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Ozempic May Carry Serious Long-Term Trade-Offs, Doctor Warns

Analysis by Dr. Joseph Mercola | November 04, 2026

STORY AT-A-GLANCE

- Ozempic users risk losing lean muscle and bone mass, along with fat — a concern for strength and healthy aging, especially in older adults
- GLP-1 drugs like Ozempic have been linked in some studies to higher rates of depression and reports of suicidal thoughts, though regulators haven't found evidence that the drugs cause them
- After discontinuing semaglutide, users in one trial regained about two-thirds of the weight they had lost within a year, as hunger returned
- Common GI symptoms could escalate into dangerous conditions like gastroparesis, where digestion slows or halts, leading to vomiting, nutrient deficiency, and chronic digestive distress
- Since 2018, 62,000 adverse events and 162 deaths in people taking Ozempic-type drugs have been reported to the U.S. Food and Drug Administration (FDA). While such reports don't prove the drugs caused them, the surge followed increased marketing and prescriptions after 2022

The popularity of glucagon-like peptide-1 (GLP-1) receptor agonists, such as Ozempic and Wegovy, has significantly surged, with 1 in 8 American adults having taken one of these drugs.[1] Globally, semaglutide — the active ingredient in these injections — and the related drug liraglutide are given to more than 20 million people a year.[2]

But going down this shortcut to achieve your desired weight actually comes with long-lasting effects. While these drugs are often touted as a "miracle answer" for shedding pounds, experts warn that taking them could cause you to lose more than just body fat — and expose you to serious long-term trade-offs.

GLP-1 Receptor Agonists Alter More Than Your Waistline

In an article published in the Daily Mail, Benjamin Bikman, Ph.D., a metabolic scientist at Brigham Young University in Utah, warns that GLP-1 receptor agonists are reshaping more than body weight — they're changing your physiology, psychology, and possibly your long-term health trajectory as well.[3]

- **Three major effects that Ozempic users aren't being told about —** According to Bikman, Ozempic leads to long-term effects such as loss of muscle and bone, dulled emotional response that could lead to depression, and rapid rebound weight gain that leaves patients with a worse fat-to-muscle ratio than before.

- **You lose not just fat, but lean muscle mass, too —** The article notes one clinical trial on semaglutide,[4] wherein 140 participants (95 of them on semaglutide) were tracked over 68 weeks and found that while those on semaglutide lost 23 pounds of fat, they also lost 15 pounds of lean mass, which includes muscle along with water and organ tissue.

  That's nearly 40% of their total weight loss coming from tissue the body relies on. Because they lost even more fat, the share of their body made up of lean mass actually rose slightly.

- **"Frail people are much more likely to die young" —** Bikman notes that having low muscle mass and fragile bones especially among seniors, not only puts you at risk of injury from falls; it also weakens your immune system, compromising your body's ability to handle infections, which is also a common health concern among the elderly.

Ozempic and Your Mental Health

Bikman says that people who use Ozempic and Wegovy are also losing their interest and desire for sexual intercourse and social enjoyment. "The benefit in reducing cravings for sweet food may actually be a reduction in cravings for life," he warns.[5] Some research also links these drugs to depression, although it hasn't shown that the drugs cause it.

- **GLP-1 drugs are associated with an increased risk of depression —** He highlights one study[6] wherein people with obesity taking GLP-1 drugs (semaglutide or liraglutide) had a 195% increased risk of major depression and over 100% greater risk of suicidal behavior compared to those not taking these drugs. Because it was an observational study, it shows an association, not cause and effect. According to the researchers:

  > *"These findings underscore the critical need for physicians to thoroughly assess patient history before prescribing GLP-1 RAs and highlight the urgent requirement for further prospective clinical trials to fully understand the implications of GLP-1 RA use on mental health in the obese patient population."*[7]

- **Reports of suicidal thoughts are higher than expected —** Bikman also notes additional findings from a World Health Organization (WHO) database[8] that revealed suicidal thoughts were reported about 45% more often with semaglutide than expected, compared with all other medications.

