

## **Tapering semaglutide to the most effective dose: real-world evidence from a digital weight management programme (TAILGATE)**

**Embargo 0001H CEST Venice local time Sunday 12 May**

**(updated April 2024)**

Søren Seier 1, Kine Stamp Larsen 1, Jesper Pedersen 1, Jorne Biccler 2, Henrik Gudbergson 1  
1 Embla ApS, 2 Omicron ApS

### **Introduction**

Digital weight management programmes have become widely available as purpose-built mobile applications provide scalable and flexible solutions for providers and patients. The objective of this investigation was to explore the impact of dose tapering of semaglutide for patients with obesity as a clinically relevant weight loss is achieved.

### **Methods**

This study is a real-world, new-user cohort including individuals signing up for the weight management programme no later than the 31st of March 2024. The programme consisted of dedicated lifestyle intervention in combination with personalized dosages of semaglutide.

### **Results**

A total of 2246 participants were included in the cohort with a median potential follow-up time of 32 weeks. Of this cohort, 353 participants initiated a dose tapering of semaglutide in agreement with their treating healthcare professional. The probability of semaglutide tapering 13, 26, 52, and 72 weeks after starting their weight loss journey was 1.1%, 8.4%, 26.7%, 37.1%.

The median duration of the tapering phase was 9 weeks (95% CI, 8 to 10), and the average change in body weight 9 weeks after planned tapering was -2.1% (95%CI, -3.5 to -0.8 %).

Patients who ceased to use semaglutide were followed until the last available data point, 31st of March 2024, the median potential follow-up since cessation was 19.5 weeks. The average change in body weight assuming subjects did not restart semaglutide 26 weeks after cessation was -1.5% (95%CI, -6.4 to 3.3%).

A total of 46 participants re-initiated dosing of semaglutide, the average change in body weight from cessation to re-starting semaglutide was 1.3 % (95%CI, -0.1 to 2.7%). 26 weeks post-cessation there was a 21.5 % (95%CI, 14.8 to 27.6 %) probability of restarting semaglutide.

### **Conclusion**

While tapering semaglutide patients maintained a stable body weight within the first 26 weeks. In conclusion, following a clinically relevant weight loss dose tapering of semaglutide could be completed while maintaining a stable body weight through a digital multi-disciplinary obesity management programme.

### **Keywords**

eHealth, Obesity, Tapering, Maintenance, Multidisciplinary