

DiCE REALM: Harnessing Real-World Evidence from Digitally Enabled Weight Management

In June 2025, the Digital Clinical Excellence Forum (DiCE) took the decision to undertake its first collective real-world evidence study.

The rapid growth of regulated, digitally enabled healthcare in the UK independent sector has created an important new source of real-world clinical evidence. Increasing numbers of people are choosing these services for first-contact care, generating substantial data on patient access, treatment, experience and outcomes.

DiCE recognised both the opportunity and the responsibility to use this evidence to better understand the quality, safety and effectiveness of digitally delivered healthcare.

Why weight management?

Our first study focused on digitally enabled weight-management services, where public demand and access through the independent sector have grown rapidly, particularly following the introduction of GLP-1 and related therapies.

The **DiCE REALM study – Real-World Evidence on the Patient Experience of GLP-1 Medicines and Digitally Enabled Weight-Management Services** – brings together anonymised real-world data from leading regulated UK digital healthcare providers.

IQVIA, one of the world's leading health data and analytics organisations, was commissioned as a study partner to undertake the analytical work, alongside academic expertise from the University of Leeds.

The scale of independent-sector provision is particularly striking¹. Analysis of prescribing and reimbursement data initially suggested that approximately 85% of relevant medicines were being supplied through the independent sector and 15% through the NHS. However, NHS reimbursement data for Mounjaro (tirzepatide) includes its use for both obesity and Type 2 diabetes. Approximately 40% of NHS Mounjaro use relates to obesity, with around 60% attributable to its Type 2 diabetes indication.

When the Type 2 diabetes component is removed to provide a more appropriate comparison of prescribing specifically for obesity, the estimated split is approximately **93% through the independent sector and only 7% through the NHS**. This demonstrates the extent to which pharmacological weight management is currently being delivered outside the NHS and underlines the importance of understanding the quality, safety and outcomes of care being provided through regulated independent digital services.

Creating a study of this scale has required considerable work. Bringing together data from independent commercial organisations has involved addressing complex requirements around

data protection and security, information governance, legal agreements, commercial confidentiality, and clinical and corporate governance.

That work has also established an important framework through which DiCE can undertake further collaborative real-world evidence studies.

What are we learning?

The DiCE REALM manuscript is now in its final stages of preparation for submission to a peer-reviewed journal.

The study represents one of the largest real-world evaluations to date of obesity medicines delivered through regulated digital providers. Its findings demonstrate significant reductions in weight and BMI, with outcomes comparable with those reported in major clinical trials.

Importantly, the study also provides evidence about **who is accessing digitally enabled weight-management care**. The data indicate that the independent digital market is reaching people across socioeconomic groups, ethnicities and age groups, challenging assumptions that privately funded digital healthcare necessarily widens inequalities in access.

The findings also demonstrate the potential for regulated digital providers to deliver meaningful health outcomes at scale. In doing so, these models could make an important contribution to improving population health while potentially reducing future demand on NHS services arising from obesity and its associated comorbidities.

A significant step for DiCE

DiCE REALM is important not simply because of its scale, but because it demonstrates what can be achieved when independent digital healthcare providers collaborate to generate high-quality real-world evidence.

The independent digital healthcare sector now cares for a substantial and growing patient population. Understanding the outcomes, safety and experience of those patients should form an increasingly important part of the UK evidence base.

As Chair of DiCE, I am delighted that our first collective real-world study is approaching journal submission. It represents an important milestone for the Forum and, we believe, for understanding the contribution that high-quality, regulated digital healthcare can make to the health of the UK population.

