What Happens to Your Body After Stopping Mounjaro or Zepbound? Transcript

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Introduction: What Happens After Stopping Mounjaro or Zepbound

Let's be honest Let's be honest about what about what happens after you happens after you stop taking stop taking Mounjaro or Zepbound. Not the Mounjaro or Zepbound. Not the panic version, not the one panic version, not the one where someone says you'll where someone says you'll instantly gain instantly gain every pound you lose.

And certainly not the version where And certainly not the version where people blame people blame the drug or the patient, or the drug or the patient, or act as if act as if using using obesity or diabetes drugs obesity or diabetes drugs means you're taking the means you're taking the easy way out or are a easy way out or are a fraud. None of fraud. None of this is true, this is true, right? The truth is right? The truth is much more useful much more useful than that. So, Mounjaro and than that.

How Tirzepatide Works and Why Weight Loss Happens

So, Mounjaro and Zepbound, as you know, Zepbound, as you know, contain tirzepatide. contain tirzepatide. Mounjaro is intended for Mounjaro is intended for the treatment of type 2 diabetes the treatment of type 2 diabetes, while Zepbound, while Zepbound is used for is used for long-term long-term long-term weight management, although it is the same weight management, although it is the same molecule. So it's the same molecule. So it's the same active active active drug, but it drug, but it can be can be can be used for used for different medical different medical reasons. For many reasons. For many people, tirzepatide people, tirzepatide can be life-changing.

This can be a good This can be a good start on the path to start on the path to weight loss. But it's weight loss. But it's almost never the almost never the only or best only or best way to lose weight way to lose weight without considering other without considering other factors like diet, factors like diet, exercise, and more.

It can definitely It can definitely calm the constant calm the constant "food noise" and "food noise" and make a regular make a regular portion really filling, portion really filling, or even too large.

It can definitely It can definitely improve improve improve glucose levels, that's a glucose levels, that's a fact. It can fact.

What Happens When You Stop: Hunger, Food Noise, and Regain Risk

It can help people help people lose significant lose significant amounts of weight amounts of weight after they after they have tried various have tried various diets, diets, diets, workout programs, workout programs, meal plans, supplements, meal plans, supplements, trainers, and everything else imaginable. If you are imaginable. If you are taking it or taking it or have taken it and it has have taken it and it has helped you, it does not helped you, it does not mean that you have mean that you have failed. But failed. But if you stop if you stop taking it, you taking it, you need to understand what need to understand what your body will do your body will do next, because it's not about next, because it's not about willpower. It's a matter of willpower. It's a matter of biology. First, biology. First, the medication doesn't mess with your the medication doesn't mess with your metabolism. One of the metabolism. One of the biggest myths on biggest myths on the internet is the internet is that Mounjaro or Zepbound that Mounjaro or Zepbound damage damage damage metabolism and metabolism and cause cause cause weight gain weight gain upon discontinuation. This is upon discontinuation. This is the wrong view the wrong view of the situation. While you of the situation. While you are taking tirzepatide, the drug is actively, the drug is actively working in the background working in the background. It activates. It activates pathways related to GLP- 1 and GIP, signals 1 and GIP, signals responsible for responsible for appetite, satiety, appetite, satiety, insulin secretion, insulin secretion, gastric emptying, gastric emptying, and glucose regulation.

For many people, this For many people, this means they means they think less about food, eat less,, eat less, and have and have less desire less desire to continue eating to continue eating when they are full. When when they are

full. When the medication the medication is stopped and is stopped and eliminated from the eliminated from the body over time, these effects body over time, these effects disappear. Your appetite disappear. Your appetite may become may become stronger again. You may stronger again. You may feel hungry feel hungry more quickly after eating. The more quickly after eating. The same portion that same portion that seemed quite seemed quite sufficient 2 months sufficient 2 months ago may suddenly ago may suddenly seem too small. You seem too small. You may start thinking may start thinking about food more often, and this is where about food more often, and this is where people people people start to get confused.

start to get confused. They say: “Nothing They say: “Nothing has changed. I still has changed. I still eat healthy. I'm still eat healthy. I'm still training. "Why am training. "Why am I gaining weight?" But I gaining weight?" But something did change.

