

Mainstream adoption of GLP-1 based obesity-management medications in the UK

Public understanding, safety perceptions and the role of information sources

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Background
GLP-1 based medications have rapidly shifted the obesity treatment landscape. Public understanding, safety perceptions, and information sources influence adherence and risks. This study analyses UK population beliefs in 2024 and 2025.

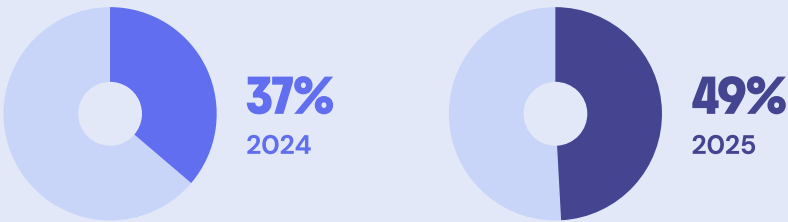
Methods
A UK-representative survey was conducted in September 2024 and October 2025 to assess familiarity with GLP-1 based medications, personal use, perceived effectiveness, beliefs about safety, and primary information sources. Subgroup analyses compared responses by BMI category and information sources (NHS, private healthcare, social media, AI tools etc).

Results:

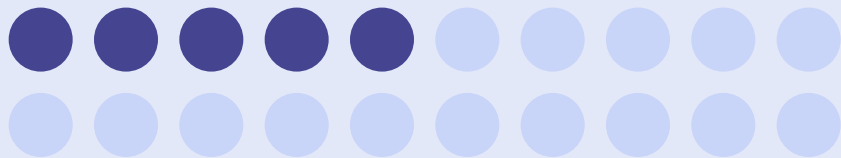
- 1000 people completed the survey in 2024, and 2000 in 2025.



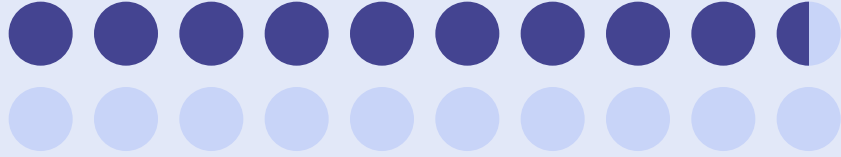
- Familiarity of GLP-1 based medications increased from 37% ('24) to 49% ('25).



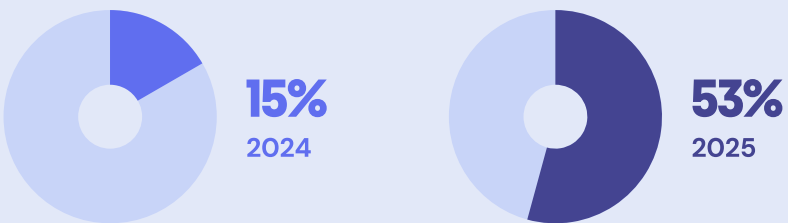
- In '25 nearly one-quarter (24%) reported using a GLP-1 based medication in the previous 12 months.



- 47% of '25 respondents reported knowing someone (e.g. family, friends or colleagues) that is taking a GLP-1 based medication.

