



Category	Semaglutide	Tirzepatide
Mechanism of Action	GLP-1 receptor agonist: activates the GLP-1 receptor to increase feelings of fullness and reduce appetite.	Dual incretin agonist: activates both GLP-1 and GIP receptors. This combination may lead to greater appetite suppression and satiety vs GLP-1 alone in some studies.
Weight Loss Efficacy	In the STEP-1 obesity study, semaglutide 2.4 mg produced substantial mean weight reduction (~15%) compared with placebo, with significant appetite and craving modulation observed.	In the SURMOUNT-1 weight-loss program trial (adults with obesity), tirzepatide produced large, clinically significant mean weight reductions (up to ~20% from baseline at higher doses).
Typical Dosing	Once-weekly injection with gradual dose escalation to weight-loss dose 2.4 mg (standard for obesity indication).	Once-weekly injection with gradual dose escalation to target weight-loss dose (per clinical trial protocols).
Common Side Effects	GI: nausea, diarrhea, vomiting, constipation (often during dose increases).	Gastrointestinal (GI): nausea, diarrhea, vomiting, constipation (often during dose increases).
Side Effect Patterns	Often transient and milder once steady dosing is reached after titration.	Side effects are dose-related and may be more noticeable during early titration; most are mild/moderate and transient.
Tolerability & Discontinuation	A small percentage discontinue due to side effects in obesity studies; dose escalation helps improve tolerability.	A small percentage discontinue due to side effects in weight loss trials. Generally well tolerated with less side effects than semaglutide.
Impact on Appetite & Cravings	GLP-1 agonism produces strong appetite suppression and reduced hunger signals.	Research suggests dual agonism may produce robust appetite reduction and improved fullness vs baseline.
Other Relevant Notes for Weight Management	Semaglutide's obesity-specific dosing is well studied and widely prescribed for weight management; response and side effects vary person-to-person.	Tirzepatide's combined GLP-1/GIP action is postulated to affect appetite and energy balance more than GLP-1-alone therapies, though individual response varies.