  This kind of database analysis flags a possible safety signal, though it can't show that the drug causes these thoughts. In clinical trials, rates of depression and suicidal behavior didn't differ from placebo, but most of those trials excluded people with a history of either.[9]

- **Why does Ozempic affect your mental state?** Basically, the drug's main component targets GLP-1 receptors — these are present not just in your digestive tract but also in critical brain areas. These regions, such as the lateral septum and hypothalamus, are essential for managing emotions, reward systems, and appetite control.

- **Particularly noteworthy is its influence on dopamine —** This neurotransmitter is closely associated with mood regulation and reward perception. Early research suggests that stimulating GLP-1 receptors may enhance dopamine transporter expression, leading to decreased free dopamine levels in specific brain regions. This shift in dopamine signaling could affect your mood, motivation levels, and even how you experience pleasure.

- **Government agencies insist there's "no direct link" —** Although the U.S. Food and Drug Administration (FDA) and European Medicines Agency (EMA) later concluded there wasn't enough evidence to confirm a direct causal link, these early signals are hard to ignore.

If you're using a drug that's not just flattening your appetite but also dampening your motivation and ability to enjoy life, you're likely to struggle more with personal growth, productivity, and maintaining social bonds — all of which are foundational to your mental health.

If you notice changes in your mood while taking one of these drugs, tell your prescribing physician. If you have thoughts of suicide, call or text the 988 Suicide & Crisis Lifeline in the U.S.

The Ozempic 'Rebound' Problem

Lastly, Bikman says that weight often comes back after people stop semaglutide.[10] He highlights a 2022 clinical trial involving roughly 200 long-term semaglutide users; on average, they regained about two-thirds of their lost weight within a year after stopping the drug[11] — this is what's called the Ozempic rebound.

- **So why do you regain fat after stopping Ozempic?** Simply put, when you've been taking Ozempic and suddenly stop, the hunger cues it had suppressed come raging back — this causes you to revert to unhealthy eating, which causes the weight to return.

To put it simply, the muscle and bone mass you lost while using this drug don't return naturally; however, fat comes back easily and quickly. Bikman also suggests semaglutide may trigger the formation of new fat cells.

> *"This becomes a problem because when a person start[s] to regain fat mass after stopping Ozempic, with more fat cells comes a greater potential to gain more fat. 'As a result, even though a person may still weight less than they did before starting the drug, they may be fatter, with a higher percentage of body fat,'"* he said.[12]

- **Other "health benefits" also disappear when you stop using it —** Ozempic is said to help reduce blood pressure, but this could bounce back when you discontinue using the drug. There's evidence that certain positive cardiometabolic effects persist; however, the gains are modest.

- **Bikman believes patients should plan to come off the drug —** During this time, they need to assess their cravings for carbohydrates. "Ideally, a person has learned how to eat better and control carb cravings and their weight loss can be sustained in the long run," Bikman said. Any plan to stop should be made with the prescribing physician; the trial's authors concluded that ongoing treatment may be needed to maintain the benefits.

Stomach Paralysis and Other Digestive Dangers Linger Under the Surface

A separate report published in The Standard focused on another growing concern, one that hasn't received nearly enough attention — GLP-1 receptor agonists can disrupt your digestive health.[13]

- **Ozempic interferes with normal digestion (and not just in minor ways) —** While nausea, vomiting, constipation, and diarrhea are the most commonly reported digestive side effects, these symptoms could snowball into dangerous, even life-altering complications, according to health experts.

- **Digestive side effects are common —** In some cases, these escalate into serious health concerns. Kiran Jones, a clinical pharmacist at Oxford Online Pharmacy, says the most worrying among them is stomach paralysis, or "gastroparesis." This condition means food moves extremely slowly — or not at all — through the stomach. Left untreated, it causes persistent vomiting, malnutrition, and long-term digestive distress.

- **GLP-1 receptor agonists intentionally slow digestion —** This design aims to suppress your appetite and keep you feeling full longer. However, when overactivated, this same mechanism can throw your whole digestive system out of balance.

- **Chronic digestive issues have a major impact on your mental health —** Constant nausea, bloating, or pain disrupts your sleep, affects mood, and increases anxiety. Over time, your confidence in your body erodes.

