



A QUICK GUIDE TO WEIGHT LOSS INJECTIONS

Weight loss injections – sometimes referred to as “skinny jabs” – have quickly risen in prominence to become part of the public consciousness. While they are not recommended for under 18s other than in the most severe cases of obesity and health complications, the high level of media coverage means many young people are aware of them.

This quick guide, developed in conjunction with [Tooled Up Education](#), covers information that parents and caregivers need to know on this topic so they can in turn provide balanced information and advice, as well as signposting to additional resources.



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WHAT ARE WEIGHT LOSS INJECTIONS?

The technical term for what most people refer to as weight loss injections is a group of medicines called glucagon-like peptide-1 (GLP-1) receptor agonists. The most high profile is [semaglutide](#) (often known better under the brand names of Wegovy and Ozempic) and there is another called [liraglutide](#) (Saxenda). GLP-1 agonists slow the rate at which the stomach empties, which signals fullness to the brain and reduces appetite. Mounjaro, another high profile weight loss injection, contains [tirzepatide](#), which is a GLP-1 agonist but also a long acting glucose-dependent insulinotropic polypeptide (GIP) receptor agonist. The latter means that it affects metabolism and helps regulate energy balance, and hence tirzepatide is sometimes regarded as a superior weight loss option.

All come as pre-filled pens and are self-administered (daily for liraglutide, and weekly for the others), usually starting on a low dose which is gradually increased until a maintenance dose is reached. The reason for this gradual progression is to allow the body to adapt.

As with all medicines, there is the potential for interactions with anything else the individual is taking, certain people who should not use weight loss injections at all (for example, during pregnancy and breastfeeding) or for whom caution is needed (including in certain heart conditions), and the risk of side effects, which may ease as tolerance develops but for some may be too debilitating or even dangerous.



Note that these products are generally not licensed or recommended for under 18s, though in a small number of cases – over 12s with severe obesity and serious health complications – they may be prescribed through specialist NHS clinics that are able to provide a significant amount of monitoring and support.



Do weight loss injections work?

There is no doubt that these medicines can be highly effective. Typically, people start to lose weight within a few weeks, and [research has shown](#) that after 72 weeks of treatment, patients on semaglutide lost an average of 14% per cent of their body weight, and patients on tirzepatide lost 20%. This, in turn, reduces the risk of weight-related health issues such as diabetes, high blood pressure, cardiovascular disease (including the incidence of heart attacks and stroke) and several cancers.

For this reason, weight loss injections may be [prescribed on the NHS](#) for certain individuals who are living with obesity and associated conditions, and are making lifestyle changes such as altering their diet and taking more exercise.

There is also a considerable number of people who access these products outside the NHS, though as they are prescription-only medicines, healthcare professionals involved in the prescribing, monitoring and supply of weight loss injections should be adhering to all [relevant regulations and guidance](#).

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WHAT ELSE IS AVAILABLE FOR WEIGHT LOSS?

The [first intervention](#) for someone looking to lose weight due to being overweight or obese is lifestyle modifications, namely eating a healthy, balanced diet and doing regular physical activity. It is always sensible for someone in this position to speak to their GP, in order to identify any underlying problems such as high blood pressure, diabetes or sleep apnoea, and it may be necessary to run tests, put in place specific treatments, or refer the patient to a specialist.

Diets that recommend unsafe practices such as extreme fasting or cutting out entire food groups should be avoided, as they rarely work, can cause ill-health, and are not sustainable. Instead, a responsible diet programme should be based on achieving gradual, maintainable weight loss, not be overly restrictive, and include education on how to eat for good health, appropriate portion sizes and making behavioural changes.



Physical activity has wider health benefits as well as just helping someone to maintain their weight, and ideally should include strength and balance as well as cardiovascular exercises. Everyone's circumstances are different, and hence it is sensible to get personalised advice as this will take into account someone's starting point and what they find enjoyable and want to keep doing. This will increase their motivation and hence make meeting their goals much more achievable.

An important aspect of losing weight is avoiding putting the pounds back on, and hence staying physically active and maintaining a healthy diet are vital on an ongoing basis.

Medicines to support weight management may be recommended for those who find lifestyle changes are not helping on their own. Other than the weight loss injections described in this Quick Guide, only orlistat is available on the NHS, and like the jabs should be used alongside adjustments to diet and exercise.

