



Tirzepatide FAQ

Q: What is Tirzepatide? A: Tirzepatide is a once-weekly injectable medication for the treatment of type 2 diabetes. It is a glucagon-like peptide-1 (GLP-1) and glucose-dependent insulinotropic polypeptide (GIP) receptor agonist, which means it mimics the effects of these naturally occurring hormones in the body to help regulate blood sugar levels.

Q: How does Tirzepatide work? A: Tirzepatide works by activating the GLP-1 and GIP receptors in the body, which leads to increased insulin secretion, decreased glucagon secretion, and slower digestion of food. This helps to lower blood sugar levels and can also lead to weight loss.

Q: What are the benefits of Tirzepatide? A: The main benefits of Tirzepatide are improved blood sugar control and weight loss. In clinical trials, patients treated with Tirzepatide experienced significant reductions in their A1C levels (a measure of blood sugar control over time) and lost weight, compared to those on placebo or other diabetes medications.

Q: How is Tirzepatide administered? A: Tirzepatide is administered once weekly via subcutaneous injection (under the skin), usually in the abdomen or thigh. It is important to follow the dosing instructions provided by your healthcare provider.

Q: What are the side effects of Tirzepatide? A: The most common side effects of Tirzepatide include nausea, vomiting, diarrhea, decreased appetite, and constipation. These side effects usually improve over time as the body adjusts to the medication. More serious side effects, such as pancreatitis, have been reported in rare cases.

Q: Who can take Tirzepatide? A: Tirzepatide is approved for use in adults with type 2 diabetes who have not achieved adequate blood sugar control with other medications. It is not recommended for use in people with type 1 diabetes or diabetic ketoacidosis. It is also used off label for weight loss benefits.

Q: How effective is Tirzepatide? A: Tirzepatide has been shown to be highly effective in improving blood sugar control and promoting weight loss in clinical trials. In one study, nearly 90% of patients treated with Tirzepatide achieved an A1C level below 7%, which is considered good glycemic control.