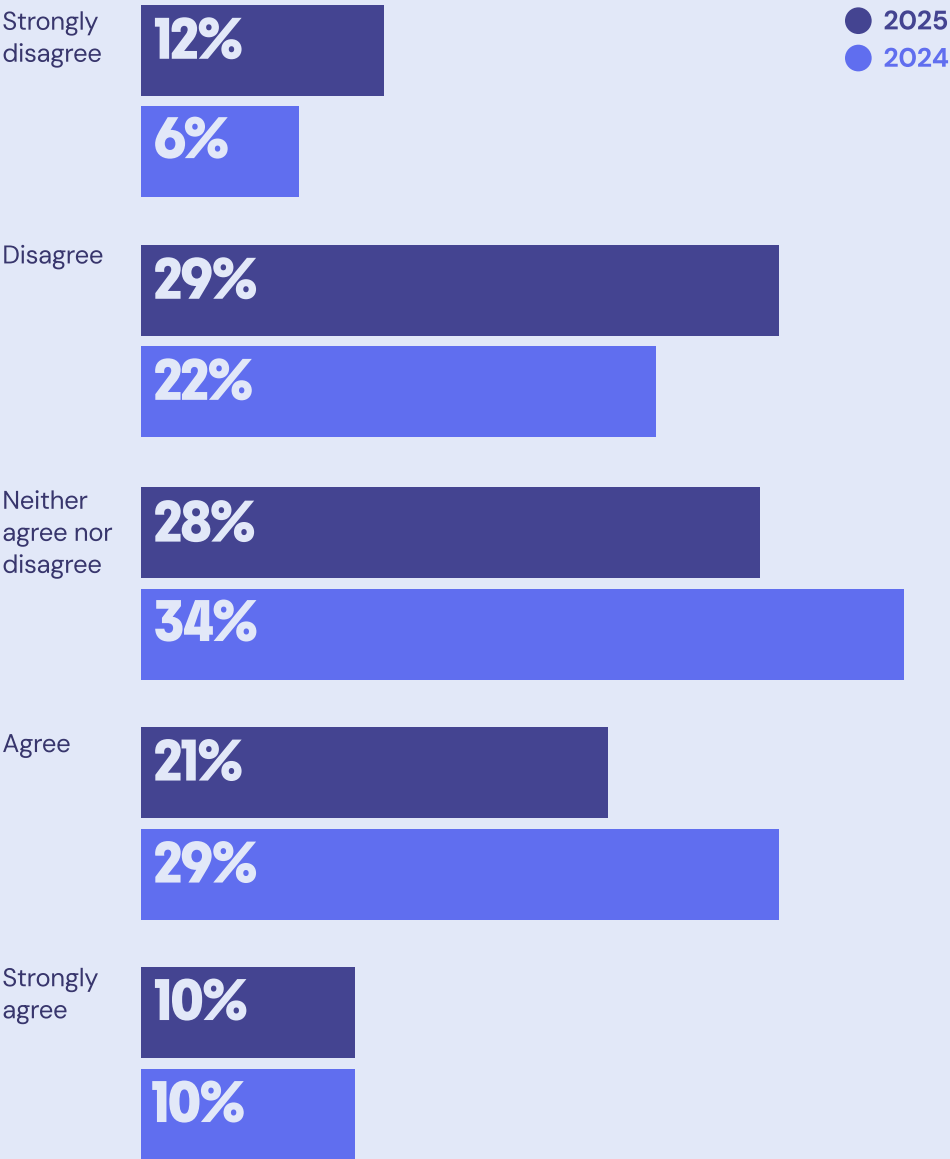


- Belief in medications as an effective way to manage obesity has more than tripled in one year. 53% (1055) reported considering these medications as an effective way to manage obesity vs 15% in '24 (150).



Agreement that the use of medication is a form of “cheating” to manage weight declined (39% in '24 to 31% in '25), while disagreement increased (27% to 41%) from '24 to '25 respectively.

Q. To what extent do you agree with the following statement?:
Using weight loss medication to manage your weight is cheating.



Safety beliefs diverged markedly by information source. Those informed via an NHS GP or other healthcare professional were more likely to agree that the medications are safe when prescribed and managed by a health professional (35% vs 26% for total population) and more likely to report that they are dangerous to use without a prescription (24% vs 22% for total population). Conversely, respondents informed through AI based tools were less likely to report that the medications are dangerous to use without a prescription (15% vs 22%).

Of the total respondents in '25, 22% reported that the medications are too expensive and 17% believe that they should be more widely available on the NHS.

Discussion
The use of GLP-1 based obesity management medication is mainstream in the UK, accompanied by rising confidence. However, disparities in safety perceptions highlight potential harm from unregulated information. Improved clinical communication and regulation of information sources may reduce unsafe behaviours.

Conclusion
As GLP-1 based medication adoption accelerates, ensuring accurate, evidence-based information is critical. Healthcare-led guidance remains essential to prevent misuse and optimise outcomes.

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