

PATIENT EDUCATION GUIDE

GLP-1 Explained:

What to Expect in Your First 90 Days

A plain-language guide covering what's happening in your body, what's normal, and how to succeed through your first three months.

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Six chapters of clear, actionable guidance

Introduction

Why the first 90 days matter

Starting a GLP-1 medication is one of the most clinically supported decisions you can make for sustainable weight loss. But the first three months are also when most people have the most questions, the most uncertainty — and the most temptation to stop before the medication has had a real chance to work.

The data is compelling. Clinical trials for semaglutide and tirzepatide show average weight loss of 15–22% of body weight over 72 weeks. But those results are built on a foundation laid in the first 90 days: tolerating the starting dose, adjusting eating patterns, and building the consistency that compounds over time.

~15%

avg body weight loss — semaglutide

~22%

avg body weight loss — tirzepatide

72 wks

trial duration for both medications

This guide exists to close the information gap. You'll learn exactly what's happening in your body at each phase, which side effects are normal versus worth flagging, and the habits that separate patients who succeed from those who don't.

"The food noise just stopped. After two weeks, I wasn't white-knuckling it anymore — the medication changed what hunger felt like."

— Common patient description of early GLP-1 response

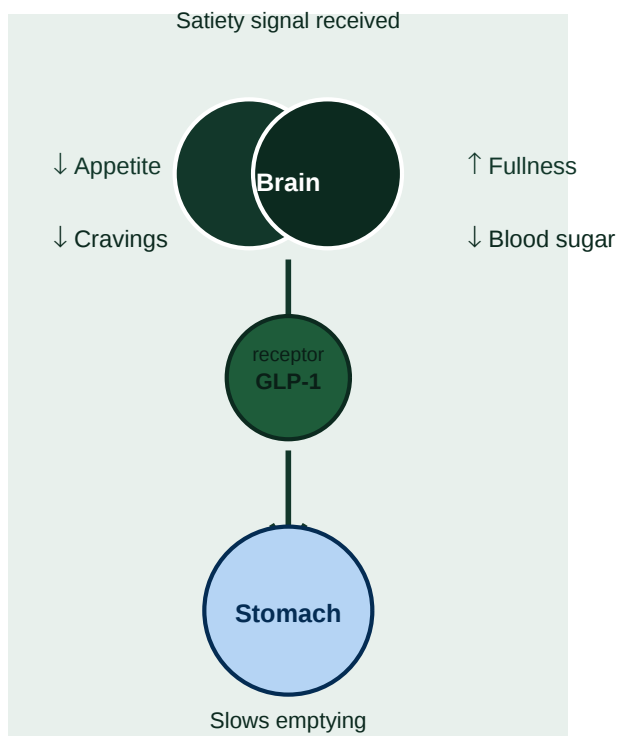
Important: This guide is educational

GLP-1 medications are prescription treatments. The information here complements — it does not replace — guidance from your Lifted Health provider. For questions about your specific dose or health history, contact your care team directly.

How GLP-1 Medications Work

The science behind the results

GLP-1 stands for glucagon-like peptide-1 — a hormone your body produces naturally after eating. GLP-1 medications mimic this hormone at a sustained, elevated level that your body can't produce on its own. The effects ripple through multiple systems simultaneously.