something did change. There is no longer any medical support. And if you've There is no longer any medical support. And if you've lost a significant amount of weight, your lost a significant amount of weight, your body is often body is often biologically biologically biologically wired wired wired to protect itself from that to protect itself from that loss. Your body doesn't loss. Your body doesn't celebrate weight loss the way celebrate weight loss the way you do. You may you do. You may be thrilled to be thrilled to lose 15, 25, 40 or 50 kg.

lose 15, 25, 40 or 50 kg. Your knees feel Your knees feel better. Clothes fit better. Clothes fit better. Your better. Your glycated glycated glycated hemoglobin level is hemoglobin level is hemoglobin level is improving. Your improving. Your blood pressure blood pressure may stabilize. You can finally. You can finally feel like yourself again feel like yourself again. But biologically,. But biologically, the body doesn't the body doesn't necessarily perceive necessarily perceive significant weight loss as a significant weight loss as a victory. He may victory. He may perceive this as a perceive this as a threat. After threat.

Study Evidence on Weight Regain After Discontinuation

After significant weight loss, significant weight loss, the body may the body may respond with increased respond with increased hunger, a reduced hunger, a reduced feeling of fullness, and feeling of fullness, and reduced reduced reduced energy expenditure. In other energy expenditure. In other words, you may words, you may burn slightly fewer burn slightly fewer calories at rest and calories at rest and during daily during daily activity than at a activity than at a higher weight, higher weight, while still experiencing while still experiencing stronger stronger stronger food cravings. This is a difficult food cravings. This is a difficult combination. Stronger combination. Stronger hunger, less satiety, a hunger, less satiety, a body that body that needs fewer needs fewer calories, and a modern calories, and a modern environment with an environment with an abundance of food that abundance of food that encourages you to eat encourages you to eat more than you need.

more than you need. That's why telling That's why telling someone, "Just someone, "Just keep doing what you've keep doing what you've been doing," is been doing," is n't enough. What n't enough. What do tirzepatide studies show?

do tirzepatide studies show? do tirzepatide studies show? The best data The best data come from the come from the SURMOUNT-4 study, SURMOUNT-4 study, which studied overweight or obese adults overweight or obese adults who were initially who were initially treated with treated with treated with tirzepatide for tirzepatide for 36 weeks. After that, 36 weeks. After that, participants either participants either continued taking continued taking tirzepatide or tirzepatide or switched to placebo.

switched to placebo. People who People who continued taking continued taking tirzepatide mostly tirzepatide mostly maintained their maintained their weight and lost even weight and lost even more. People who more. People who stopped taking it stopped taking it gained weight again. From gained weight again. From weeks 36 to 88, weeks 36 to 88, participants who participants who switched to placebo switched to placebo gained an average of gained an average of about 14% of their weight, about 14% of their weight, while those who while those who continued taking continued taking tirzepatide tirzepatide tirzepatide lost an additional 5.5%. This does not lost an additional 5.5%. This does not mean that every mean that every person has gained back person has gained back every kilogram.

every kilogram. In fact, many In fact, many participants were left participants were left with a weight lower than their with a weight lower than their starting weight. But this starting weight. But this tells us something tells us something important. Obesity important. Obesity behaves like a behaves like a chronic chronic chronic disease. When disease. When effective treatment effective treatment is stopped, the is stopped, the underlying biology underlying biology often returns. A often returns. A later analysis of later analysis of people who lost people who lost at least 10% of their initial weight initial weight showed that most showed that most regained at least 25% of the weight lost weight lost within 1 year after within 1 year after stopping treatment. About half. About half gained at least gained at least half of what they half of what they initially lost. A initially lost. A smaller group had smaller group had minor minor minor weight regain, and some weight regain, and some continued to lose weight. So the honest. So the honest answer is not that answer is not that you will necessarily you will necessarily get everything back. The get everything back. The honest answer honest answer is that is that the risk of the risk of weight regain becomes very weight regain becomes very real, and your real, and your weight maintenance plan is more weight maintenance plan is more important than ever.

important than ever. According to According to studies of new GLP-1-based drugs, GLP-1-based drugs, discontinuation is associated discontinuation is associated with significant with significant weight regain. A 2025 systematic review and meta-analysis 2025 systematic review and meta-analysis found an average found an average weight regain of 9.69 weight regain of 9.69 kg, about 21 kg, about 21 pounds, after pounds, after stopping stopping stopping semaglutide or semaglutide or tirzepatide. Although tirzepatide.

