

Semaglutide in Adults With Alcohol Use Disorder



According to new research, semaglutide (sold as Ozempic for diabetes and Wegovy for obesity) may also help curb alcohol intake. The study is published in *JAMA Psychiatry*.

Findings show that weekly injections of semaglutide significantly reduced alcohol cravings, drinking quantity, and the frequency of heavy drinking days in adults with symptoms of alcohol use disorder (AUD) compared to a placebo. Lab tests further confirmed that participants treated with semaglutide consumed less alcohol, as measured by grams of alcohol and breath alcohol concentration.

Alcohol-related deaths claim many lives annually, contributing to liver disease, cardiovascular issues, and cancer. Despite the prevalence of AUD, many individuals do not seek treatment, and the three FDA-approved medications for AUD remain underutilised. Given the popularity of GLP-1 receptor agonists like Ozempic, these findings could pave the way for broader adoption of AUD treatments.

The study enrolled 48 adults with AUD who were not actively seeking treatment. One week before treatment, participants attended a lab session where they could drink their preferred alcoholic beverages over two hours, with the option to delay consumption. Researchers tracked their drinking patterns.

Participants were then randomly assigned to receive either weekly injections of semaglutide or a placebo for nine weeks while their alcohol consumption was monitored. After treatment, they repeated the lab session.

The results were striking. Semaglutide-treated participants drank less alcohol, both in the lab and in real life. Clinical assessments showed a decline in alcohol cravings and heavy drinking days. The impact of semaglutide appeared stronger than what is typically seen with current AUD medications, even at the lowest clinical dose.

Among a small subgroup of participants who smoked, those on semaglutide also reported significantly fewer cigarettes per day—an exciting discovery, given that no medication is currently approved for both alcohol reduction and smoking cessation.

The first clinical trial on GLP-1 receptor agonists for alcohol use was inconclusive. But as semaglutide prescriptions increased, anecdotal reports of reduced drinking became common. This study suggests these drugs could be effective for treating alcohol use disorder.

Researchers believe semaglutide influences reward processing in the brain, but more studies are needed to understand its exact mechanisms. Long-term studies will be crucial to determine the optimal dosage and treatment duration for AUD, as current guidelines focus on diabetes and obesity.

These findings are promising. Larger, longer studies are needed, but semaglutide has the potential to fill a critical gap in AUD treatment.

Source: [UNC School of Medicine](#)

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