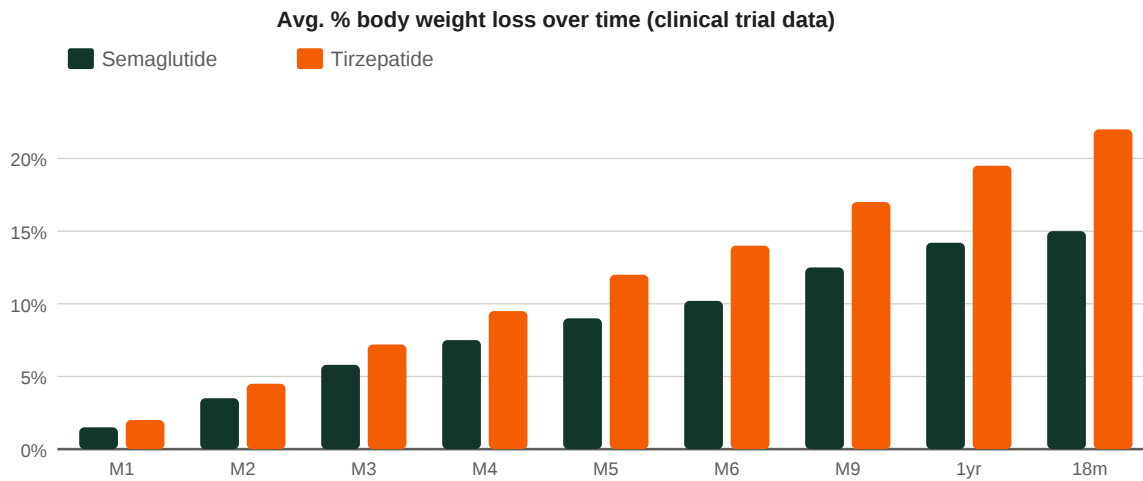


How GLP-1 signals travel

- **Brain:** Receives stronger, longer-lasting fullness signals. Cravings — especially for calorie-dense foods — become significantly quieter.
- **Stomach:** Gastric emptying slows, meaning food stays in your stomach longer. You feel full on smaller amounts.
- **Pancreas:** Insulin release is stimulated only when blood glucose rises, improving blood sugar control without hypoglycemia risk.
- **Liver:** Glucagon suppression reduces the liver's excess glucose output, contributing to overall metabolic improvement.

Semaglutide vs. Tirzepatide

Both medications work via GLP-1 pathways, but tirzepatide adds a second mechanism — GIP receptor activation — that produces meaningfully stronger results in clinical trials. Both are injected once weekly.



Average % body weight loss over time — clinical trial data (SURMOUNT-1, STEP-1)

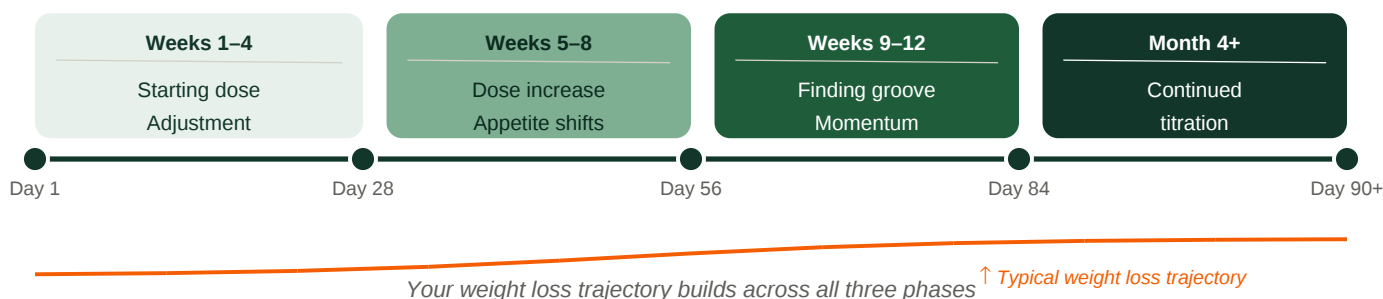
Feature	Semaglutide	Tirzepatide
Mechanism	GLP-1 agonist	GLP-1 + GIP dual agonist
Injection frequency	Once weekly	Once weekly
Avg weight loss (72 wks)	~15% body weight	~20–22% body weight
Starting dose	0.25 mg/week	2.5 mg/week
Common side effects	Nausea, GI changes	Nausea, GI changes, fatigue

Your 90-Day Roadmap

What to expect, phase by phase

GLP-1 medications work through a structured titration process — starting low and increasing gradually. This is intentional: it gives your body time to adjust and minimizes side effects. Here's what each phase looks like.

YOUR 90-DAY JOURNEY AT A GLANCE



Weeks 1–4: Starting dose — getting adjusted

Weeks 1–4

Your body is meeting the medication for the first time. Most patients experience mild nausea, a noticeable reduction in appetite, and possibly some fatigue around injection day. You probably won't see dramatic weight loss yet — and that's completely normal. The goal in this phase is tolerability, not speed. The medication is calibrating to your system. Eat smaller meals, stay hydrated, and resist the urge to judge progress by the scale.

**Weeks
5–8**

Weeks 5–8: First dose increase — appetite shifts

If you've tolerated the starting dose well, your provider will move you to the next level. This is often when the medication starts to feel qualitatively different — food noise quiets more dramatically, portion sizes naturally shrink, and many patients notice their first meaningful week-over-week weight loss. Nausea may briefly return after the increase, then settle within a few days. This is expected, not a setback.

