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Exploring How GLP-1 and SGLT2 Medications Influence Appetite and Alcohol Habits

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01 Alcohol Use and Obesity in Vermont – Addressing Current and Emerging Health Issues

- ~ 80% of Vermonters are classified as overweight or obese
- Over 55,000 Vermonters have been diagnosed with diabetes and one in four Vermonters have undiagnosed diabetes
 - As overweight VT children reach adulthood, diabetes rates are expected to increase substantially (Vermont Department of Health, 2024).
- GLP-1 inhibitors (e.g. Semaglutide and Liraglutide) exhibit weight loss effects in addition to their primary action of blood sugar control due to their ability to increase satiety and slow down gastric emptying
- Case reports have shown that GLP-1 inhibitors may also decrease alcohol cravings and help with management of alcohol use disorder, however more research is needed (Richards et al. 2023, Quddos et al. 2023, Aranäs et al. 2023)

What does this mean for Vermont in particular? →

02 Site Specific Considerations

Vermont (VT) has one of the highest rates of binge drinking in the United States (Center for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System 2024)

- 26% of adults 18-24 years old report binge drinking in the past 30 days
- 24% of adults 65 and above drink at a level of risk
- Treatment is initiated for 46% of youth and adults with substance use disorders, however, only half pursue treatment for more than 30 days

Are our patients taking GLP-1s and SGLT2 medications finding benefit in minimizing alcohol use along with a decreased appetite?

Could there be additional avenues to help folks struggling with both alcohol use and obesity?



03 Community Perspectives

- St. Albans Primary Care sees patients from across Vermont and New York – many struggle with years of difficulty losing weight, limitations of affordable food options and exercise restrictions due to weather, chronic pain, arthritis, old age etc.
- With insurance changes in 2025, many patients either previously on a GLP-1 medication or interested in starting one are facing copays of \$700+ even with insurance
- Worsening mental health concerns and difficulty finding counseling has contributed to an overall rise in substance use

Lots of our patients have had success using these meds to reduce cravings for unhealthy foods - what if they could also use them to reduce cravings for other unhealthy things they put in their body, like alcohol, tobacco, even recreational drugs?

- Heid Luneau
RN Care Coordinator

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Alcohol use can have effects on many aspects of health, including elevated blood pressure as well as the calories and carbohydrates in alcohol contributing to problems of obesity and diabetes/pre-diabetes.

- Dr. Toby Sadkin
St. Albans Primary Care Practice Supervisor

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04

How can we gain better awareness of how GLP-1 and SGLT2 medications impact our patients?

How can we best support patients undergoing various chronic illnesses?



Anonymous patient survey inquiring satisfaction with GLP-1 and/or SGLT medications, changes in appetite and/or alcohol use

05 Results and Response Data

- **69 Responses**
- **40 individuals drank alcohol at baseline**
 - 22.5% noticed a change in use within 1 month
 - 5% noticed a change in use within 1 week
 - 10% noticed a change within 1-2 months
 - 60% did not have a change in alcohol use
 - Comparing drinking before and after the medication, all individuals who responded either stayed the same or decreased
 - A larger percent of respondents without diabetes found a moderate-large decrease in appetite as compared to individuals with diabetes/pre-diabetes

06

Was this Inquiry Effective?



Somewhat –

Roughly 18% of patients responded to the survey.

While some individuals with prior alcohol use may notice a decrease in use correlating with onset of their GLP-1 medication, this finding is not generalizable to the whole patient population.

Limitations:

Response bias can impact patient responses.

Affordability and insurance coverage still impacts whether patients, regardless of diabetes diagnosis, can start and/or continue these medications.



Future Interventions

- The practice can incorporate AUDIT evidence-based questionnaires into GLP-1 medication follow up visits.
- SGLT-2 Follow ups can include routine questioning regarding weight, appetite, and medication satisfaction.
- Continue counseling on the impact of alcohol on weight and overall health.
- Further research is needed to better understand a potential correlation of GLP-1 and/or SGLT2s and alcohol use

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