AMERICAN MEDICAL ASSOCIATION ORGANIZED MEDICAL STAFF SECTION

Resolution: 9 (1-24)

Introduced by: Matthew Vo, MD

Subject: The Need for Long-Term Study of Potential Side Effects of GIP & GLP-1

Medications

Referred to: **OMSS Reference Committee**

(xxxx, MD, Chair)

Whereas, gastric inhibitory polypeptide (GIP) and glucagon-like peptide-1 (GLP-1) medications continue to be heavily advertised and touted as some kind of miracle drug for weight lossbesides their main indication as treatment for diabetes, there are limited studies on the potential side-effects—especially those involving the senior (65 years and older) population, such as muscle loss and bone density loss; and

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Whereas, the costs of these medications continue to be high and they can potentially cost the healthcare system a lot of money over the long run; and

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Whereas, there are no clear guidelines of how long patients should be taking these medications, which are meant to be long-term and potentially life-long weight management medications, and whether the weight loss will be maintained if patients ever want to come off them; and

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Whereas, there are no long-term studies of the potential side effects of these medications while many side effects have been seen; and

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Whereas, there are no current recommendations to better safeguard patients taking these medications and patients are not required to be monitored by qualified health professionals. such as obesity specialists, endocrinologists, or gastroenterologists, while taking these medications; therefore be it

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RESOLVED, that our American Medical Association advocates for more long-term studies to identify and better address the potential side-effects of gastric inhibitory polypeptide (GIP) and glucagon-like peptide-1 (GLP-1) receptor agonist medications, especially in the 65-year and older population (Directive to Take Action); and be it further

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RESOLVED, that our AMA advocates for close monitoring of patients taking GIP and GLP-1 receptor agonist medications by qualified healthcare professionals (Directive to Take Action).

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Fiscal Note: (Assigned by HOD)

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RELEVANT AMA POLICY

N/A