Planning a Safe Transition Off Medication

Although individual individual individual results vary results vary depending on depending on initial initial initial weight loss, time without weight loss, time without treatment, treatment, treatment, lifestyle, lifestyle, lifestyle, health status, and other health status, and other factors. What factors. What happens immediately happens immediately after you after you stop taking it?

stop taking it? You usually don't You usually don't wake up the wake up the wake up the next morning next morning ravenously hungry and ravenously hungry and 10 pounds heavier.

10 pounds heavier. Tirzepatide has a Tirzepatide has a long-lasting effect. Some long-lasting effect. Some people may people may continue to continue to continue to feel its effects feel its effects for several for several weeks after the weeks after the last injection.

last injection. In fact, some may In fact, some may continue to continue to continue to lose weight for some lose weight for some time after stopping, time after stopping, especially if appetite especially if appetite remains low, a remains low, a structured diet is followed, structured diet is followed, or nausea occurs while taking or nausea occurs while taking the drug the drug. But over time,. But over time, support weakens.

support weakens. For some people, the For some people, the very first change very first change doesn't even doesn't even show up on the show up on the scale. This is "food scale. This is "food noise." You start noise." You start looking in looking in the fridge without the fridge without physically feeling physically feeling hungry. You start hungry. You start thinking, "What am I going to thinking, "What am I going to eat later?" immediately eat later?" immediately after dinner is over after dinner is over. You notice. You notice that the previous portion that the previous portion no longer gives you a no longer gives you a feeling of satiety.

feeling of satiety. Desserts, chips, bread, Desserts, chips, bread, fast food, alcohol or fast food, alcohol or late-night snacks late-night snacks become more become more appealing again. Then appealing again. Then the arrow of the scales can the arrow of the scales can start moving.

start moving. At first it might be At first it might be 2 or 3 pounds. Some of 2 or 3 pounds. Some of this could be water, this could be water, glycogen, sodium, glycogen, sodium, the effects of travel, the effects of travel, menstrual menstrual menstrual cycle changes, constipation, or just cycle changes, constipation, or just plain fluctuations.

But if this trend But if this trend continues for several weeks, continues for several weeks, don't ignore it. don't

ignore it. Taking action early is Taking action early is much easier than much easier than waiting for the waiting for the 20 pounds to come back.

20 pounds to come back. Blood sugar levels Blood sugar levels may also may also increase. If you increase. If you are using Mounjaro are using Mounjaro for type 2 diabetes, for type 2 diabetes, stopping it stopping it may affect more than just your may affect more than just your weight. Tirzepatide weight. Tirzepatide improves improves improves glucose control by glucose control by increasing increasing increasing glucose-dependent glucose-dependent glucose-dependent insulin secretion, insulin secretion, decreasing decreasing decreasing glucagon levels when glucagon levels when glucose is elevated, glucose is elevated, slowing slowing slowing gastric emptying, gastric emptying, and reducing and reducing food intake. When food intake. When treatment is stopped, treatment is stopped, these benefits may these benefits may decrease. This decrease. This means that means that fasting glucose levels fasting glucose levels may increase. Peak may increase. Peak glucose levels glucose levels after meals may after meals may return. Your return. Your glycated glycated glycated hemoglobin (A1C) level may hemoglobin (A1C) level may increase over time. And increase over time. And if you have reduced or if you have reduced or stopped taking stopped taking other other other diabetes medications while diabetes medications while losing weight, this losing weight, this requires a real requires a real plan, not guesswork.

plan, not guesswork. Don't stop taking Don't stop taking Mounjaro just because Mounjaro just because you feel better, and you feel better, and don't wait 6 months don't wait 6 months to see what happens.

to see what happens. Monitor Monitor Monitor fasting blood sugar levels, if appropriate., if appropriate. Follow Follow Follow CGM (continuous continuous continuous glucose monitoring) trends glucose monitoring) trends if you if you use one.