**Weeks
9–12**

Weeks 9–12: Finding your groove — momentum builds

Side effects typically settle significantly by this point. You're building a rhythm: consistent injection timing, adapted eating patterns, and often improved energy. Weight loss in this phase tends to be more predictable and consistent. Most patients report that around week 8–10 is when treatment starts to feel like it's 'clicking.' This is also when lifestyle habits — movement, sleep, protein intake — begin compounding the medication's effects.

Month 4+

Month 4 and beyond: Continued titration

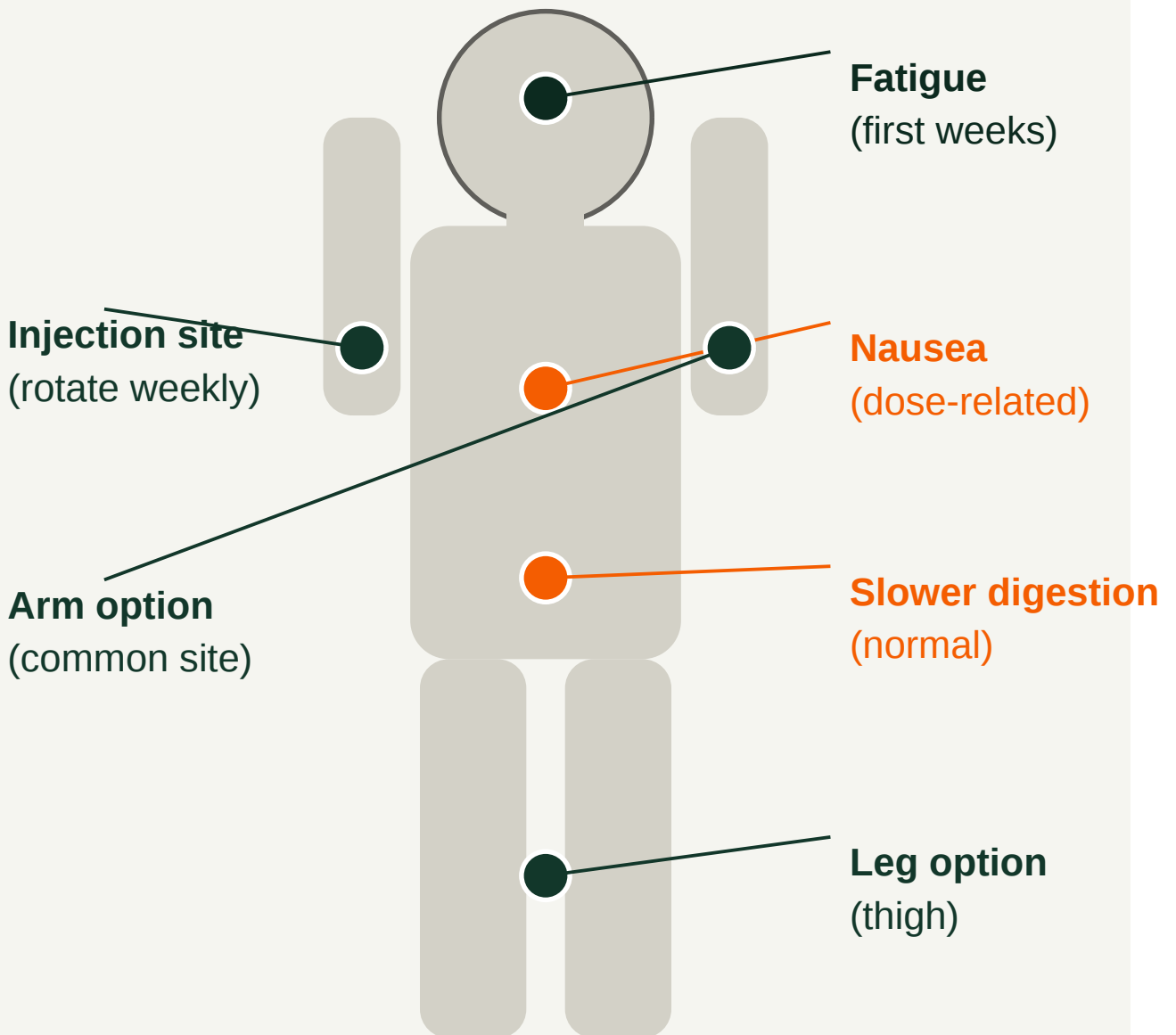
Most patients haven't reached their target dose by day 90. Titration continues based on your response and tolerability, and weight loss compounds over 6–18 months of consistent treatment. The first 90 days are the foundation — not the finish line. Patients who stay consistent through the adjustment phase go on to achieve the full clinical results documented in trials.

