

## Who Deserves the New 'Miracle' Weight-Loss Drugs?

Injections meant to treat type 2 diabetes have been found to help people lose weight — now, TikTok has become a place of discussion and potential misinformation

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KAITLYN WADE, 30, has struggled with her weight her entire life. Since she was 19 years old, she's tried every dieting fad that's splashed across [women's social-media feeds](#): Hydroxycut, Skinny Wraps, phentermine and topiramate. They all offered temporary but not long-term effects.

"I've realized it's a lot about the science of your body," she says. "It's mental and physical. There's no quick fix to this."

Wade worried about her weight as she was preparing for the birth of her son in 2021, but after he came, postpartum depression increased her eating habits and a sharp spike in her blood-sugar levels that made her officially pre-diabetic. By September, she reached the heaviest she's ever been: 403 pounds. "That almost feels like a death," she says.

Scrolling through [TikTok](#), Wade came across creators who were trying out a new drug called Tirzepatide, sold under the brand name Mounjaro. Like recently popular semaglutide medications (sold under brand names Ozempic and Wegovy), Mounjaro is an injectable drug originally intended for treatment of type 2 diabetes. These drugs are meant to improve blood sugar control by increasing insulin production in the pancreas and delay food leaving your stomach, which decreases the patient's appetite.-The websites for both Ozempic and Mounjaro clearly state that while they may help with weight loss, they are not meant for this purpose. Wegovy, however, does promote itself as a weight loss medication for those with a BMI of 27 or above.

After getting her prescription for Mounjaro, Wade, a swim teacher, started documenting her journey on TikTok as [@mermaidkaitl](#). Now, her 63,000 followers have watched her share weigh-ins, tips, and "what I eat in a day" food diaries, documenting how she lost 35 pounds over 11 weeks.

Over the past year, the drugs have become increasingly popular for non-diabetic patients to lose weight: [Variety recently reported](#) that semaglutides have become Hollywood's secret weight-loss weapon; Elon Musk tweeted about using [Wegovy in October](#); while entirely unfounded, speculation that Kim Kardashian used a semaglutide to fit into the Marilyn

Monroe dress at the Met Gala gave the drugs an extra spike. On TikTok, the hashtag for Ozempic has nearly 300 million views, while the one for Mounjaro has 200 million. The videos under both are overwhelmingly positive: creators and “obesity experts” giving rave reviews and advice to tens or hundreds of thousands of followers.

The intense interest in what some see as a quick-fix for weight loss has its drawbacks – not only can there be severe side effects, like nausea and vomiting, but the popularity of the drugs has meant a shortage of Ozempic specifically among type-2 diabetics who need it to live.

Online, a different discourse has emerged. In contrast to the overwhelmingly positive videos that fill the hashtags, the backlash has been minor, but enough to get under the skin of some of the content creators. Commenters have derided non-diabetic users for creating shortages while others have complained about the hefty price tag and laundry list of potential symptoms. In response, some of the people seeking a weight loss “[miracle](#)” and the “experts” encouraging them have rebranded the use of these injections into a form of self-care and wellness, arguing that chronic obesity should be taken as seriously as diabetes as if a century’s worth of diet culture has not built its brand on celebrating extreme weight loss at all costs.

Of course, the uptick in prescriptions doesn’t just fall on the creators’ heads. There has been a large marketing push for both the injections and the weight loss-specific telehealth platforms that offer quicker access to prescriptions. (The rise in popularity of numerous telehealth platforms have become increasingly popular in the Covid era, and they were most [recently linked to a shortage of generic brand Adderall](#) across the U.S. as well.) Advertisements have inundated the Instagram and Facebook algorithms while also being rolled out heavily on TV as well.

What the online conversation loses are the real and dire issues obese patients face in medicine. Extreme weight loss has always been widely celebrated, but [obese patients](#) have often struggled to get proper medical attention from providers who can't see past their weight. While obesity can put patients at higher risk for chronic diseases like heart disease or diabetes, there are numerous other factors, genetic and otherwise, that can affect patients no matter what their size is. As obese patients are flippantly instructed to lose pounds in order to get essential care, they often turn to dangerous solutions in order to be seen and heard by their care providers.

April, a registered nurse known as [@thatnurseapril](#) on TikTok, has been struggling with her weight for a decade, but was never able to lose more than 14 pounds. She was fed up with how her weight had made it difficult to do even simple tasks, like vacuuming without feeling out of breath. Combined with her mom and sister's diagnoses as type 2 diabetics, April was looking for a way to put herself at a lower risk. When she heard about Mounjaro this summer, she first went to her primary care physician for a prescription, and was surprised to be met with hesitation. Her physician instead encouraged her to go the old-fashioned route of diet and exercise. Frustrated, she joined a Telehealth program, and was able to get a prescription; she has since lost 62 pounds.

Like Wade, April has documented her journey on TikTok from the beginning, amassing over 60,000 followers who have viewed her success story. In November, she met with her primary care physician for the first time since she had been told to not take these injections, and her PCP was supportive.

Both Wade and April have reported minimal side effects from Mounjaro, but that's not the case for most patients. The nausea, vomiting, and sometimes diarrhea can be a daily burden, often spurred by an increase in dosage or fatty foods lingering in the stomach for too long due to the delayed gastric emptying. It can also be triggering for patients with histories of disordered eating habits.