use one. Check A1C at Check A1C at clinically clinically clinically appropriate appropriate appropriate intervals. intervals. intervals. Discuss whether Discuss whether other medications should be adjusted other medications should be adjusted before, during, or after the before, during, or after the transition. In the SURMOUNT 4 drug withdrawal study, SURMOUNT 4 drug withdrawal study, greater greater greater weight regain after weight regain after discontinuation discontinuation discontinuation of tirzepatide was of tirzepatide was associated with greater associated with greater reversal of reversal of reversal of initial improvements in initial improvements in cardiometabolic cardiometabolic cardiometabolic markers such as markers such as waist circumference, waist circumference, blood pressure, blood pressure, lipids, and glycemic lipids, and glycemic parameters. And again: parameters. And again: this is not a failure. Here's what this is not a failure. Here's what can happen if you can happen if you stop treating a stop treating a chronic chronic chronic metabolic metabolic metabolic disease. Before disease. Before you stop, you stop, make a plan. If make a plan. If you are considering you are considering stopping due to stopping due to cost, side cost, side effects, effects, effects, pregnancy planning, surgery, pregnancy planning, surgery, medication shortages, personal medication shortages, personal preference, or preference, or goal achievement, don't goal achievement, don't treat it like treat it like stopping stopping stopping taking vitamins.

taking vitamins. Make a Make a transition plan. First transition plan. First question: why are you question: why are you stopping? If these are stopping? If these are side effects, sometimes side effects, sometimes lowering the dose, lowering the dose, titrating more slowly, titrating more slowly, treating constipation or treating constipation or reflux, changing the reflux, changing the diet, diet, diet, or switching to a different or switching to a different medication may be more medication may be more appropriate than appropriate than stopping abruptly.

If it's a cost, If it's a cost, discuss all discuss all legal options. legal options. Insurance changes, Insurance changes, manufacturer programs manufacturer programs if available, if available, alternative alternative alternative anti- anti-anti- obesity medications, obesity medications, diabetes medications with diabetes medications with weight benefits, or a lower weight benefits, or a lower maintenance dose maintenance dose if clinically if clinically appropriate. If your appropriate. If your goal is to stop because goal is to stop because you've reached a healthy you've reached a healthy weight, that's understandable.

weight, that's understandable. But reaching your But reaching your goal weight and goal weight and maintaining it are not the same maintaining it are not the same thing.

thing. thing. Weight loss is often Weight loss is often just the first step. just the first step. Weight maintenance is the second stage, and for second stage, and for many people it is the many people it is the more difficult stage.

more difficult stage. The smartest way The smartest way to prevent to prevent weight gain. Here is the weight gain.

Building a Maintenance Plan: Protein, Strength, Fiber, and Habits

Here is the most important change. most important change. While you're still While you're still taking your medication, taking your medication, start practicing start practicing behaviors that behaviors that you'll need when your you'll need when your appetite gets appetite gets stronger again. Don't wait until you stop until you stop taking your medication and start taking your medication and start experiencing difficulties.

experiencing difficulties. Build a Build a support system now.

First: make protein

First: make protein a must. One of the a must. One of the biggest mistakes biggest mistakes I see is I see is rapid weight loss rapid weight loss by consuming by consuming too little too little protein. When protein. When people lose weight, people lose weight, they may lose they may lose fat, but they may also fat, but they may also lose muscle mass. Losing too. Losing too much much much muscle can muscle can make it difficult to maintain make it difficult to maintain weight and affect weight and affect strength, mobility, strength, mobility, functionality, and functionality, and metabolic health.

metabolic health. Make your meals protein-focused. For most protein-focused. For most people, this means people, this means starting with a starting with a high-quality high-quality high-quality source of protein at source of protein at every meal.

Eggs, Greek yogurt, cheese, fish, chicken,, cheese, fish, chicken, turkey, lean meat, tofu turkey, lean meat, tofu, tempeh, beans,, tempeh, beans, lentils, or a lentils, or a protein shake protein shake as needed. Your as needed. Your specific specific specific protein intake should be protein intake should be individualized individualized individualized based on based on body size, kidney function, body size, kidney function, age, age, age, activity level, muscle activity level, muscle mass, and mass, and medical history. But the medical history. But the general principle is general principle is simple. Don't simple. Don't turn turn turn weight loss into a weight loss into a low-protein low-protein low-protein starvation diet.

starvation diet. Ask yourself at Ask yourself at every every every meal, “Where’s the protein?”

