DIET

Starting a GLP-1 Medicine: The First 12 Weeks — What Labels Describe, What Coaches Track, and When to Stop and Refer

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What usually changes

GLP-1 medicines such as semaglutide and tirzepatide reduce appetite and slow stomach emptying. The labels describe dose escalation over several weeks and list common GI side effects such as nausea, diarrhoea, vomiting and constipation (see the [Wegovy](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=ee06186f-2aa3-4990-a760-757579d8f77b) and [Zepbound](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=487cd7e7-434c-4925-99fa-aa80b1cc776b) labels on DailyMed). In STEP-1 and SURMOUNT-1, average weight loss was substantially greater than placebo, alongside a lifestyle programme ([Wilding et al., NEJM 2021](https://pubmed.ncbi.nlm.nih.gov/33567185/); [Jastreboff et al., NEJM 2022](https://pubmed.ncbi.nlm.nih.gov/35658024/)). The prescriber manages the schedule; the coach manages habits.

Weeks 1–4: set the foundation

- **Baseline, not judgment.** Record a repeatable measure such as a timed walk, sit-to-stand count or grip strength. - **Protein-first small meals.** Lower appetite can mean much lower protein. The 2025 joint advisory on nutrition with GLP-1 therapy emphasises protein and food quality ([Mozaffarian et al., 2025](https://doi.org/10.1016/j.ajcnut.2025.04.023)). - **Two strength sessions.** Guidelines call for muscle-strengthening on two or more days a week ([Physical Activity Guidelines](https://odphp.health.gov/our-work/nutrition-physical-activity/physical-activity-guidelines)). - **A symptom log.** Date, symptom and what the client ate. The client shares it with the prescriber; the coach does not interpret it.

Weeks 5–8: adjust habits, not doses

As the prescriber adjusts the dose, appetite may drop further. Shrink portions rather than skipping meals, keep protein foods the client tolerates on hand, and keep fluids steady. If a client feels too unwell to eat or drink, that is a prescriber call the same day, not a habit problem. Watch for "too much of a good thing": clients excited by

early results sometimes cut food further or add hours of cardio. Part of the weight lost on these medicines can be lean mass ([Neeland et al., 2024](https://pubmed.ncbi.nlm.nih.gov/38937282/)), so the coaching message is strength and enough protein, not more restriction.

Weeks 9–12: build the long-term pattern

By the third month, the aim is a routine the client could keep for years: regular protein-first meals, two or three strength sessions, daily walking and consistent sleep. Retest the baseline and celebrate strength gains, not just the scale. Encourage the client to discuss the longer-term plan, including what happens if they stop the medicine, with their prescriber.

Food that works on low-appetite days

Coaches can help clients plan meals they can actually finish when appetite is low. Smaller portions eaten more often, protein foods first, and slower eating are common practical approaches. Greasy, very large or very sweet meals are often harder to tolerate, though every client differs. Keep a short list of "safe" foods the client knows they can manage, and plan them into busy days and travel. A registered dietitian can build an individual nutrition plan, especially for clients with diabetes, kidney disease or other conditions, and the prescriber should hear about any food the client cannot keep down.

Movement without overdoing it

Early weeks are a good time to establish strength training at a level the client can repeat, not to chase personal bests. Two full-body sessions a week with basic movements (squats or sit-to-stands, pushes, pulls, carries) meet the guideline target for muscle-strengthening. Walking after meals is an easy daily habit. If a client feels dizzy, faint or unusually breathless during exercise, stop the session and refer them to their clinician before continuing.

Social events and travel

Weddings, work dinners and holidays all fall inside a 12-week window. Practise a plan in advance: eat a protein-first snack beforehand, take a smaller plate, and agree an exit line for when the client is full. Questions about alcohol, or about adjusting the medicine around travel or time zones, belong with the prescriber and the label.

What to track (and what not to)

| Coach tracks | Prescriber handles | |---|---| | Meals per day, protein-first habit | Dose and schedule | | Strength sessions and steps | Side effects and their treatment | | Sleep window | Labs, blood pressure, glucose | | Baseline retests | Whether the medicine is right | Coaches don't adjust or interpret anything in the right-hand column.

Red flags: stop and refer

Severe or persistent abdominal pain, vomiting that stops fluids, signs of dehydration, fainting, chest pain, vision changes, or symptoms of an allergic reaction need prompt medical attention. Persistent low mood, or eating so little that it looks like disordered eating, also leaves the coaching lane. Side effects can be reported to FDA through [MedWatch](https://www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program).

Scripts for the first 12 weeks

- *"I feel sick. Should I skip this week?"* "That's for your prescriber to decide. Please call them today, and we'll keep meals small and gentle meanwhile." - *"I've lost 5 kilograms. Can we cut more?"* "Let's protect your muscle instead: protein-first meals and strength, and talk to your prescriber about your goals." - *"Can I switch to a cheaper compounded version?"* "Product choice is between you, your prescriber and your pharmacist. I can't advise on that."

Scope in writing

Write your scope down and link to the [NBHWC scope of practice](https://nbhwc.org/scope-of-practice/). State that you do not prescribe, dose, source or sell medicines, and that you will ask clients to share relevant notes with their prescriber with written consent.

Want to coach this? LetsGo Academy

Start free with [Level 1](/academy). [Level 3](/academy/level-3/glp1-what-they-are) covers GLP-1 foundations and [evidence quality](/academy/level-3/evidence-quality-for-coaches). [Level 4](/academy/level-4/glp1-coach-alongside-prescriber) covers working alongside prescribers and [monitoring](/academy/level-4/monitoring-alongside-prescriber). Already coaching? Create your profile at /coach. We do not promise income or client results. *Education only. Not medical advice. LetsGo Academy is not a licence to practise.*

Safety note

Education only. Coaches educate and refer; they never prescribe, dose, source or sell medicines.

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