

Abstract:

Purpose: In the past decade, glucagon-like peptide-1 receptor agonists (GLP-1) medications have emerged as some of the first-line options in the treatment of type II diabetes mellitus and obesity. Due to this increased popularity and demand, this medication is often found on backorder due to manufacturers not being able to keep up with the increased demand. Insurance coverage has also been a barrier to patients having access to these medications as these are expensive medications, and some insurance plans not listing some of these medications on their formularies. Due to these issues, patients have resorted to unsafe practices such as trying to preserve dosages leading to non-adherence, utilization of non-FDA approved compounded products.

This study's purpose is to gauge how comfortable retail pharmacists feel with dealing with these issues and will provide some insight on how to approach this issue and possible future issues that may arise with the increased demand of GLP-1s.

Methods: An anonymous survey sent to pharmacists via social media and e-mail consisted of demographic questions, multiple-choice questions, and questions centered around assessing their confidence level of dealing with unsafe patient practices due to this increased demand, drug shortages, and insurance coverage issues on a Likert scale.

Results: Participants found themselves transferring in scripts at least once weekly (19 of 53 responses [36%]), followed by two to three times a week (13 of 53 responses [25%]). 78% (33 of 42 responses) of participants indicated either they agree (strongly or somewhat) that increased popularity of GLP-1s has an impact on unsafe patient practice. 79% (34 of 43

responses) of participants indicated that availability of compounded formulations of GLP-1s, whether those may FDA or non-FDA approved forms of these drugs, have an impact on unsafe patient practices. . Inappropriate indication of use, such as using Ozempic for the treatment of weight loss without type 2 diabetes mellitus, rather than Wegovy, the approved weight loss formulation of semaglutide (12 of 41 responses [29%]) was the most common unsafe patient practice.

Conclusion: Addressing the potential for unsafe patient practice due to the lack of availability is to be prioritized as healthcare providers. Pharmacists are the last line between the patient receiving their GLP-1 medication and ensuring that they are adherent and safe should always come first.