Second: preserve your

Second: preserve your muscles through muscles through strength training. strength training. Walking is wonderful. Walking after meals is one of the best one of the best habits for controlling habits for controlling glucose, digestion, glucose, digestion, mood, and mood, and overall health.

overall health. But walking alone is But walking alone is usually not enough if your goal is long-term long-term long-term weight maintenance. You weight maintenance. You have to give your have to give your body a reason body a reason to keep muscle. This to keep muscle. This means strength means strength training. You don't training. You don't need to become a need to become a bodybuilder. You don't bodybuilder. You don't need an expensive need an expensive gym membership.

gym membership. You can start with two to three classes a three classes a week, week, week, using using using exercise machines, dumbbells, exercise machines, dumbbells, resistance bands, resistance bands, bodyweight exercises, or supervised strength training.

supervised strength training. Squatting or Squatting or getting up from a chair, getting up from a chair, deadlifts, presses, inclines, deadlifts, presses, inclines, squats, squats, squats, weight transfer. The goal is to gradually

weight transfer. The goal is to gradually load the muscles in a load the muscles in a safe way.

safe way. Muscle is a metabolically Muscle is a metabolically active tissue. They active tissue. They allow for better allow for better carbohydrate absorption, help, help maintain activity maintain activity as you age, and make it easier to as you age, and make it easier to maintain weight after maintain weight after stopping stopping stopping medication. Third: medication. Third: use use use fiber as a fiber as a tool to tool to control appetite. This is a control appetite. This is a case where case where natural and holistic natural and holistic strategies can strategies can be truly be truly beneficial, but only beneficial, but only when we when we stop thinking of them as stop thinking of them as magical.

magical. magical. Fiber is one of the Fiber is one of the most beneficial most beneficial most beneficial natural natural appetite suppressants. Vegetables, appetite suppressants. Vegetables, berries, legumes, berries, legumes, lentils, chia seeds, flax seeds, oats, nuts,, flax seeds, oats, nuts, seeds, and psyllium seeds, and psyllium help help help increase the volume of food, increase the volume of food, slow down slow down slow down digestion, digestion, digestion, maintain maintain maintain regular regular regular bowel movements, and bowel movements, and increase feelings of increase feelings of fullness. If you fullness. If you tolerate tolerate tolerate soluble fiber, soluble fiber, such as psyllium, well such as psyllium, well before meals, it may before meals, it may be a useful be a useful addition, but addition, but start gradually.

start gradually. Drink plenty of water Drink plenty of water and separate and separate fiber intake fiber intake from medications if from medications if necessary, as necessary, as fiber can fiber can interfere with their interfere with their absorption. The point is not to absorption. The point is not to turn turn turn your kitchen into a your kitchen into a nutritional supplement department.

nutritional supplement department. The point is to The point is to make your food make your food physically more filling physically more filling before your appetite before your appetite gets the better of you.

gets the better of you.

Fourth: Don't drink

Fourth: Don't drink calories. When the effects of appetite suppressants appetite suppressants wear off, liquid wear off, liquid calories can undo many of undo many of the gains you've made. Sugary the gains you've made. Sugary coffee drinks, coffee drinks, fruit juices, fruit juices, alcohol, plain alcohol, plain soda, soda, soda, fancy smoothies, " healthy" bottled healthy" bottled teas, and even frequent teas, and even frequent consumption of consumption of consumption of high-calorie high-calorie high-calorie creamers and creamers and protein protein protein shakes can shakes can add to the add to the total.

total. total. Choose Choose Choose water, sparkling water, water, sparkling water, unsweetened tea, black unsweetened tea, black coffee if you coffee if you can tolerate it, or can tolerate it, or low-calorie low-calorie low-calorie alternatives most often. If you alternatives most often. If you drink alcohol, drink alcohol, talk to yourself talk to yourself openly about it.

openly about it. Alcohol reduces Alcohol reduces self-control, can self-control, can disrupt sleep, disrupt sleep, stimulates appetite, and is stimulates appetite, and is often often often accompanied by accompanied by accompanied by snacks you didn't snacks you didn't plan to eat. Fifth: plan to eat. Fifth: Plan your meals Plan your meals so that they so that they help you cope help you cope with hunger. A with hunger. A meal plan that works meal plan that works while you are feeling while you are feeling nauseous from a high nauseous from a high dose of tirzepatide dose of tirzepatide may not work may not work when you stop when you stop taking it. You taking it. You need meals that need meals that remain remain remain nutritious when hunger nutritious when hunger gets stronger. A gets stronger. A practical plate practical plate might contain a palm- might contain a palm- sized serving of protein sized serving of protein or more, or more, non-starchy vegetables non-starchy vegetables for bulk and for bulk and fiber, a fiber, a controlled portion of controlled portion of high- high- high- fiber carbohydrates, and fiber carbohydrates, and healthy fats for healthy fats for flavor and satiety— enough food to enough food to avoid the problem of "I've avoid the problem of "I've been eating all day, and been eating all day, and by 9 p.m. I've by 9 p.m.

