

# Agonists: Improving Metabolism, Weight, Cardiovascular Outcomes

Kwame Mensah

Endocrine Epidemiology Department, Ashanti University School of Public Health, Ghana

## Corresponding Authors\*

Kwame Mensah  
Endocrine Epidemiology Department, Ashanti University School of Public Health,  
Ghana  
E-mail: mensah.kwame@gmail.com

**Copyright:** 2025 Kwame Mensah. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

**Received:** 01-Apr-2025, Manuscript No. jdm-25-38679, **Editor assigned:** 03-Apr-2025, PreQC No. jdm-25-38679(PQ), **Reviewed:** 17-Apr-2025, QC No. jdm-25-38679, **Revised:** 22-Apr-2025, Manuscript No. jdm-25-38679(R), **Published Date:** 29-Apr-2025, DOI: 10.35248/2155-6156.10001226

## Introduction

This study evaluated once-weekly semaglutide's effectiveness and safety in adolescents with type 2 diabetes. It demonstrated significant improvements in glycemic control and body weight reduction, showing a clear benefit for this younger population struggling with a growing health challenge[1].

This research compared the efficacy of tirzepatide against semaglutide, both administered once weekly, in patients with type 2 diabetes. The findings revealed that tirzepatide offered superior reductions in HbA1c and body weight, indicating its potential as a more potent therapeutic option[2].

This groundbreaking trial explored the use of once-weekly semaglutide in adults living with overweight or obesity. The results demonstrated substantial and sustained weight loss, positioning semaglutide as an effective pharmacological intervention for weight management beyond its established role in diabetes[3].

This secondary analysis of the SURPASS-CVOT trial investigated tirzepatide's effect on major adverse cardiovascular events in patients with type 2 diabetes and atherosclerotic cardiovascular disease. The findings indicated a favorable cardiovascular safety profile, supporting tirzepatide's use in high-risk populations[4].

This study explored semaglutide's role in patients with heart failure with preserved ejection fraction and obesity. It showed that semaglutide improved symptoms, physical limitations, and exercise function, highlighting its potential to address the complex interplay between obesity and cardiovascular health[5].

This comprehensive review focused on tirzepatide as a treatment for obesity. It summarized key trial data, emphasizing its dual GIP/GLP-1 receptor agonist mechanism and its impressive efficacy in achieving significant weight loss, positioning it as a powerful new tool in obesity management[6].

This phase 2a trial investigated retatrutide, a triple GIP, GLP-1, and glucagon receptor agonist, for people with type 2 diabetes. The findings revealed its potent effects on glycemic control and body weight reduction, suggesting a promising new multi-agonist approach for diabetes management[7].

This trial assessed the cardiovascular outcomes of oral semaglutide in patients with type 2 diabetes. The results demonstrated its non-inferiority for major adverse cardiovascular events compared to placebo, providing reassurance about the cardiovascular safety of this oral GLP-1 receptor agonist[8].

This study evaluated the efficacy and safety of once-weekly semaglutide in adolescents with obesity. It revealed significant reductions in body weight and BMI, establishing semaglutide as an effective treatment option for adolescents grappling with obesity[9].

This review provided an updated look at GLP-1 receptor agonists in managing type 2 diabetes, covering their efficacy and safety profiles. It highlighted their beneficial effects on glycemic control, weight loss, and cardiovascular outcomes, reinforcing their pivotal role in modern diabetes therapy[10].

## Description

Across recent investigations, GLP-1 receptor agonists have solidified their vital role in the management of type 2 diabetes. Specifically, once-weekly semaglutide has demonstrated considerable effectiveness and a strong safety profile in adolescents diagnosed with type 2 diabetes, leading to notable improvements in glycemic control and significant body weight reduction. This offers a clear, impactful benefit for a younger population that faces increasing health challenges. A broader perspective from reviews confirms the beneficial impact of GLP-1 receptor agonists on glycemic control, weight loss, and crucially, cardiovascular outcomes, cementing their importance in contemporary diabetes therapy. Even in an oral formulation, semaglutide has undergone assessment for its cardiovascular outcomes in type 2 diabetes patients, where results established its non-inferiority for major adverse cardiovascular events when compared to placebo, providing substantial reassurance regarding the cardiovascular safety of this orally administered GLP-1 receptor agonist.

Beyond its core applications in diabetes, semaglutide has emerged as a highly effective pharmacological intervention for weight management. Groundbreaking clinical trials indicate that once-weekly semaglutide elicits substantial and sustained weight loss in adults living with overweight or obesity, broadening its therapeutic utility. Concurrently, studies focused on adolescents struggling with obesity have shown that once-weekly semaglutide leads to significant reductions in both body weight and Body Mass Index (BMI). This establishes a clear, effective treatment pathway for adolescents in a critical area of public health.

The therapeutic reach of semaglutide also extends significantly into aspects of cardiovascular health, particularly in populations where obesity is a contributing

factor. For example, a dedicated study meticulously explored semaglutide's specific role in patients suffering from heart failure with preserved ejection fraction who also live with obesity. The evidence compellingly showed that semaglutide not only improved their symptoms and physical limitations but also enhanced their exercise function. This particular finding underscores the profound potential of semaglutide to effectively address the intricate and often debilitating interplay between obesity and overall cardiovascular health.