- **There are other rare but severe side effects linked to these drugs —** Some users have experienced acute kidney injury (often linked to dehydration from vomiting or diarrhea), pancreatitis, and gallbladder problems, and the drugs carry a boxed warning about thyroid tumors seen in rodent studies.[14]

  I wrote an article about the many damaging effects linked to these medications, even though they only lead to "modest benefits." Read "**Ozempic Linked to 19 Adverse Health Events**" for more information.

While The Standard article mentions remedies that will help curb the side effects of these drugs, like eating crackers or sipping mint tea 30 minutes after taking the medication, I believe the better long-term strategy is to address the root causes of weight gain through diet and lifestyle.

If you're taking these drugs, talk with your prescribing physician about whether those changes could reduce your need for them, and don't stop or adjust them on your own, especially if you take them for Type 2 diabetes. There are better and more efficient ways to manage your weight without harming your mental and physical health.

Reports of Deaths and Adverse Reactions Are on the Rise

From 2018 to 2024, the FDA Adverse Event Reporting System (FAERS), the agency's database of reported drug side effects, recorded 62,000 adverse event reports for semaglutide and tirzepatide (used in brands like Mounjaro and Zepbound),[15] though these reports alone can't confirm the drugs caused each event.

- **Nearly 75% of the adverse events occurred after 2022 —** Around 46,000 adverse event reports coincide with the increased availability and marketing of these drugs.
- **FAERS has recorded 10,000 "serious" reactions to these drugs —** These are events that result in hospitalization or life-threatening conditions. These aren't just minor inconveniences; they're significant medical events that could have long-lasting impacts on your health.
- **There were also 162 reported deaths in people taking these weight loss drugs —** According to a Daily Mail article, the reported deaths increased by 40% in just six months. For more information, read "**Ozempic and Other Weight Loss Drugs Linked to 162 US Deaths**."

In clinical trials, 80% to 90% of participants experienced at least one adverse event. Although for semaglutide, the rate in the placebo group was nearly as high (86.4% vs. 89.7%).[16] Though most were mild to moderate, they led some people to discontinue the medication — which, if you're truly determined to be healthy, is the step in the right direction, as long as it's done with your doctor's guidance.

5 Strategies to Address Underlying Metabolic Challenges

I believe the key to maintaining a healthy weight is optimizing your cellular energy production. This requires a multifaceted approach that takes effort to implement, but it leads to safer, healthier results — something GLP-1 receptor agonists don't offer. Here are five strategies that I recommend for healthy weight management.

1. **Think carefully before starting Ozempic and other GLP-1 agonist receptors —** These medications initially seem efficient in eliminating excess fat. However, their benefits are usually short-lived and, as mentioned above, the side effects (many of which are still unknown) are damaging. If you're already taking one, talk with your prescribing physician before stopping or changing your dose — stopping can raise blood sugar if you have Type 2 diabetes.

2. **Eliminate seed oils from your diet —** If you regularly consume ultraprocessed foods, I recommend stopping right now and replacing them with real, whole foods. Processed foods contain **linoleic acid** (LA)-rich seed oils that can disrupt your metabolic pathways and alter how your body stores fat. Instead, cook your meals using tallow, grass fed butter, or coconut oil.

3. **Shift your carbohydrate sources gradually —** Avoid making sudden dietary changes that will shock your system. If your gut is compromised, start by introducing easily digestible carbohydrates like whole fruit or white rice before incorporating more complex carbs. If you have severe gut issues, sip dextrose water to provide your cells with a steady source of easy-to-digest, healthy carbohydrates for energy.

4. **Consider your protein and collagen intake —** I suggest aiming for 0.8 grams of protein per pound of your ideal body weight and balancing that amount so that about one-third comes from collagen. This will help support muscle maintenance, tissue repair, and hormone balance.

   If you exercise frequently, you might need to slightly increase your intake. My suggestion is to take it slow and listen to how your body responds. Stable protein intake is foundational for regulating cravings and stabilizing energy.

5. **Support your mitochondrial health with other healthy habits —** Getting daily sun exposure is one example; however, if you're still consuming seed oils, make sure to avoid intense midday sun for at least six months.

