



The Impact of Weight Loss Injections on Eating Disorders

Aesthetics reports on NHS warnings regarding the link between eating disorders and weight loss medication

National Health Service (NHS) medical director Professor Sir Stephen Powis has called for stricter regulation of the sale and prescription of weight loss injections. This follows warnings from charities about a growing number of people with eating disorders accessing the drugs.¹

The rise of weight loss injections has been significant, with data showing 500,000 people in the UK are currently using GLP-1 medication.² New data published by *The Times* revealed that weight loss medication, such as semaglutide and tirzepatide, have been linked to 82 deaths in Britain.³ A breakdown of the statistics revealed that 22 deaths were linked to the drug's use for weight loss, while the remaining 60 were associated with its treatment for type 2 diabetes.³ The fatalities associated with weight loss injections have raised concerns among various eating disorder charities and the NHS.¹

Professor Powis urged online pharmacies and private providers to "act responsibly," and ensure that these drugs are prescribed only to people with a medical need for them.¹ Powis shared, "With eating disorder cases on the rise, it is concerning that some people may be taking these drugs off-label for weight loss. We continue to urge online pharmacies and private providers to ensure that safeguards, such as in-person weight checks, are in place to protect patients from harm."

The UK eating disorder charity Beat also expressed concern, noting an "incredibly worrying" rise in the number of calls made to its helpline regarding the injections.¹ Tom Quinn, Beat's director of external affairs, commented, "We're also concerned about what might happen when people finish their prescriptions and potentially gain weight. This could cause feelings of shame and guilt within individuals, which could contribute to the development of an eating disorder."

In February, the National Pharmacy Association (NPA) urged regulators to implement stricter rules, after raising concerns about individuals with a history of eating disorders or low body weight being incorrectly prescribed the drugs.⁴ Meanwhile, the Advertising Standards Authority (ASA) is now investigating 10 "priority" cases regarding weight loss injection advertisements, citing concerns that rules may be violated in their public promotion. Additional enquiries are expected to follow shortly.⁵

The National Institute for Health and Care and Excellence (NICE) published guidance on semaglutide treatment in England in March,⁶ commenting, "We hope to see measures put in place to make sure semaglutide medication is available for patients who have a genuine clinical need, with appropriate support and monitoring available to them."

The impact on eating disorders

Kimberley Cairns, psycho-aesthetic consultant and board member of the Joint Council for Cosmetic Practitioners (JCCP), shared her concerns with the *Aesthetics Journal*. "My main worry is that weight loss injections may worsen psychological vulnerabilities in those with eating disorders. The JCCP stresses the importance of understanding aesthetic treatments' mental health risks, including body dysmorphic disorder (BDD)," she said.

Cairns continued, "While these injections offer a quick fix, they can reinforce an unhealthy attitude towards body image, fostering dependency and dissatisfaction. Practitioners must navigate nuanced behaviours, making it vital to distinguish between eating disorders and disordered eating for better patient safety."

Aesthetic practitioner Dr Mayoni Gooneratne also expressed her worries from a practitioner's perspective. She discussed the physical impact weight loss drugs can have, explaining, "Common side effects of these drugs include nausea and diarrhoea, while more severe risks include gastroparesis, pancreatitis and thyroid issues. For individuals with compromised health due to eating disorders, these side effects can be particularly dangerous."

Cairns further highlighted, "These injections may lead to adverse health effects, including nutrient deficiencies and metabolic imbalances, but they can also trigger or worsen disordered eating behaviours, anxiety and depression."⁷

Cairns raised the repercussions of weight loss injections amongst media visibility commenting, "Social media and celebrity endorsements further exacerbate these issues by creating unrealistic expectations and pressures to conform to certain body ideals. This can be particularly harmful to individuals with eating disorders or disordered eating behaviours, as they may feel compelled to use these injections to achieve an idealised body image."

Exploring options for patient safety

The Nursing and Midwifery Council (NMC) and the JCCP strictly prohibit remote prescribing for cosmetic procedures. Both organisations emphasise that prescribers must uphold their responsibilities regarding prescription-only medicines (POMs).⁸ They state that remote prescribing is unacceptable and that a prescriber may only delegate a procedure after assessing the delegate's competence, emphasising the need for face-to-face consultations to ensure patient safety.⁸

Cairns proposed mandated training for aesthetic practitioners on the psychology behind aesthetic treatments, alongside stricter screening protocols for accessibility, such as in-person assessments. She encouraged further support, suggesting, "Healthcare professionals can enhance screening and support by adopting a holistic care approach, pursuing ongoing training in psychological safety, establishing support networks with mental health professionals and using psychological assessment tools." Cairns suggests utilising the Psychological Pre-Screening Tool through PLAST IQ,⁹ which can be integrated as part of a consultation and provide support to the practitioner and patient.

Protecting vulnerable patients

The interviewees emphasised the need for healthcare providers to be well-informed about the risks of prescribing weight loss medications to individuals with eating disorders, advocating for informed decision-making and prioritising patient safety.

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