- [Orlistat](#) works by preventing fat in the diet from being absorbed into the body, and instead it is passed out with the person's poo. It starts to do this within a couple of days of the individual starting to take the capsules, and there are eligibility criteria for both being prescribed it, or buying it from a pharmacy. As with all medicines, it is not suitable for everyone, and can have some unpleasant side effects, notably affecting how often someone needs to go to the toilet, and the consistency of what comes out.
- [Setmelanotide](#) can be prescribed for weight loss, but only for individuals with certain genetic conditions. It is a melanocortin-4 receptor agonist that regulates hunger, how full someone feels, and energy expenditure.
- Methylcellulose and [sterculia](#) are sometimes heralded as weight loss medicines because they make someone feel full, but there is little evidence for their effectiveness at controlling appetite and hence they are unlicensed (which means they shouldn't be recommended, supplied or taken) for this use.
- [Appetite suppressants](#) such as methamphetamine, fenfluramine, sibutramine and rimonabant have been used in the past for the management of obesity, but have either been withdrawn or are no longer recommended due to serious safety concerns, which in some instances include a high potential for addiction.

[Surgery for weight loss](#) is available on the NHS for a small number of patients. This is called bariatric surgery and is sometimes referred to as "a gastric band". In fact, there are several different options which generally involve making the stomach physically smaller in size or bypassing it altogether. As with medication, some individuals choose to pay to have this type of procedure done on a private basis, and sometimes outside the UK.

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WHAT'S THE PROBLEM?

While weight loss injections can be effective, they are not risk-free. **Side effects, particularly affecting the gastrointestinal system (e.g. nausea, vomiting and diarrhoea), are relatively common in the early stages of treatment.** While for some, these effects are mild and don't last long, for others, they can lead to complications such as dehydration necessitating hospital treatment. More unusual, but potentially serious and occasionally fatal, side effects have also been reported, notably pancreatitis (and it is perhaps not entirely surprising that a group of medicines developed and used for diabetes, which is after all a disorder of the pancreas, can affect this organ), and optic neuropathy which can affect eyesight.

There is a lack of awareness of [licensing restrictions for weight loss injections, which vary across brands even if they contain the same medicine.](#) For example, there are three brands of semaglutide, but only Wegovy is licensed for weight loss in the UK, while Ozempic is not. Using an unlicensed medicine means that it has not been approved for that purpose, so the product information and labelling will not reflect how and why someone is using it. This can cause confusion for the patient, and also means the healthcare professional involved in prescribing it bears greater responsibility that would otherwise be the case.

There has been a surge in the number of places offering weight loss injections outside the NHS, and many of these are not face to face services. While this is allowed, it is essential that [the prescriber gets enough information](#) in order to ensure that the medication will be safe and appropriate for the patient, and is able to verify their weight, height and/or body mass index (and ideally not solely through patient reporting). There is also a need for ongoing monitoring, access to advice and guidance about side effects, and consideration must be given to the patient's wellbeing, as eating disorders, body dysmorphia and other mental health conditions may play a part in someone seeking out weight loss options.

Ensuring healthcare professionals involved in services prescribing and supplying weight loss injections are registered with the appropriate regulatory bodies is an [essential first step](#) for patients, as is honestly answering any questions about their health and medical history. Sadly, there are illegitimate providers who supply

[products that are being used inappropriately or are counterfeit](#), and who don't provide the level of care patients – some of whom will be vulnerable and even desperate – need and deserve, which can cause all kinds of harms.

There have been [supply issues](#) with weight loss injections, which have led to some people switching between products. This should not be done lightly, as the products vary in strength and dosing as well as in terms of licensing, so it is crucial that medical advice is sought, otherwise the individual is at risk of treatment failure and/or side effects. Another unexpected risk is to do with one of the ways in which the drug class works, which is by slowing stomach emptying. This can pose dangers during medical procedures involving sedation or anesthesia as there is an increased risk of stomach contents entering the airways and lungs – this doesn't mean the medication needs to be stopped, but it certainly should be mentioned during the pre-operative assessment.

Given all the above, it would be easy to overlook what people use weight loss injections for: as a way of tackling obesity and improving their overall health. However, it is important to keep in mind that [research has shown](#) that the weight loss and its associated benefits are not sustained once the individual stops using the injections. These are also not products that have been around for that long, so there is paucity of data when it comes to longer-term outcomes and effects.