Side Effects & What's Normal

A clear guide to what you'll likely experience

GLP-1 medications have a well-documented, predictable side effect profile. Understanding what's coming takes away a lot of the anxiety — and helps you distinguish between 'this is normal' and 'I should contact my provider.'

Common side effect locations



Common side effect areas and injection sites

Common and expected — usually temporary

Nausea

The most common side effect, especially in weeks 1–4 and again after each dose increase. Typically mild, peaks within the first day or two after injection, and fades within a few days. Eating smaller, lower-fat meals and avoiding eating right before bed helps significantly.

Reduced appetite

This is the medication doing exactly what it's supposed to. You may find you're not hungry at your usual mealtimes, or that you feel full much faster than before. This is not a side effect to worry about — it's the primary mechanism of action.

Fatigue

Some patients feel more tired than usual in the first few weeks, particularly in the 24–48 hours after injection. This typically improves significantly after the first month. Staying hydrated and maintaining protein intake helps.

GI changes — constipation or loose stools

Both are possible as digestion adjusts to a slower gastric emptying rate. Staying hydrated and maintaining fiber intake is the first-line solution. If constipation is significant or persistent, mention it at your next provider check-in.

Mild injection site reactions

Redness, mild soreness, or small bumps at the injection site are normal and typically resolve within a day or two. Rotate your injection sites weekly — abdomen, outer thigh, and upper arm are all valid options.

Headache

Reported by some patients, especially early in treatment. Usually related to reduced caloric intake or hydration. Easy to manage by eating enough protein and staying hydrated.

When to contact your Lifted Health care team

Reach out if you experience: severe or persistent vomiting, sharp abdominal pain (especially upper middle or left side — a potential sign of pancreatitis), rapid heart rate, signs of allergic reaction (rash, swelling, difficulty breathing), vision changes, or any symptom that significantly concerns you. When in doubt, reach out.

What most people don't experience

Despite what you might read online, most patients on properly titrated GLP-1 therapy do not experience severe vomiting, hospital-level GI distress, or 'GLP-1 face' (the loose-skin effect associated with extremely rapid weight loss). Slow, steady titration is specifically designed to avoid these outcomes.

Setting Yourself Up for Success

Six habits that make a real difference

The medication does most of the work — but these habits consistently separate patients who get strong results from those who plateau early. None of them require a gym membership or a perfect diet.

Eat smaller, slower meals



Gastric emptying slows on GLP-1 therapy. A full-size meal — especially a high-fat one — is the most reliable trigger for nausea. Think smaller portions, more frequently. Prioritize protein (aim for 80–100g daily) to preserve muscle mass during weight loss. Chew slowly. Stop eating before you feel completely full.

Hydrate more than you think you need to



Reduced appetite often means reduced fluid intake too — many of us get water through food without realizing it. Aim for at least 64 oz of water daily, more if you're active. Dehydration is one of the most common — and most avoidable — causes of headache and fatigue during early treatment.

Take your injection on the same day each week



Consistency in timing helps maintain stable blood levels and reduces the likelihood of side effects from irregular dosing. Choose a day that works for your schedule — many people pick Sunday or Monday — and treat it like a standing appointment with yourself.

Move your body — even a little



GLP-1 therapy preserves and can improve lean muscle mass when paired with regular activity. You don't need intense workouts. A 20–30 minute walk most days is meaningful, both for weight loss and for how you feel. Movement also counteracts constipation, which is a common early side effect.

Log your experience



Keep a simple note each week: your weight, how you felt around injection day, what you ate, and anything notable. This gives you and your provider genuinely useful data at check-ins — and helps you spot patterns ('I always feel great by Wednesday,' 'high-fat meals always trigger nausea for me').

Give it time — the whole 90 days



The most common reason GLP-1 therapy 'doesn't work' is stopping too early. The first four weeks are the adjustment phase, not the results phase. Weight loss builds and accelerates month over month. Patients who commit through the initial adjustment period go on to achieve the full results reflected in clinical trials.

Your Top Questions, Answered

Honest answers to the most common questions

These are the questions Lifted Health patients ask most — before they start, during the first few weeks, and as they settle into treatment. We've written direct answers without hedging or vague reassurances.