I've emptied emptied emptied the fridge." This is what the fridge." This is what sustainable sustainable sustainable eating looks like: it's not eating looks like: it's not punishment, it's not punishment, it's not fasting for a fasting for a day, and it's not trying day, and it's not trying to convince yourself that to convince yourself that you can eat 800 you can eat 800 calories forever. Natural calories forever. Natural methods help, methods help, but don't overestimate but don't overestimate them. Let's be honest them. Let's be honest about natural about natural weight loss methods.

weight loss methods. There are no natural There are no natural alternatives that alternatives that replicate the effects of replicate the effects of tirzepatide on tirzepatide on appetite and metabolism to the appetite and metabolism to the same extent. If same extent. If someone claims that a someone claims that a tea, herb, seed, tea, herb, seed, detox, or supplement detox, or supplement works the same way as works the same way as Mounjaro or Zepbound, they are Mounjaro or Zepbound, they are selling you a selling you a fantasy. But there are fantasy. But there are natural tools that can that can ease the ease the transition. Nutrition with transition. Nutrition with an emphasis on protein.

an emphasis on protein. Start eating proteins Start eating proteins and vegetables before and vegetables before moving on to moving on to starchy starchy starchy foods. This can foods. This can improve feelings of improve feelings of fullness and reduce fullness and reduce the desire to overeat the desire to overeat later. Psyllium or later. Psyllium or soluble fiber soluble fiber from foods.

from foods. Use Use Use cautiously and cautiously and consistently if consistently if well tolerated. well tolerated. This can help with This can help with feelings of fullness and feelings of fullness and regular regular regular bowel movements. Strength bowel movements. Strength training. This is training. This is most likely a most likely a must-have must-have must-have tool for tool for long-term long-term long-term metabolic health. Daily metabolic health. Daily activity, especially a activity, especially a 10–15-minute 10–15-minute 10–15-minute walk after meals.

walk after meals. Sleep protection. Poor Sleep protection. Poor sleep increases appetite, sleep increases appetite, food cravings, insulin resistance, and the desire to insulin resistance, and the desire to consume overly consume overly tempting foods.

tempting foods. If you snore, If you snore, wake up wake up wake up tired, or feel tired, or feel exhausted during exhausted during the day, get checked for the day, get checked for sleep apnea.

sleep apnea.

Long-Term Maintenance, Warning Signs, and Final Takeaways

Stress management. Severe Stress management. Severe stress doesn't create fat out of stress doesn't create fat out of thin air, but thin air, but it can definitely it can definitely disrupt sleep, disrupt sleep, cause emotional cause emotional overeating, overeating, overeating, alcohol use, alcohol use, inactivity, and inactivity, and food cravings.

food cravings. Nutrition structure. Nutrition structure. Planning Planning Planning meals and protein meals and protein snacks can be more snacks can be more effective than effective than relying solely on relying solely on hunger cues during the hunger cues during the transition. A food transition. A food environment that environment that helps you.

helps you. Keep your trigger foods out of the house during the during the vulnerable first few vulnerable first few months after months after stopping treatment. This is not a weakness. This is a. This is not a weakness. This is a strategy.

strategy. Consider a Consider a maintenance dose. This is maintenance dose. This is not an "all or not an "all or nothing" decision. An important nothing" decision. An important conversation to have conversation to have with an obesity specialist or obesity specialist or endocrinologist is whether it is endocrinologist is whether it is really necessary really necessary to stop to stop taking it completely. For some taking it completely. For some people, a lower dose, people, a lower dose, less frequent use less frequent use under medical supervision, under medical

supervision, or switching to another or switching to another approved therapy approved therapy may be may be more appropriate than more appropriate than stopping completely. It's stopping completely. It's individual.