Reference

¹ The number of people taking weight management medications – IQVIA data collection August 2026

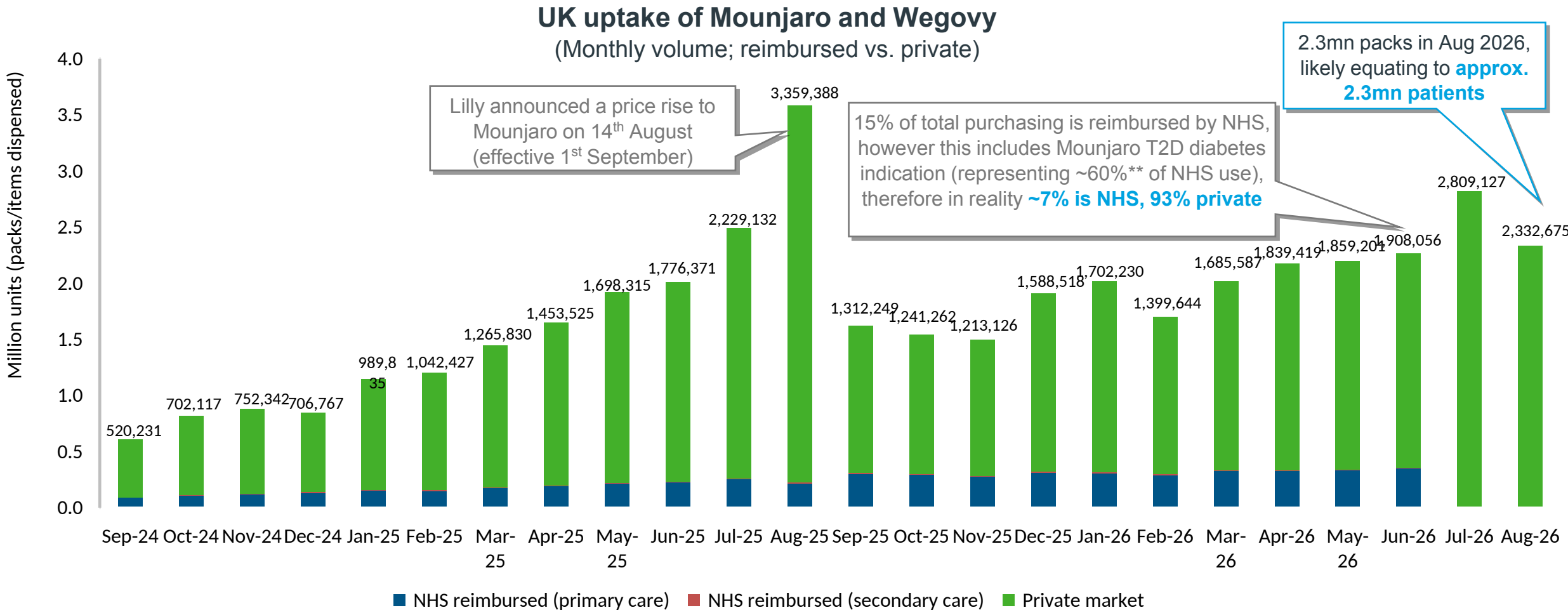
Professor James P Kingsland OBE

Chair, Digital Clinical Excellence Forum (DiCE UK)

The number of people taking weight management medications has grown rapidly; most pay out-of-pocket



Average volume growth of 11.4% each month since Sept 2024



*Weight management defined as combined dispensing/purchasing of Mounjaro and Wegovy, does not include off-label use of Ozempic (licensed for diabetes) in the private market which may be for weight management. Note: NHSBSA data only available up to Apr 2026 in Scotland, and therefore the NHS reimbursed (primary care) supply for Scotland for May 2026 is reflected in private market. NHS usage of Mounjaro will be split between Mounjaro's diabetes and weight management indications. Packs include 4 doses for once weekly administration, i.e. 1 pack per patient. ** Estimated using IQVIA Longitudinal patient data, May-2026)
Sources: NHS reimbursed (primary care): NHSBSA data, Items dispensed, May 2026, NHS reimbursed (secondary care): IQVIA Hospital Pharmacy Audit (HPA), units, May 2026, Private market: IQVIA Supply Chain Manager (SCM), units, May 2026. Copyright © 2026 IQVIA. All rights reserved