Q How long until I see results?

Appetite changes are often noticeable within the first 1–2 weeks — you'll likely find yourself fuller faster and less interested in snacking. Measurable weight loss typically becomes visible around weeks 4–8 and builds through months 3–6. If the scale hasn't moved significantly at 4 weeks, that doesn't mean the medication isn't working — your dose may still be at the lowest titration level.

Q Is compounded semaglutide or tirzepatide safe?

Compounded GLP-1 medications are prepared by FDA-registered compounding pharmacies that follow strict quality, sterility, and potency standards. The active pharmaceutical ingredient is identical to what's used in brand-name medications. Lifted Health partners exclusively with pharmacies that meet these standards. Compounded versions became widely used during brand-name drug shortages and have an extensive safety record when sourced through compliant channels.

Q What if I miss an injection?

If you're within 5 days of your scheduled injection day, take it as soon as you remember. If it's been more than 5 days, skip that week's dose and resume your regular schedule the following week. Never double up doses to compensate. If you're unsure what to do, contact your Lifted Health care team — it's a common question and easy to resolve.

Q Will I regain weight if I stop the medication?

GLP-1 therapy works while you're taking it, and stopping does typically lead to some weight regain over time — as with most treatments for chronic conditions. This is why many patients use GLP-1 therapy as a long-term tool rather than a short course. The habits built during treatment — eating patterns, portion awareness, regular movement — do persist and help maintain results. This is an important conversation to have with your provider as you near your target weight.

Q Can I drink alcohol while on GLP-1 medications?

There's no absolute prohibition, but alcohol is worth approaching carefully. GLP-1 therapy slows gastric emptying, which means alcohol can be absorbed differently and affect you more intensely than usual. Nausea is also more likely when alcohol is combined with a full stomach. Many patients find their interest in alcohol decreases naturally on treatment — this is a commonly reported and welcome side effect. If you drink, moderation is the general guidance.

Q When will my next dose increase happen?

Dose increases typically occur every 4 weeks if you're tolerating the current dose without significant side effects. Your Lifted Health provider reviews your progress and will recommend timing. There's no benefit to rushing titration — staying at a lower dose longer is sometimes the better approach for tolerability, and the weight loss still happens. Slower titration does not mean worse outcomes.

Q What should I eat on GLP-1 medications?

There's no required diet, but certain patterns improve tolerability and results. Prioritize protein at every meal — it preserves muscle mass and keeps you satisfied longer. Avoid high-fat, greasy meals, especially in the first weeks, as these reliably worsen nausea. Focus on whole foods, smaller portions, and eating slowly. You don't need to count calories — the medication naturally reduces intake — but some patients find loose tracking helpful for building awareness.

Q What happens after I reach my goal weight?

Your provider will work with you on a maintenance strategy — whether that means continuing at a lower maintenance dose, a reduced injection frequency, or a carefully monitored taper. This is not a one-size-fits-all decision. Many patients continue GLP-1 therapy long-term, as obesity is a chronic condition with a well-documented risk of recurrence after stopping treatment.

Next Steps

Ready to start — or already on your way?

Lifted Health connects you with licensed providers who specialize in GLP-1 therapy for weight loss. Our process is fully online — complete a brief intake form, get reviewed by a provider, and receive your medication by mail. No waiting rooms. No insurance required.

If you're an existing patient, your provider and care team are accessible through your patient portal for clinical questions. For administrative questions, our support team is available by email.

Visit joinliftedhealth.com to start your intake or log into your patient portal.

A few things to carry with you

- Results build over 6–18 months. The first 90 days are foundation, not finish line.
- Side effects are temporary and manageable — don't let the first two weeks define your decision.
- Protein, hydration, and movement compound the medication's effects significantly.
- Your care team is there for a reason. Reach out with questions — there are no bad ones.
- This is a medical treatment for a chronic condition, not a shortcut. Give it the time it deserves.

This guide is provided for general informational purposes only. It does not constitute medical advice, diagnosis, or treatment. GLP-1 medications are prescription-only and must be used under the supervision of a licensed healthcare provider. Individual results vary. Clinical trial data referenced reflects STEP-1 (semaglutide) and SURMOUNT-1 (tirzepatide) and represents average outcomes, not a guarantee of individual results. Lifted Health is not affiliated with Novo Nordisk or Eli Lilly.