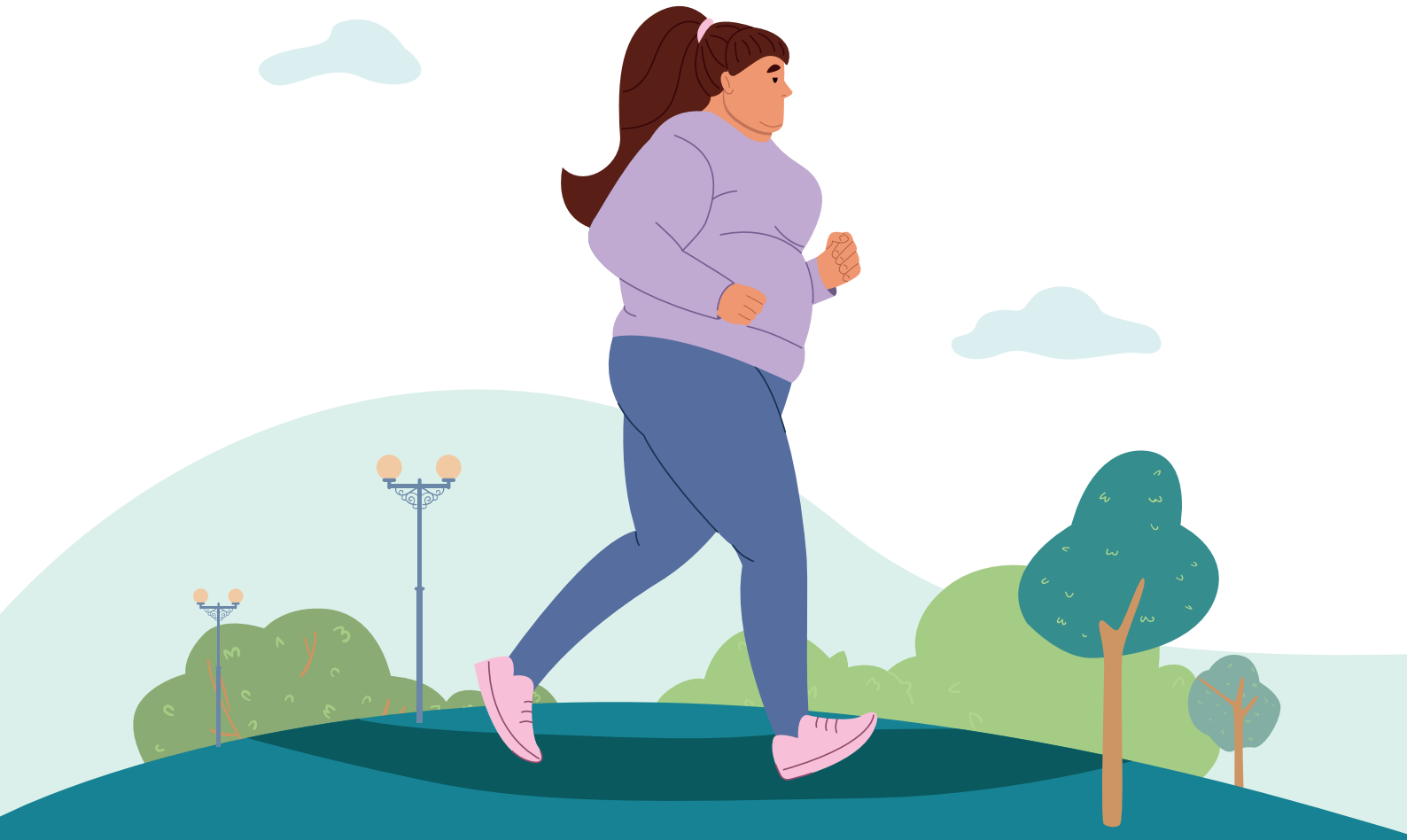
BDA The Association of UK Dietitians
Obesity Specialist Group

Medications for obesity

A guide to eating and living well during your cancer journey



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What's in this guide

New cancer diagnosis

If you have a cancer diagnosis and take medications for obesity[1], tell your cancer care team. Doctors may ask you to stop taking your medications for obesity during cancer treatment. After your treatment, they will talk to you again about medications for obesity. People should not use weight loss methods on purpose before or during cancer treatment (Macmillan, 2025).