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Spotting fakes

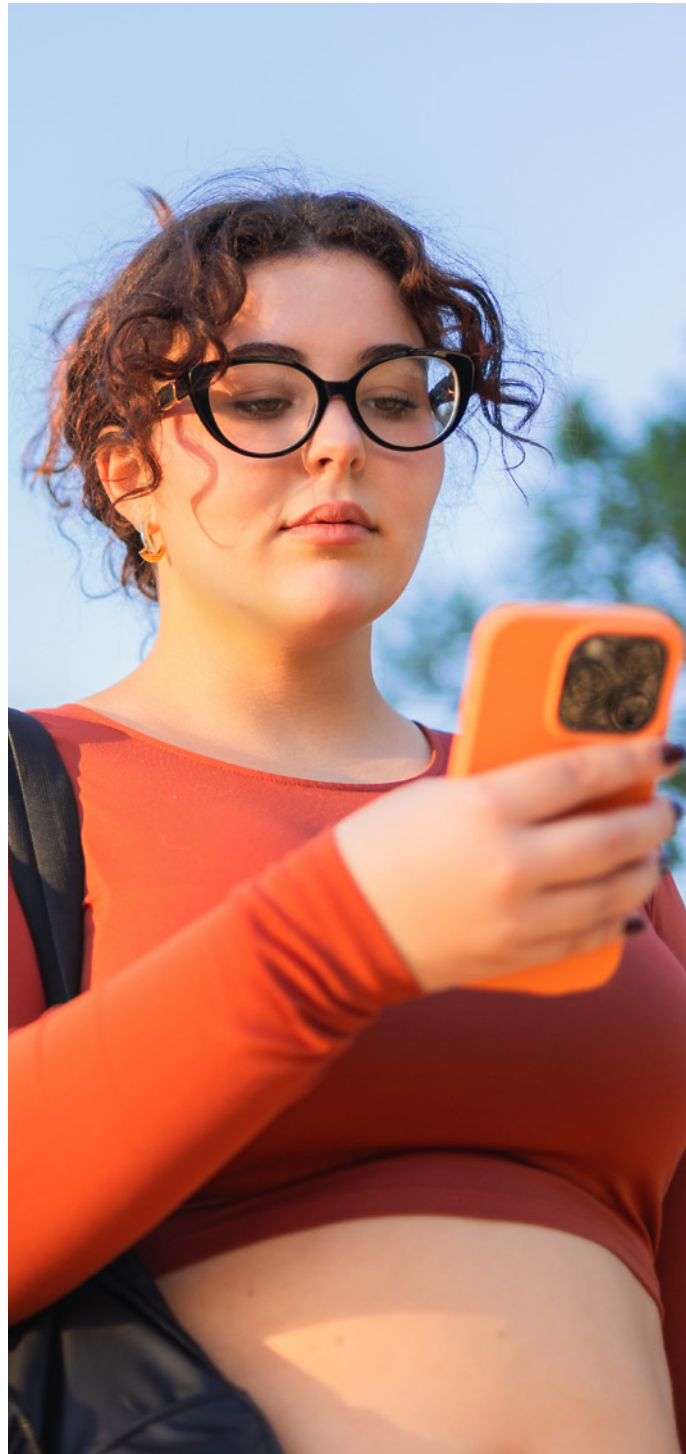
The market for weight loss injections can feel crowded and confusing, and it can be tempting to go for the cheapest option. Here are some pointers that can help tell the fakes from the genuine medicines:

- Remember these are prescription-only medicines so must involve a consultation with a healthcare professional in the first instance and then regular monitoring – [unregulated sellers](#) such as beauty salons and social media should be avoided.
- Legitimate weight loss injections come in pre-filled injection pens, never as powder in vials that needs dissolving and drawing up into a syringe.
- Only pharmacies (including online) registered with the General Pharmaceutical Council can supply weight loss injections – it is easy to check at <https://www.pharmacyregulation.org/registers>.
- Check pens carefully for the expiry date, batch number, manufacturer, brand and medicine name, and any signs of tampering or damage – if it looks dodgy, don't use it, instead get in touch with wherever dispensed it.

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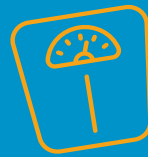
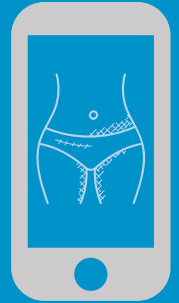
Children and young people's exposure to weight loss products online

A UK [report from the Children's Commissioner](#), published in February 2026 sought to quantify young people's exposure to products that are designed to change their appearance. This included creams that claim to lighten skin colour, Botox and muscle-boosters. It found that a substantial proportion of 13-17 year olds see diet and weight loss products online.



54%

of the 2000 young people involved in the study had seen 'exercise or diet plans aimed at helping people lose weight when online,



and

52%

had seen meals, snacks and drinks online that claim to aid weight loss.



