Semaglutide Microdose Protocol

skinny.Rx

Patient FAQ

What is this program?

This is a **low-dose ("microdosing") semaglutide program** for people who want to lose a **small amount of weight (about 5–10 lb)**. It uses **slower, lower titration** than standard GLP-1 weight-loss programs.

Who is this for?

- GLP-1–naive patients (not currently on semaglutide/tirzepatide and not recently on them)
- People aiming for modest weight loss (often in the BMI range where full-dose programs may not be appropriate or desired)

What results should I expect?

Most people should expect:

- Gradual weight change (often **0.5–1 lb/week**, sometimes less)
- Reduced hunger/"food noise"
- Earlier fullness and smaller portions

Results vary. Your prescriber may hold your dose longer, pause escalation, or adjust the plan based on your response.

What's the dosing schedule?

Your prescriber will choose a dose plan based on your needs and tolerability. A common "small weight loss" titration is:

- Month 1: **0.25 mg weekly**
- Month 2: **0.5 mg weekly**
- Month 3: **0.75 mg weekly**
- Optional (selected cases): **1.0 mg weekly** as a ceiling, if clinically appropriate

You may **stay at a lower dose** if it's working well or if side effects increase with escalation.

How do I inject it?

You'll inject **once weekly**, on the same day each week, into:

- Abdomen, thigh, or upper arm (subcutaneous injection)

Rotate injection sites and follow your injection instructions exactly.

What are common side effects?

Most common:

- Nausea, reflux, burping
- Constipation or diarrhea
- Reduced appetite
- Fatigue or headache (often from low intake/dehydration)

Side effects are often dose-related and improve with time.

How can I reduce side effects?

- Eat smaller meals; stop when comfortably full
- Avoid greasy/heavy foods and alcohol (especially early)

- Prioritize hydration and electrolytes
- Aim for adequate protein
- Treat constipation early (fiber + water; stool softener or magnesium if needed)

What if I miss a dose?

General guidance:

- If you're within ~48 hours of your usual dosing time, take it as soon as you remember.
- If it's close to your next dose, skip the missed dose and resume your normal schedule. Do not double-dose.

Who should NOT use semaglutide?

This medication may not be appropriate if you:

- Are pregnant, trying to conceive, or breastfeeding
- Have a personal or family history of **medullary thyroid cancer** or **MEN2**
- Have a history of pancreatitis (or other high-risk situations—your clinician will decide)
- Have an active eating disorder or are at risk of unhealthy weight loss

When should I contact the medical team urgently?

Seek urgent care or contact us right away for:

- Severe abdominal pain (especially with vomiting)
- Persistent vomiting or inability to keep fluids down
- Signs of dehydration (dizziness, fainting, very dark urine)
- Possible allergic reaction (swelling, hives, trouble breathing)

Do I need check-ins?

Yes. Check-ins help confirm:

- You're losing weight safely (not excessively)
- Side effects are manageable
- Your dose is appropriate for your goal

Patient Guide

Program Goal

The goal is **small, controlled weight loss** (typically **5–10 lb**) with a **low-dose GLP-1 approach** that reduces hunger and improves appetite regulation while minimizing side effects.

Who This Is For

- GLP-1–naive patients seeking small weight loss
- Patients who do not want (or may not need) standard full-dose escalation

What Success Looks Like

- Steady, modest weight change
- Appetite feels "calmer" and easier to manage

- You can maintain nutrition (especially protein) and energy
- Side effects are mild and improve over time

Semaglutide Dosing (Small Weight Loss)

Your prescriber will tailor your plan. A typical titration:

Month 1 (Weeks 1–4)

- **0.25 mg once weekly**

Month 2 (Weeks 5–8)

- **0.5 mg once weekly** (if needed and tolerated)

Month 3 (Weeks 9–12)

- **0.75 mg once weekly** (if needed and tolerated)

Optional ceiling (selected cases)

- **1.0 mg once weekly** may be considered if additional appetite control is needed and it remains clinically appropriate.

Important notes:

- You may be instructed to **hold a dose longer than 4 weeks** if side effects occur or if the current dose is already working.
- You do not "have to" escalate if you're achieving your goal safely.

Injection Basics (High-Level)

- Inject **once weekly**, same day each week.
- Inject into **abdomen, thigh, or upper arm** (subcutaneous).
- Rotate sites weekly.
- Follow your medication label and injection instructions exactly.

Nutrition & Lifestyle (This Matters More Than People Want It To)

To reduce side effects and improve results:

- Protein-first meals (especially at breakfast)
- Hydration daily; consider electrolytes
- Fiber with water (helps constipation)
- Resistance training (helps preserve muscle during appetite reduction)
- Avoid overeating "through" the medication—stop when comfortably full

Side Effect Guide (Practical)

Nausea / reflux:

- Smaller meals, slower eating, avoid greasy foods
- Avoid lying down right after meals

Constipation:

- Water + fiber + movement
- Consider magnesium or a stool softener if needed

Fatigue/headache:

- Often dehydration or low intake—hydrate and ensure adequate calories/protein

If side effects are significant, your prescriber may:

- Extend the time at a given dose
- Reduce to the prior tolerated dose
- Pause dosing briefly if clinically needed

Monitoring & Safety

We monitor:

- Weight trend (loss should remain appropriate and safe)
- Side effect burden
- Signs of excessive appetite suppression or unhealthy weight loss

If you reach your goal early:

- Your clinician may keep you at your effective dose briefly, then discuss the next step based on your goal and stability.

When to Contact Us

Contact the medical team for:

- Severe or persistent GI symptoms
- Symptoms of dehydration
- Severe abdominal pain
- Any concern about unsafe weight loss or medication misuse