Mounjaro® (tirzepatide) for managing overweight and obesity – information sheet for South East London (SEL)

This information sheet aims to support healthcare professionals in primary care in managing patients prescribed Mounjaro® (tirzepatide) for weight management in line with guidance from the National Institute for Health and Care Excellence (NICE). This information should be read in conjunction with the specialist weight management services (tier 3 or tier 4 bariatric teams) clinic letter to support taking over prescribing responsibility for Mounjaro® (tirzepatide) following initiation from a bariatric specialist to ensure patient care is not compromised. If Mounjaro® (tirzepatide) is prescribed for patients/indications that do not meet the agreed criteria, prescribing responsibility will remain with the initiating team.

To note: Wegovy®▼ (semaglutide) prescribed for managing overweight and obesity can only be prescribed within specialist weight management services for a maximum of 2 years in accordance with NICE technology appraisal (TA): 875, therefore prescribing will not be transferred to primary care.

South East London Interim Policy statement eligibility criteria

In line with SEL Interim Policy statement for weight management, Mounjaro® (tirzepatide) will be initiated by a specialist weight management service (tier 3 or tier 4 bariatric teams only) and prescribed for adults aged 18 years and over who meet the following criteria:

Those with a body mass index (BMI) greater than or equal to 40kg/m^2 * **and** 4 or more qualifying co-morbidities.

- Qualifying co-morbidities (see details of definitions on page 2) are:
  - Cardiovascular disease
  - Hypertension
  - Dyslipidaemia
  - Obstructive sleep apnoea
  - Type 2 diabetes mellitus

* A lower body mass index threshold should be used (usually reduced by 2.5 kg/m^2) for people from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean ethnic background

To note: Prescribing for all other criteria outlined in the SEL Interim Policy statement for weight management will remain in specialist care..

Specialist weight management services will initiate Mounjaro® (tirzepatide) and titrate to the maximum tolerated maintenance dose (minimum 3 months prescription). Prescribing responsibility may then be transferred to the GP practice with the bariatric specialist detailing key information in their clinic letter (refer to page 3).

In line with our SEL Interim Policy statement for weight management and adult joint medicines formulary, patients will have been initiated on:

- Mounjaro®▼ (tirzepatide) sub-cutaneous injection 2.5mg weekly **titrated to** 15mg weekly (as maintenance dose) or highest tolerated dose. Dose increases can be made in 2.5mg increments after 4 weeks on the current dose. Recommended maintenance doses are **5mg, 10mg or 15mg**.

The maintenance dose will be documented in the clinic letter, along with any additional information.

Mounjaro® (tirzepatide) will NOT be prescribed for:

- People with:
  - Hypersensitivity to the active substance or to any of the excipients of GLP-1 analogues
  - Acute pancreatitis
  - Severe gastrointestinal disease
  - Personal or family history of medullary thyroid carcinoma
  - Multiple Endocrine Neoplasia syndrome type 2 (MEN 2)

- Use in pregnancy/those planning pregnancy or breast feeding
- Use in people with Type 1 Diabetes Mellitus
- People obtaining the medication privately who do not meet the SEL Interim Policy statement criteria

Mounjaro® (tirzepatide) definitions of qualifying co-morbidities:

Qualifying co-morbidities	Definition
Atherosclerotic cardiovascular disease (ASCVD)	Established atherosclerotic CVD (ischaemic heart disease, cerebrovascular disease, peripheral vascular disease, heart failure)
Hypertension	Established diagnosis of hypertension **and** requiring blood pressure lowering therapy
Dyslipidaemia	Treated with lipid-lowering therapy, **or** with low-density lipoprotein (LDL) equal-to-or-greater than 4.1 mmol/L, **or** high-density lipoprotein (HDL) less than 1.0mmol/L for men or less than 1.3mmol/L for women **or** fasting (where possible) triglycerides equal-to-or-greater-than 1.7 mmol/L
Obstructive Sleep Apnoea (OSA)	Established diagnosis of OSA (sleep clinic confirmation via sleep study) and treatment indicated i.e. meets criteria for continuous positive airway pressure (CPAP) or equivalent
Type 2 diabetes mellitus	Established Type 2 diabetes mellitus**

**People with type 2 diabetes can be prescribed tirzepatide (Mounjaro®) for obesity or for glycaemic management in type 2 diabetes if they meet the criteria set out in the recommendations in either:
a) NICE's technology appraisal guidance on tirzepatide (Mounjaro®) for managing overweight and obesity (NICE TA1026); or
b) Tirzepatide (Mounjaro®) for treating type 2 diabetes (NICE TA924)

People started on Mounjaro® (tirzepatide) will have been given the following advice by the specialist weight management teams initiating therapy:

- The benefits and risks of Mounjaro® (tirzepatide) and the patient will have consented to use.
- The side effects of therapy and actions to be taken if these occur e.g. gastro-intestinal side effects, pancreatitis.
- Specific education and training in administration, storage and disposal of Mounjaro® (tirzepatide) and associated sharps.
- The dose they need to administer.
- 'Wrap around care' focusing on diet, nutrition and increased physical activity advice (and therefore do not require referral to the NHS England wrap around support digital service).
- Vitamin and mineral supplementation (to purchase over the counter).
- Contact details for specialist team.
- For female patients of child-bearing age:
    - The risks of falling pregnant whilst on this treatment as the effects on an unborn child are not known
    - Recommended appropriate contraceptive measures to be taken
    - Mounjaro® (tirzepatide) should be discontinued at least 1 month before a planned pregnancy due to the long half-life of tirzepatide.

If the person has Type 2 diabetes:

- Blood glucose monitoring requirements (in line with the SEL 'Self-monitoring of blood glucose (SMBG) in Adults' guidance) if required
- Side-effects of hypoglycaemia, subsequent changes to other anti-diabetes agents e.g. insulin or sulfonylureas, and how to reduce the risk of hypoglycaemia.
- For those with existing diabetic retinopathy, the patient is aware/has been informed of the risks of diabetic retinopathy complications, the symptoms of worsening retinopathy and action to be taken if this occurs.

Monitoring requirements – bloods tests and vital signs

Monitoring for the first 6 months will have been undertaken by the initiating specialist obesity team. After this time, the following are recommended in primary care:

At least annually:

- eGFR and creatinine
- HbA1c (if have Type 2 diabetes six monthly or if non-diabetic hyperglycaemia annually)
- Liver function tests (LFTs)
- Weight
- BMI
- Blood pressure

Please note these are general recommendations. Some patients may need more frequent monitoring based on patient factors e.g. baseline eGFR/creatinine, eGFR/creatinine trend, HbA1c above individualised target, blood pressure above target, co-morbidities and prescribing of other medication that may impact on these parameters.

Monitoring requirements – reviewing effectiveness

A review in line with NICE TA: 1026 will be undertaken by the initiating specialist weight management team 6 months after highest tolerated dose is achieved. Continuation of therapy will be recommended if weight loss ≥5% of initial body weight is achieved. If these are not achieved, therapy may be withdrawn on an individual patient basis and alternative therapies considered.

All patients receiving Mounjaro® (tirzepatide) for weight management should be reviewed at least annually throughout their treatment. This may be in specialist weight management services (whilst under their care, until discharge) or in primary care.

Where weight increases back to pre-treatment levels despite maximised lifestyle interventions and medication compliance or any clinical concerns relating to treatment, please contact or refer back to the initiating specialist weight management service for review. Initially through 'Advice & Guidance' however may require re-referral to specialist weight management services.

Accompanying clinic letter information

The clinic letter that will accompany this information sheet from the initiating specialist team will include as a minimum:

- Eligibility criteria including baseline BMI and qualifying co-morbidities
- Duration of use of Mounjaro® (tirzepatide) and continuing maintenance dose
- Confirmation that ≥5% of initial body weight loss has been achieved at 6 months (or sooner) and if not, rationale for continuing treatment
- Any additional monitoring requirements or criteria to refer to the specialist team for advice/re-referral back to the service on an individual patient basis if needed.

Accessing more information

More information including information on drug interactions can be found on the relevant summary of product characteristics at www.medicines.org.uk For further information, please seek advice from the specialist weight management team.

In the event that there are any queries in relation to the request from the specialist team to prescribe this medication, please contact the initiating team (detailed within the clinic letter).

References

1. Summary of product characteristics for Mounjaro® (tirzepatide) at www.medicines.org.uk

2. NICE Technology Appraisal TA 1026: Tirzepatide for managing overweight and obesity December 2024 at www.nice.org.uk/guidance/ta1026/resources

3. NHS England Interim commissioning guidance: Implementation of the NICE technology Appraisal TA1026 and NICE funding variation (Mounjaro®) for the management of obesity March 2025 at: www.england.nhs.uk/ourwork/prevention/obesity/medicines-for-obesity May 2023.

Original date of approval: July 2025. Date for next review: July 2026 or sooner if evidence/practice changes

South East London Integrated Medicines Optimisation Committee (SEL IMOC). A partnership between NHS organisations in South East London Integrated Care System: NHS South East London (covering the boroughs of Bexley/Bromley/Greenwich/ Lambeth/Lewisham and Southwark) and GSTFT/KCH /SLaM/ Oxleas NHS Foundation Trusts and Lewisham & Greenwich NHS Trust