

Semaglutide + BPC-157 (Oral)

Oral semaglutide received FDA approval in September 2019 for use as an adjunct to diet and exercise as an anti-obesity medication. Semaglutide is a synthetic version of a naturally occurring hormone that acts on appetite centers in the brain and in the gut to induce weight loss by reducing hunger, and increasing feelings of satiety, thereby helping people eat less and reduce their calorie intake.



Dosage and Administration

- Tablets are available in 3 mg, 7 mg, and 14 mg strengths
- Oral semaglutide is most effective taken AT LEAST 30 minutes before the first food and beverage of the day, with no more than 4 ounces of plain water.
- Capsules should be swallowed whole, and not chewed, crushed, or cut.

It is recommended that oral semaglutide is initially taken at the 3-mg dose once daily, then increasing the dose to 7-mg daily after 30 days. For patients requiring substantial weight loss, the dose can be increased to 14-mg once daily, after at least 30 days at the 7-mg dose.



Contraindications

Individuals should not use semaglutide if allergic to it, or if they have:

- Diabetic retinopathy
- Low blood sugar
- Pancreatitis
- Medullary thyroid cancer/family history of medullary thyroid cancer
- Multiple endocrine neoplasia Type 2
- Kidney disease with likely reduction in kidney function

Summary

Oral semaglutide, although not the first medication in its class, is the first ORALLY administered GLP-1 agonist on the market. Its oral bioavailability provides a new option within the class of drugs for patients who are unable to self-administer an injectable. Weight loss using semaglutide has proven significant. A 2021 study showed that 86.4% of adults on semaglutide were able to cut at least 5% of their baseline body weight during the trial, compared to only 31.5% of those following a lifestyle intervention alone.

References

Davies M, Pieber TR, Hartoff-Nielsen ML, Hansen OKH, Jabbour S, Rosenstock J,. Effect of oral semaglutide compared with placebo and subcutaneous semaglutide on glycemic control in patients with type 2 diabetes: a randomized clinical trial. JAMA 2017;318:1460-1470

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