – was the strongest predictor of satisfaction and intention to continue treatment, regardless of side effects.

Semaglutide works by helping the body release insulin more effectively and slowing how quickly food leaves the stomach. It also acts on brain pathways that control appetite, helping many people feel full and eat less.

The first formulation of semaglutide approved by the Food and Drug Administration, marketed as Ozempic, is a once-weekly treatment for the management of type 2 diabetes. However, many people now use it off-label for weight management because of its appetite-suppressing and weight-loss properties.

"Ozempic has become a cultural phenomenon, but much of the public conversation has been driven by celebrity endorsements and social media trends rather than the voices of everyday users," said Abanoub Armanious, a graduate student pursuing a Master of Science in Epidemiology degree with a concentration in pharmacoepidemiology at the Rutgers School of Public Health and lead author of the study. "Our study cuts through the noise to ask a simple question: What do people actually experience when they use this medication for weight loss, and what shapes their decision to keep going or stop?"

Researchers involved in the study applied the novel approach of "infoveillance" – using publicly available online health data – to capture patient-centered perspectives that are often underrepresented in clinical trials.

Researchers analyzed 60 anonymous, publicly-available reviews from a health information website and found that most users were satisfied with their treatment when they experienced noticeable weight loss or reduced food cravings.

Although gastrointestinal issues such as nausea and vomiting were common, reported by 62% of users, they didn't significantly influence satisfaction scores or continuation decisions. By contrast, those who experienced little or no weight loss or non-gastrointestinal side effects were far more likely to discontinue treatment.

"There's been a lot of focus on the side effects of GLP-1 medications – nausea, digestive issues – and whether they're worth it," said Morgan James, an adjunct assistant professor of psychiatry at Robert Wood Johnson Medical School, a senior lecturer of psychology at the University of Sydney, and senior author of the study. "What we found is that for many users, the calculus is straightforward: If the drug helps them lose weight, they're willing to tolerate significant discomfort. That tells us something important about the demand for

effective weight loss options and how we need to think about supporting such patients."

The study also found that about two-thirds of respondents (67%) reported weight loss or reduced appetite or food cravings while using semaglutide, aligning with clinical trial findings.

Armanious said the study's approach demonstrates how online, anonymous patient data can complement conventional research by adding more human context to treatment outcomes.

Additionally, the findings suggest an opportunity to help clinicians and patients discuss the risks and expectations associated with long-term use of semaglutide. For patients, recognizing that side effects vary in severity and that weight loss may plateau over time can foster more realistic expectations and better decision-making about whether to continue treatment.

Looking ahead, researchers said future studies should examine whether perceptions of treatment differ by sex, given evidence that weight loss responses may vary; track how patient attitudes change over time, particularly as weight loss slows or reverses; conduct prospective studies that collect demographic and treatment-related information to build on these findings; and explore further the potential mental health effects associated with semaglutide use.