The LA in these oils migrate to your skin and oxidize under sun exposure, causing skin damage. Get enough sleep at night, minimize your stress, and incorporate moderate-intensity movement, such as walking about an hour a day, in your lifestyle — these strategies will support your cellular energy production and aid in weight management.

Gradual, consistent effort in these areas strengthens your metabolism and leads to lasting health improvements, including achieving your optimal weight. Remember, there is no shortcut to optimal health. If you're still tempted to start using weight loss medications, you owe it to yourself to read the studies to understand the dangers.

Supporting Your Body's Own GLP-1 with Akkermansia

Alongside the strategies above, I recommend supporting Akkermansia, a gut bacterium linked to your body's own GLP-1 production. This beneficial gut bacterium produces a protein that boosted GLP-1 release in mouse studies.[17]

- **Many people lack Akkermansia due to various reasons —** One reason is having impaired mitochondrial function or an environment that is inhospitable to beneficial gut bacteria. Ideally, Akkermansia should comprise 3% to 5% of your total gut microbiome and it plays many different roles aside from promoting GLP-1.
- **Akkermansia has the ability to produce mucin —** This thick, gel-like substance protects the gut lining from harmful pathogens, irritation from stomach acid and enzymes, as well as mechanical damage. Moreover, mucin helps nourish the gut bacteria already existing in your gut.
- **Certain foods may help boost your Akkermansia levels —** Polyphenol-rich fruits like berries and inulin-rich foods such as garlic, asparagus, bananas, and leeks may help increase your Akkermansia levels.

Note, however, that if your gut health is currently out of whack, introducing high amounts of dietary fiber in your system all at once could worsen your gastrointestinal symptoms. So, work on healing your gut first, then gradually increase fiber intake.

- **Supplements are also available —** Start with a pasteurized Akkermansia postbiotic, then move to live Akkermansia once bloating is minimal, your stools have been consistent for at least a week, and you can tolerate more fiber. Ideally, look for Akkermansia products that use timed-release capsules or microencapsulation technology to ensure it reaches your colon effectively. Here's how to make sure Akkermansia reaches your colon.

It's also important to eliminate all seed oils from your diet for at least six months before starting an Akkermansia supplementation program. This preparatory period allows your body to recover mitochondrial function and create a more hospitable environment in your colon for the beneficial bacteria.

The GLP-1 findings for Akkermansia are from laboratory or animal research and may not directly apply to human health.

Frequently Asked Questions (FAQs) About Ozempic Side Effects

Q: What are the most concerning long-term side effects of Ozempic and similar drugs?

A: Ozempic, Wegovy, and other GLP-1 receptor agonists may cause loss of lean muscle and bone mass, may be linked to mood changes, and are often followed by weight regain after they’re stopped. These changes could significantly impact long-term physical and mental health.

Q: How do GLP-1 drugs like Ozempic affect mental health and emotional well-being?

A: These drugs act on brain regions tied to mood and pleasure, and some studies have linked them to higher rates of depression and reports of suicidal thoughts, although regulators haven't found evidence that the drugs cause them. Some users report a loss of interest in intimacy, food, and social connection.

Q: Why do people often regain weight after stopping Ozempic?

A: After discontinuing Ozempic, appetite suppression wears off rapidly, often leading to overeating. The lost muscle and bone mass don't return naturally, but fat does, which may leave you with a higher percentage of body fat.

Q: Are there any serious digestive or physical complications associated with these drugs?

A: Yes. Beyond common symptoms like nausea or constipation, some users develop serious conditions like gastroparesis (stomach paralysis), acute kidney injury, pancreatitis, or gallbladder problems, and the drugs carry a boxed warning about thyroid tumors seen in rodent studies. Chronic GI issues also affect mood, sleep, and overall quality of life.

Q: What are other ways to support sustainable weight loss and metabolic health?

A: Focus on eliminating seed oils, gradually improving carbohydrate quality, increasing protein and collagen intake, supporting mitochondrial health through lifestyle changes, and supporting your gut's Akkermansia. If you take a GLP-1 drug, talk with your prescribing physician before making changes.

This article is for informational purposes only and does not constitute medical advice. Consult a qualified health care provider before making changes to your health regimen.

Sources and References

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