“You have to be careful with people that have a history of eating disorders and of people that are going too low with their blood sugar,” says **Laura Cipullo**, a registered dietitian, certified diabetes educator and certified eating disorder specialist, who has not worked with Wade or April. “Is this causing any kind of malnutrition, especially in a person that wasn’t over-nourished? It’s something that has to be really monitored closely.”

**Cipullo’s** practice has seen a rise in requests for Ozempic, and she worries that not enough patients are prepared for the physical and psychological changes that happen with these drugs, noting that regular visits with a physician, dietitian, and therapist are highly recommended to monitor a person’s physical and mental well-being.

“If it’s somebody that’s saying, ‘Listen, this is what happens when I take it, and I’m looking for support’ and it’s just support, great. But the thing is, the typical Instagram user that’s trying to get support from another layperson isn’t necessarily receiving correct information,” **Cipullo** explains.

TikTok and Facebook groups have created grassroots digital support groups. Various videos under the Mounjaro and Ozempic tags provide advice on a suite of over-the-counter medications to offset heartburn, constipation, and migraines. Commenters celebrate new milestones for their favorite creators or complain about the drug not yet working as quickly for them. Not nearly as many videos detail what happens when you quit taking the drug. Given how recently its popularity has spiked for non-diabetic patients, there is very little information on what happens after a patient wants to conclude their journey. The reality is that like diabetic patients, those who are on these drugs will likely [have to be on them for a lifetime](#) or they run a high risk of gaining back most of the weight they lost.

“Nothing is permanent,” says Dr. Azza Halim, an anesthesiologist and physician with expertise in aesthetic medicine, anti-aging, and regenerative medicine who also does not work with Wade or April. Dr. Halim has prescribed semaglutides for weight loss purposes to patients at her practice. “I tell my patients there is no magic pill. You still have to do the effort. All the

studies have shown that once you do stop the semaglutide, people regain up to two-thirds of the weight they lost. Unless you do behavior modification, you will regain some of that weight.”

On top of practical advice for the usage of these injections, many more videos offer advice on how to not only get a prescription but not pay full price for it. Currently, the average cost for Ozempic for people without insurance is around \$2,500 annually. Pharma company Eli Lilly offered a coupon for Mounjaro that lowered its price to around \$25 a month for 12 months, though there were growing concerns for patients who could not afford its usual price after the coupon expired.

“If there’s a higher demand, it’ll make it that much more expensive for those who really need it,” **Cipullo** warns.

As someone who both works in the medical field and is a Mounjaro patient with a large following, Nurse April has been combating comments similar to **Cipullo’s** on her page.

“I get pretty heated,” she says, noting she tries not to respond to many of them. “It’s usually persons that are diabetic and are running into prescribing issues, which we’ve seen with Ozempic,” she says.

Her defense echoes that of numerous other creators: “The [commenters will] say ‘Well, this is a diabetic medication, and now I can’t get it because you’re only taking it to lose weight or to drop a few pounds. It’s aesthetic for you.’ So I just try to educate by saying that obesity is a chronic disease and a chronic condition like any other chronic conditions such as diabetes, and it deserves to be treated in the same manner.”

While there are many users of Mounjaro, Ozempic and Wegovy who have turned to them to subside obesity-related [health](#) risks and warnings like Wade and April, there is also a risk of these drugs being re-shaped as quick fixes for those who want to shed a small amount of weight. The last several decades have seen fad diets become a cultural norm promoted on talk

shows and lifestyle magazines with flippant ease. [Social media](#), and TikTok in particular, have unearthed new, alarming concerns for rises in body and facial dysmorphia for younger generations.

An increasing number of Gen Z users have chosen TikTok as their primary search engine and the app's opaque and mysterious personalized algorithm has certainly gotten flack for pushing weight loss products, "thinspo" aesthetic videos, dangerous diets like intermittent fasting and other unverified medical advice. It would not be surprising if the algorithm had pushed all of the above to people who simply wanted to know more about what these injections could do for them.

"The pressures of diet culture and the societal expectations to look a certain way perpetuate body dissatisfaction, which we know is a leading risk factor in the development of an eating disorder," says Elizabeth Altukara, director of education for the National Eating Disorder Association. "It's time to stop body shaming and move toward body acceptance — for physical and mental health reasons."

To counter the dangers of diet culture over the last decade, the body positivity movement has made strides in fat liberation and representation in all forms of media. There has been more on-screen and cultural body diversity as well as allowing many to see that health is not restricted to a number on a scale. Still, those figures have become targets for virulent hatred on-line, like their existence is not only offensive but a problem to be solved.

Both Wade and April have, at times, wondered what it would be like to let go of their desire to be thinner, and to embrace their body no matter how their weight fluctuates. In the end, their personal choices to turn to Mounjaro were not for aesthetic purposes but rather to stave off real health risks they have faced in recent years, whether from family histories or warnings from their doctors. They were both tired of hoping for the best.

"I still want to embrace my body and know that I'm beautiful at every size," says Wade, "but it needs to be healthy so that I can live a long, beautiful life and not be held back."