Despite a ban on adverts for prescription-only weight loss drugs in England, **the report found 41% had seen drugs like Ozempic, Mounjaro, Wegovy when they were online.** Girls (45%) were more likely than boys (37%) to see this content. Young people described seeing social media users discuss using weight loss injections' and illegitimate adverts describing them as a way to rapidly lose weight, outside of a health context.

78% of the young people involved in the study felt that seeing these kinds of products negatively impacted their self-esteem.

They explained that viewing unrealistic body standards alongside the use or marketing of appearance-changing products puts undue pressure on them. Given that body dissatisfaction (one key factor in the development of disordered eating behaviours) is already widespread in this age group, these findings highlight the need for stronger safeguards, education and support to help young people navigate these pressures.



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WHAT CAN PARENTS DO?

Parents and caregivers have a significant role to play in helping their children stay safe, weight loss injections, use of medicines and drugs more generally, and in supporting them to navigate narratives around weight and size that are now prolific on social media.. Here are some tips:



Remember that you are role modelling.

Be aware that how you talk about your body image will inform how your child sees theirs – be careful about negative self-talk.



If you use weight loss injections, take care with providers and supplies.

Some parents and caregivers will use weight loss injections, but it's vital to take care with your provider by following [government guidance on the topic](#) and be prepared to explain this to your child.



They are prescribed medicines and not purchased products.

Respect weight loss injections as the prescription-only medicines they are, as opposed to something that is purchased. The fact that so many access them privately rather than through the NHS can blur this distinction. Communicate this clearly to your child.



Consider legal versus illegal products.

There are similarities with weight loss injections and vapes in that it can be difficult to tell genuine products from fake ones. Being open about this dilemma, and how to overcome it is a great conversation to have with your child.



Be wary of narratives around quick fixes.

Many people regard weight loss injections as a quick fix, when in fact they should be part of a package of care including regular monitoring as well as lifestyle interventions such as diet and exercise. Make this clear in your framing to your child, as otherwise it might spill over into other areas such as thinking drug use is a coping strategy for a mental health need.



Cultivate open dialogue around socials and other media.

There is a steady stream of chat online about weight loss injections, both from people who have used them, and speculation about others who may have done. This can create a toxic environment, so keep your ears open and be prepared to challenge anything that doesn't sound quite right.

We know many young people are seeing content relating to weight loss injections. Encourage reflection and awareness about their experiences online by nudging them to ask questions like:

- Does this content make me feel better or worse?
- Am I actively connecting or just passively scrolling?
- Do I need a break?

This kind of mindful engagement helps young people develop habits that protect digital wellbeing, build resilience, and make more thoughtful choices about how they spend time online.

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WHERE CAN I GO FOR MORE INFORMATION?



Resources to check out

Healthy, open, non-judgemental conversations with young people can be – literally – life-saving.

Fiona Spargo Mabbs OBE, founder and director of the **DSM Foundation** has written two books that are packed with advice and information.

Award-winner, [I Wish I'd Known](#)

interweaves the story of one family's terrible loss with calm, measured and practical suggestions for parents about young people, drugs and decisions.



[Talking the Tough Stuff with Teens](#)

draws extensively on hundreds of conversations with young people and parents in focus groups and

school and college workshops, to give a warm and compassionate framework for tackling tough conversations about difficult things, without judgement or anger. It covers everything from curfews and screen time, to sex, self-harm and suicide.

[The DSM Foundation](#), our drugs education charity, has a number of resources to support parents and carers in their conversations with young people including [videos](#) on healthy coping strategies and teenage decision making by DSMF founder and director Fiona Spargo-Mabbs.

The [government website](#) has good information on weight loss injections.

Individuals with a history of restrictive eating disorders should be particularly cautious of weight loss injections and ensure that prescribers are aware of their history and risk factors. This [article](#) contains some helpful guidance.

The [NHS website](#) has broader information about obesity and how to manage it.

There is a good article in [Which?](#) about weight loss injections.

A more detailed but quite technical article on weight loss injections has been published by the [Pharmaceutical Journal](#).

It's important to remember that these resources are not a replacement for clinical or specialist support. If you are worried about your child, always consult your GP or other relevant professional.

[Tooled Up Education](#) is thrilled to be collaborating with the DSM Foundation. Tooled Up brings evidence-based resources to school communities and enjoys strong relationships with some of the most respected researchers and organisations in the world. The Tooled Up Team dedicates its time to studying thousands of hours of research evidence and turning this into easy to use resources, in the form of videos, articles, podcasts, activities and tips to try.



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foundation

The drug education charity