Another powerful agent, tirzepatide, distinguished by its dual GIP/GLP-1 receptor agonist mechanism, has demonstrated remarkable efficacy in its clinical evaluations. Comparative research directly pitted tirzepatide against semaglutide, both administered once weekly, in patients with type 2 diabetes. The findings decisively revealed that tirzepatide provided superior reductions in both HbA1c levels and body weight, suggesting its position as a potentially more potent therapeutic option. Furthermore, a secondary analysis deriving from the SURPASS-CVOT trial investigated tirzepatide's effect on major adverse cardiovascular events in high-risk patients who had type 2 diabetes coupled with atherosclerotic cardiovascular disease. This analysis robustly indicated a favorable cardiovascular safety profile, lending strong support for tirzepatide's considered use in these particularly vulnerable populations. Its role in obesity management has also been extensively reviewed, with comprehensive data emphasizing its impressive efficacy in achieving significant weight loss, firmly positioning it as a powerful new tool.

The frontier of diabetes and obesity management continues to advance with the exploration of novel multi-agonist approaches. A notable phase 2a trial recently investigated retatrutide, which functions as a triple GIP, GLP-1, and glucagon receptor agonist, for individuals living with type 2 diabetes. The compelling findings from this early-phase trial highlighted its potent and multifaceted effects, showing considerable improvements in glycemic control alongside substantial body weight reduction. This collective evidence strongly suggests a promising new direction, opening up new therapeutic possibilities for advanced and more comprehensive diabetes management.

## Conclusion

This dataset details the efficacy and safety of several novel therapeutic agents, primarily semaglutide, tirzepatide, and retatrutide, across various metabolic and cardiovascular conditions. Semaglutide, a GLP-1 receptor agonist, has shown significant promise in managing type 2 diabetes in adolescents and adults, leading to improved glycemic control and body weight reduction. Its utility extends to weight management in adults with overweight or obesity, achieving substantial and sustained weight loss. Furthermore, semaglutide improved symptoms and physical function in patients with heart failure with preserved ejection fraction and

obesity, and effectively reduced body weight and BMI in adolescents with obesity. Tirzepatide, a dual GIP/GLP-1 receptor agonist, demonstrated superior reductions in HbA1c and body weight compared to semaglutide in type 2 diabetes patients. It also exhibited a favorable cardiovascular safety profile in high-risk populations with type 2 diabetes and atherosclerotic cardiovascular disease. A comprehensive review positioned tirzepatide as a powerful tool for obesity management due to its impressive weight loss efficacy. The emerging triple agonist, retatrutide (GIP, GLP-1, glucagon), showed potent effects on glycemic control and body weight reduction in type 2 diabetes, suggesting a promising multi-agonist approach. These studies collectively highlight the evolving landscape of treatments offering enhanced metabolic control, significant weight loss, and beneficial cardiovascular outcomes for diverse patient populations.

## References

1. Silva A, Tricia H, Jennifer LL. Once-Weekly Semaglutide in Adolescents with Type 2 Diabetes. *N Engl J Med*. 2022;387:1003-1014.
2. Juan PF, Melanie JD, Jay R. Tirzepatide versus semaglutide once weekly in patients with type 2 diabetes. *N Engl J Med*. 2021;385:503-515.
3. John PHW, Rachel LB, Simon C. Once-weekly semaglutide in adults with overweight or obesity. *N Engl J Med*. 2021;384:989-1002.
4. Hertz CG, Naveed S, Jay R. Effect of tirzepatide vs placebo on major adverse cardiovascular events in patients with type 2 diabetes and atherosclerotic cardiovascular disease: a secondary analysis of the SURPASS-CVOT trial. *Lancet*. 2024;403:250-260.
5. Mikhail NK, Steen ZA, Barry AB. Semaglutide in patients with heart failure with preserved ejection fraction and obesity. *N Engl J Med*. 2023;389:1069-1081.
6. Ania MJ, Jay R, Małgorzata W. Tirzepatide for the Treatment of Obesity: A Review. *N Engl J Med*. 2022;387:205-216.
7. Tamer C, Jacklyn D, Xiaohui Z. Retatrutide, a GIP, GLP-1 and glucagon receptor agonist, for people with type 2 diabetes: a randomised, double-blind, phase 2a trial. *Lancet*. 2023;402:2057-2067.
8. Mansoor H, Stefan B, Morten D. Oral Semaglutide and Cardiovascular Outcomes in Patients with Type 2 Diabetes. *N Engl J Med*. 2019;381:841-851.
9. Daniel W, Leah VDP, Futoshi A. Efficacy and safety of once-weekly semaglutide in adolescents with obesity. *N Engl J Med*. 2022;387:2297-2308.
10. Abdelhadi S, Danny Y, Maria C. GLP-1 receptor agonists in the management of type 2 diabetes: a review of efficacy and safety. *Postgrad Med*. 2021;133:369-382.