



Semaglutide (Ozempic®) After-Care

Semaglutide lowers blood sugar levels by mimicking the effects of GLP-1, a naturally occurring hormone that stimulates insulin secretion and lowers glucagon secretion from the liver. It is taken orally or self-administered by subcutaneous injection once a week and may be used for the treatment of type 2 diabetes. Common side effects include low blood sugar levels, nausea, vomiting, and diarrhea

Tips

- If you are prescribed a semaglutide prefilled syringe, ask how to self-administer it before you do it yourself. Semaglutide should be injected just under the skin into the abdomen, thigh, or upper arm. Change injection sites each week so that you are not injecting into the same bit of skin every week. Always inspect the injection and do not use the injection if it contains particles or discoloration is seen.
- If you need to change the day you administer semaglutide, you can, as long as you allow at least 48 hours between two doses (for example, you can change from a Monday administration to a Wednesday administration).
- If you miss your injection of semaglutide, administer it as soon as possible, but within 5 days of the missed dose. If more than five days have passed, skip the missed dose and just administer the next dose on the regularly scheduled day.
- Report any symptoms of a possible thyroid tumor (such as a lump in the neck, shortness of breath, difficulty swallowing, or persistent hoarseness) to your doctor immediately.
- If you develop persistent, severe, abdominal pain, which may radiate to the back or be accompanied by vomiting, ring your doctor immediately as semaglutide can increase your risk of developing pancreatitis.
- Semaglutide may temporarily worsen diabetic retinopathy, an eye condition. Tell your doctor if you notice any change in your vision. If you are a woman, use adequate contraception to ensure you do not become pregnant while taking semaglutide. For a planned pregnancy, it is recommended semaglutide is discontinued at least two months before conception. Tell your doctor if you inadvertently become pregnant while taking semaglutide.

Interactions

Medicines that interact with semaglutide may either decrease its effect, affect how long it works for, increase side effects, or have less of an effect when taken with semaglutide. An interaction between two medications does not always mean that you must stop taking one of the medications; however, sometimes it does. Speak to your doctor about how drug interactions should be managed.

Common medications that may interact with semaglutide include:

- Acetazolamide
- Anticonvulsants such as phenytoin
- Antidepressants such as tricyclic antidepressants (such as amitriptyline, nortriptyline) or monoamine oxidase inhibitors (MAOI) (eg, selegiline, isocarboxazid, and phenelzine)
- Antipsychotics, such as aripiprazole
- Beta-blockers, such as atenolol, labetalol, and metoprolol, may enhance the hypoglycemic effects
- Bexarotene
- Ciprofloxacin
- Corticosteroids, such as prednisone or cortisone
- Diuretics, such as bumetanide, HCTZ, and bendroflumethiazide
- HIV medications, such as amprenavir, atazanavir, and fosamprenavir
- Hormones, such as ethinylestradiol and hydroxyprogesterone
- Insulin (may increase risk of hypoglycemia)
- Isoniazid
- Other medications that affect blood sugar levels or are used for diabetes, such as glimepiride, or metformin.

Semaglutide may also enhance the toxic effects of alcohol, causing flushing.

Note that this list is not all-inclusive and includes only common medications that may interact with semaglutide. You should refer to the prescribing information for semaglutide for a complete list of interactions.

Also, because semaglutide causes a delay in gastric emptying, it may impact the absorption of any medication taken orally. However, in clinical trials, this did not appear to change the effects of other medications.

Please let your practitioner know if you have any questions or if you do not understand any of the aftercare instructions provided.