

Medication names

GLP1 medications:

- Dulaglutide (Trulicity®) once weekly injectable
- Liraglutide (Victoza®) once daily injectable
- Semaglutide (Ozempic®) once weekly injectable
- Semaglutide (Rybelsus®) once daily oral

GLP1 and GIP medication:

- Tirzepatide (Mounjaro®) once weekly injectable

Insulin + GLP1 combination medications:

- Insulin glargine + lixisenatide (Soliqua®) once daily injectable
- Insulin degludec + liraglutide (Xultophy®) once daily injectable

How can this medication help?

- Lowers blood sugar
- May promote weight loss
- May reduce your risk of a heart attack, stroke or death.

What else should I know?

- To reduce the risk of losing muscle while taking a GLP1, make sure you are getting enough protein in your diet and include strength exercises (i.e., weights, resistance bands, etc.) in your physical activity routine. Ask your healthcare team for guidance.
- This medication may need to be stopped before planned procedures involving sedation, such as a colonoscopy or surgery. Ask your healthcare provider about when to stop and restart this medication.
- Most people say that GLP1 injections are less painful than finger pokes to check blood sugar.
- Rotate injection sites: you can use your stomach, arms or thighs for injections.
- Don't inject into lumps, scars, hair roots or moles.
- If you are taking insulin, you may need to reduce the dose when starting and increasing your GLP1. Ask your healthcare provider for guidance and monitor your blood sugar regularly.

Who should NOT take this medication?

You should not use this medication if you:

- are pregnant, planning to become pregnant or breastfeeding. Stop this medication 2 months before planning to become pregnant.
- have a personal or family history of medullary thyroid cancer.
- have a personal history of multiple endocrine neoplasia syndrome type 2.

Talk to your doctor if you have any of these conditions

If you currently have or used to have any of the conditions below, discuss the additional risks of this medication with your healthcare provider to make sure it is the best choice for you.

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| • Gastroparesis or other gastrointestinal issues | • Pancreatitis |
| • Kidney disease | • Diabetic retinopathy |
| • Fast heart rate or arrhythmia | • Low body weight and/or poor appetite |
| • Gallbladder disease | • Past suicide attempt or recent thoughts about suicide |

Common side effects

You may experience some nausea, vomiting or diarrhea (also called “gastrointestinal side effects”) when first starting this medication. These side effects may be a sign that the medication is working and should go away with time as your body gets used to the medication.

To reduce gastrointestinal side effects:

- Eat smaller, more frequent meals.
- Eat slowly and stop eating when full.
- Avoid fatty and spicy food.
- Consider taking this medication at bedtime.
- Start at a low dose and increase the dose slowly as recommended by your healthcare provider.
- Weekly injections can be given every 8, 9 or 10 days to start.
 - *Note: This is not recommended by the manufacturer but may be suggested by your healthcare provider to help your body get used to the medication.*

To manage gastrointestinal side effects:

- Drink plenty of fluids.
- Check your blood sugar more often.
- Ask your healthcare provider which medications you may need to temporarily stop if you are dehydrated or unable to keep food down.
- Speak to your healthcare provider about treating nausea and diarrhea, if needed.
- Seek medical attention immediately if gastrointestinal symptoms are severe or if they occur with any of the symptoms in the rare side effects section.

Rare side effects

Gastroparesis or bowel obstruction:

- This medication may cause gastroparesis (where food moves too slowly through the digestive system) or bowel obstruction.
- Seek medical attention immediately if you have:
 - severe stomach pain, cramping or bloating.
 - severe heartburn or vomiting after eating.
 - blood in your poop.

Acute kidney injury:

- Rarely, this medication can cause kidney problems. This is more likely if you already have kidney disease and become dehydrated.
- Seek medical attention immediately if you have:
 - reduced urine output.
 - pee that is dark yellow in colour.
 - increased thirst.
 - dizziness or light-headedness.

Rare side effects (continued)

Pancreatitis:

- Seek medical attention immediately if you experience nausea and/or vomiting in combination with new unexplained back pain.

Gallbladder disease or attack:

- Seek medical attention immediately if you have:
 - pain in the top right or top middle of your stomach after eating.
 - stomach pain that spreads to your back and/or worsens when you breathe in.
 - light-coloured poop, brown-coloured urine, or yellowing of the eyes or skin.

Thyroid cancer:

- It is possible that this medication may increase the risk of thyroid cancer.
- Seek medical attention immediately if you have:
 - a mass in your neck.
 - difficulty swallowing.
 - difficulty breathing.
 - hoarseness that does not go away.

Diabetic retinopathy (for people with type 2 diabetes):

- If you have type 2 diabetes, this medication could decrease your risk of diabetic retinopathy (eye damage related to diabetes) by lowering your blood sugar. If you already have diabetic retinopathy, there is a small risk that it could get worse with this medication. Experts think this may be caused by lowering blood sugar too quickly.
- Precautions:
 - Get an eye exam each year and ask your eye doctor to send the results to your healthcare provider.
 - Start this medication at a low dose and increase the dose slowly as recommended by your healthcare provider.
 - Report any vision changes immediately.

Disclaimer: This resource was developed for individuals as a guide only and does not constitute medical or other professional advice. Please consult your healthcare provider before making any changes to your medications or lifestyle.