

Synopsis of the original article
***Weight Regain and Cardiometabolic
Effects After Withdrawal of Semaglutide
The STEP 1 Trial Extension***

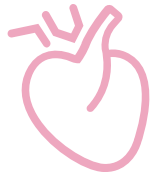
Wilding JPH, et al. Diabetes Obes Metab
2022;1-12doi:10.1111/dom.14725.

Synopsis created and reviewed by Novo Nordisk

Introduction



Obesity is a chronic disease requiring ongoing treatment to achieve and maintain weight loss



Obesity leads to numerous cardiometabolic complications



The effect of treatment withdrawal on body weight and cardiometabolic risk factors is being evaluated in the STEP 1 trial extension

Trial design: Phase 3, observational off-treatment trial extension



Study objective

To explore changes in body weight and cardiometabolic risk factors after treatment withdrawal in the STEP 1 trial extension

The STEP 1 trial:



Adults with BMI ≥ 30 kg/m² (or ≥ 27 kg/m² with at least one weight-related comorbidity) and without diabetes

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2:1

STEP 1 treatment period (n=1961) STEP 1 extension phase (n=327*)

Semaglutide 2.4 mg
SC once-weekly

Off-treatment
extension†

Placebo
SC once-weekly

Off-treatment
extension†

+ lifestyle intervention

0 68-week 68 52-week 120



*327 participants who had completed 68 weeks' treatment from any site in Canada, Germany and the UK, and sites in the US and Japan with the highest main phase recruitment



†Study treatment (semaglutide, placebo, lifestyle intervention) discontinued in the extension phase

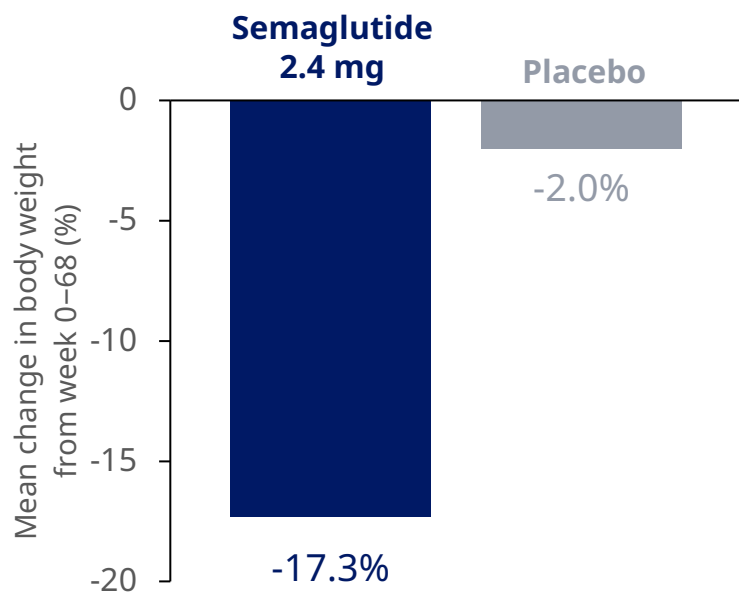


All analyses in the extension phase were exploratory

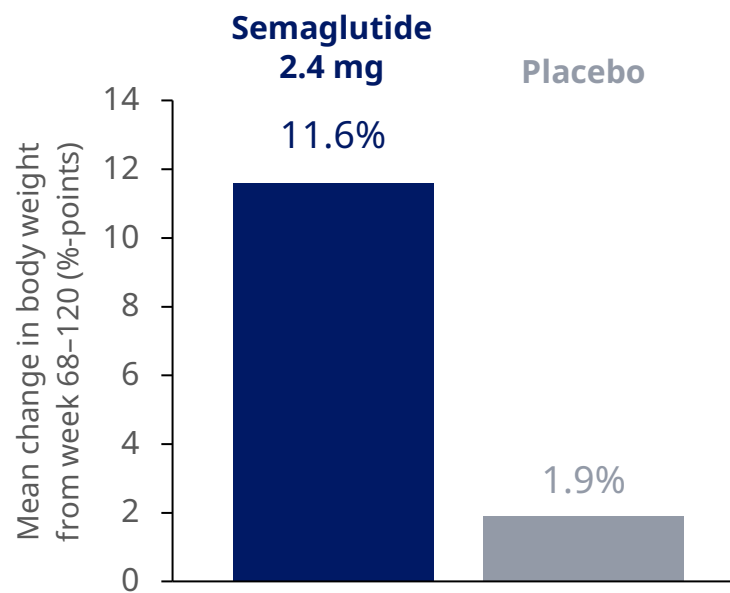
After treatment withdrawal, body weight regain was observed in both semaglutide and placebo groups

Extension analyses in 327 participants (extension analysis set)

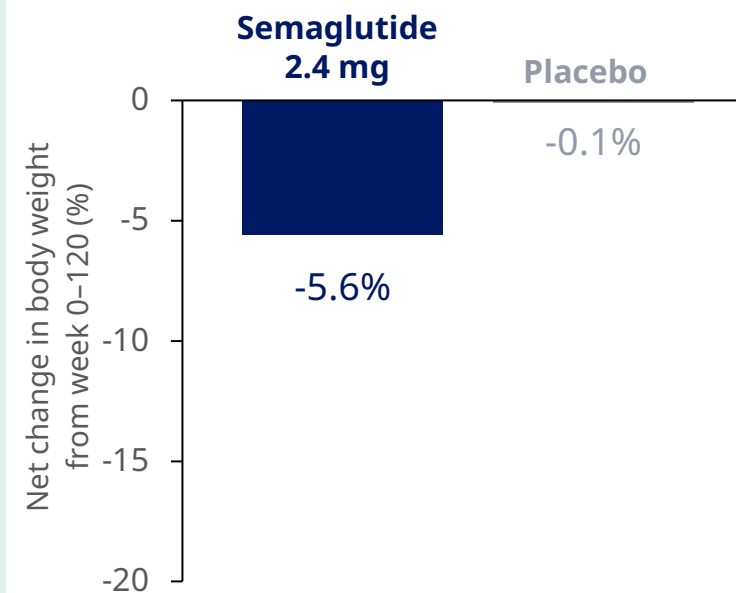
Mean change in body weight (%) from week 0–68



Mean change in body weight (%-points) from week 68–120



Net change in body weight (%) from week 0–120



Cardiometabolic outcomes

Improvements in most cardiometabolic parameters from week 0–68 reverted towards baseline at week 120

Conclusions



One year after **withdrawal of once-weekly subcutaneous semaglutide 2.4 mg** and lifestyle intervention, participants regained two-thirds of their prior weight loss, with similar changes in cardiometabolic parameters

These findings confirm the chronicity of obesity and suggest **ongoing treatment is required** to maintain improvements in weight and health