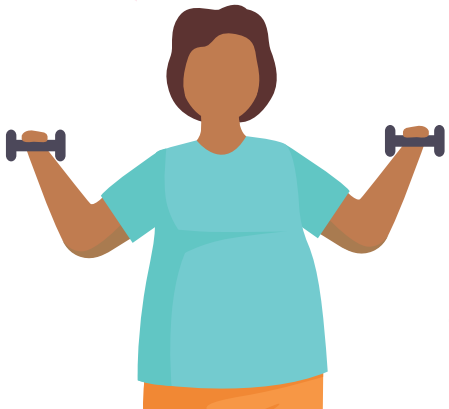
Treatment

Doctors think about your health when planning cancer treatments. They also consider your wellbeing. Your healthcare team will look at something called performance status. Performance status shows how well a person is doing and if they can manage daily tasks. People with a better performance status before cancer treatment often cope with treatment and its side effects more easily.

Losing a lot of weight can negatively impact someone's performance status. Eating less and losing weight can lead to a loss of muscle and body fat. We call the loss of muscle mass **sarcopenia**.

Sarcopenia
It is crucial to guard against sarcopenia during cancer treatment. This helps maintain muscle strength and overall health. If someone is sarcopenic, they lose muscle over time. This makes it harder for them to deal with tough treatments like chemotherapy, radiotherapy, immunotherapy, or surgery. Eating enough protein and doing strength training can reduce the risk of sarcopenia. It also helps you handle cancer treatment better.

[1]These medications go by names like GLP-1s, GLP-1 receptor agonists, or incretin therapy. They include Mounjaro, Saxenda, and Wegovy. In this leaflet, we call them medications for obesity.



A healthcare team may find it hard to recommend the best treatment if someone is losing weight while the plan is being made. This includes treatments such as chemotherapy, radiotherapy, chemoradiotherapy, immunotherapy, and surgery.

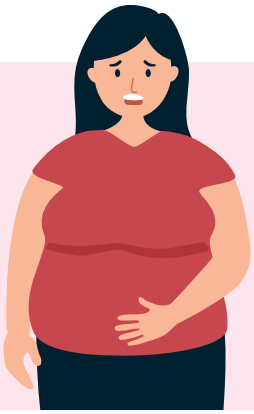
During cancer treatment, your healthcare team will check how you are coping. They will also monitor the treatment and its dose. If you keep using medications for obesity, your healthcare team might need to stop or lower your treatment.

You may feel that 'you still have weight to lose' or that you are 'happy to continue losing weight'. For the best results from your cancer treatment, stay strong and eat well. Weight loss can make this harder. Talk to your healthcare team about any concerns or questions you have.

Side effects of medications for obesity and treatment for cancer

Both treatments can lead to side effects. It is important to talk to a doctor about any concerns you might have. Common side effects of medications for obesity are:

- Nausea (feeling sick)
- Constipation
- Diarrhoea
- Reflux
- Lower appetite



These side effects are also common during cancer treatment and with cancer itself.

If your healthcare team doesn't know you are on medications for obesity and you have side effects, they might think it is from your cancer treatment. This will worry them. It might lead to a recommendation for a change in the type and dose of your cancer treatment. It might also mean you get extra medication for side effects that won't help. This is because the medications for obesity, not the cancer treatment, are causing those side effects.

Diabetes

Medications for obesity help lower blood sugar (glucose) in people with type 2 diabetes. If this applies to you, talk to your GP or diabetes team before stopping medications for obesity for cancer treatment. Stopping medications for obesity without ways to manage blood sugar can cause serious issues. You might need to begin a new medication for your diabetes. Also, your blood glucose levels will need careful monitoring.

Living with cancer

If you have cancer and are not having treatment, you might think about starting or restarting medications for obesity. You might have gained weight from certain treatments. Or you may want to feel better by reaching a healthier body weight.

If you are dealing with unwanted weight gain, we recommend talking to your cancer team or GP first. They can refer you to a specialist for personalised advice. Keep your cancer care team and GP updated on any medication changes. It might be safe to start medications for obesity, but you will need close monitoring and support.

Living beyond cancer

Research shows that a healthy diet, a healthy weight, and regular exercise can lower your risk of cancer returning. They also boost your overall health. A healthy diet and lifestyle can help people enjoy a better quality of life after cancer. Taking medications for obesity after cancer treatment, along with a healthy diet and regular exercise, can help you reach your long-term goals.

Helpful webpages

World Cancer Research Fund

British Dietetic Association - BDA

If you need to see a dietitian

Visit your GP for a referral or find a private dietitian. To check if your dietitian is registered visit:

hcpc-uk.org

References

1. Macmillan 2025. Prehabilitation resources for professionals. Macmillan. Available at **prehabilitation-for-people-with-cancer-clinical-and-implementation-guidelines** [Accessed 17.01.26]

About this publication

This leaflet was produced by specialist obesity dietitians from the British Dietetic Association (BDA) Obesity Specialist Group, with help from health professionals and people with their own experience. Created in partnership with specialist oncology dietitians from the BDA Oncology Specialist Group.

This leaflet does not replace advice from a dietitian or doctor; it is for information only. You can get this leaflet and others like it from the BDA website for free.

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