individual. individual. Some need Some need ongoing treatment. ongoing treatment. Others can Others can maintain the condition through lifestyle changes, lifestyle changes, exercise, exercise, exercise, careful careful careful nutrition, nutrition, nutrition, sleep optimization, and sleep optimization, and close monitoring.

close monitoring. Many will need Many will need a combination. The goal is not a combination. The goal is not to force everyone to force everyone to stay on medication to stay on medication forever. The goal is to stop pretending stop pretending that anyone can that anyone can forgo forgo forgo highly effective highly effective highly effective treatment for a chronic treatment for a chronic disease and disease and maintain the maintain the maintain the outcome through outcome through willpower alone. We don't tell willpower alone. We don't tell people with hypertension, people with hypertension, "Your blood pressure is normal, "Your blood pressure is normal, so stop taking your so stop taking your medication and prove medication and prove that you deserve that you deserve normal blood pressure." We do normal blood pressure." We do n’t tell someone with n’t tell someone with hypothyroidism, “Your hypothyroidism, “Your thyroid readings thyroid readings have improved on medication.

have improved on medication. Now stop Now stop drinking them and let's see if drinking them and let's see if you're you're you're disciplined enough." disciplined enough." Obesity is also a Obesity is also a chronic, chronic, chronic, biologically biologically biologically regulated condition. This does regulated condition. This does not mean that medication is the only answer. This only answer. This means that the answer means that the answer must respect must respect physiology. Pay physiology. Pay attention to these warning attention to these warning signs. If you have signs. If you have stopped taking stopped taking Mounjaro or Zepbound, don't Mounjaro or Zepbound, don't get hung up on get hung up on daily daily daily weight fluctuations, but keep an eye on weight fluctuations, but keep an eye on overall overall overall trends. Act trends. Act early if early if you notice a steady you notice a steady trend toward trend toward weight gain weight gain over two to four weeks, four weeks, the return of the return of the return of obsessive thoughts about obsessive thoughts about food or frequent food or frequent binge eating, binge eating, increased increased increased fasting glucose or fasting glucose or worsening worsening worsening CGM readings, CGM readings, increased increased increased glycated glycated glycated hemoglobin levels, hemoglobin levels, increased increased increased waist circumference, decreased waist circumference, decreased endurance, endurance, endurance, energy, or energy, or mobility, or mobility, or feelings of intense feelings of intense anxiety, shame, or anxiety, shame, or hopelessness about food and hopelessness about food and weight. The right weight. The right reaction is not “I reaction is not “I messed up.” The correct messed up.” The correct response—my plan response—my plan needs correction. This needs correction. This may mean may mean strengthening your strengthening your diet, increasing your diet, increasing your strength training, strength training, treating your sleep apnea, treating your sleep apnea, reviewing your medications, reviewing your medications, consulting with a consulting with a nutritionist, considering nutritionist, considering behavioral therapy, resuming your, resuming your medication, or choosing a medication, or choosing a different different different treatment method. So, treatment method. So, stopping taking stopping taking Mounjaro or Zepbound does not Mounjaro or Zepbound does not mean you mean you have failed. And have failed. And weight gain after weight gain after stopping treatment stopping treatment also does not mean that also does not mean that the drug did not the drug did not work. This means that the medication affected a that the medication affected a real biological real biological problem. And without this problem. And without this support, your appetite, support, your appetite, metabolism, metabolism, metabolism, glucose regulation, and body weight set point—essentially your body weight set point—essentially your defense mechanisms— begin to begin to struggle. The main thing is to wait for such an to wait for such an opportunity so that it does opportunity so that it does n't catch you n't catch you by surprise.

Use the time Use the time while on medication to build muscle, to build muscle, learn a learn a meal pattern, meal pattern, improve sleep, improve sleep, increase increase increase fiber intake, reduce fiber intake, reduce liquid liquid liquid calories, calories, calories, track track track trends, and trends, and develop a develop a weight maintenance plan until your weight maintenance plan until your last injection.

After all, maintaining After all, maintaining weight is not about weight is not about perfection, it's about perfection, it's about having sufficient having sufficient support: medical, support: medical, nutritional, nutritional, nutritional, behavioral, and behavioral, and metabolic, to metabolic, to maintain the results maintain the results achieved

through such achieved through such hard work.

hard work. Please subscribe, Please subscribe, spread this video, like it, and of course, and of course, share this video. share this video. See you in the See you in the