



CORE FUNCTION HEALTH

Your GLP-1 Guide

A clear, evidence-informed guide to understanding GLP-1 therapy and building a foundation for lasting metabolic health

About This Guide

At Core Function Health, we believe that struggling with weight is rarely about a lack of discipline. For many people, the real barrier is a biological one — hormonal imbalances, insulin resistance, disrupted hunger signaling, and metabolic dysfunction that make sustained weight management genuinely difficult regardless of effort.

GLP-1 receptor agonists are a class of medications that work with your body's own hormonal systems to address several of these underlying drivers simultaneously. They are among the most evidence-backed tools currently available for metabolic support and weight management.

This guide is designed to give you a clear, honest, and practical foundation for understanding GLP-1 therapy — how it works, who it may benefit, what to realistically expect, and how to maximize your results. Whether you are exploring this option for the first time or preparing to begin, this is your starting point.

This guide covers:

- The science behind GLP-1 medications and how they work
- Who is most likely to benefit and which approach fits your goals
- Common questions, concerns, and misconceptions
- Practical nutrition and lifestyle habits to support your results
- Managing side effects effectively
- Building the mindset and habits for long-term success

Section 1: Understanding GLP-1 Medications

The Biology Behind the Medication



CORE FUNCTION HEALTH

GLP-1 stands for Glucagon-Like Peptide-1, a hormone your body naturally produces in the gut in response to eating. It plays several important roles in regulating metabolism, and its effects extend well beyond simple appetite control.

GLP-1 receptor agonists are medications that mimic and amplify the effects of this natural hormone, providing a sustained signal to multiple organ systems simultaneously. This is what distinguishes them from older weight loss approaches — they don't work through stimulants, extreme restriction, or willpower. They work by improving how your biology is functioning.

How GLP-1 medications work in the body:

- Brain (hypothalamus): Reduces appetite signals and food-seeking behavior, decreasing overall caloric drive without requiring constant conscious restriction.
- Stomach: Slows gastric emptying, meaning food remains in the stomach longer. This extends feelings of satiety after meals.
- Pancreas: Stimulates insulin release in response to elevated blood sugar and suppresses glucagon, resulting in better blood sugar regulation throughout the day.
- Liver: Reduces excess glucose production, further supporting blood sugar stability.
- Cardiovascular system: Emerging research suggests benefits for heart health and systemic inflammation.

What This Means Practically

When GLP-1 medications are working effectively, most people notice that the mental preoccupation with food — the constant background noise of cravings, hunger, and food decisions — quiets significantly. This is not willpower; it is the result of normalized hunger signaling and improved blood sugar regulation working together.

Clinical trial data shows that individuals using GLP-1 receptor agonists achieve 15–25% total body weight loss on average, alongside improvements in blood sugar markers, blood pressure, inflammation levels, and cardiovascular risk factors. These are outcomes that dietary intervention alone rarely achieves and sustains.

Important perspective:

GLP-1 therapy is not a replacement for healthy habits. It is a tool that makes those habits more achievable by reducing the biological resistance many people face. The patients who achieve the best long-term outcomes are those who use this medication as a foundation for building lasting lifestyle changes.



Section 2: Is GLP-1 Therapy Right for You?

Who Tends to Benefit Most

GLP-1 therapy is not universally appropriate, and candidacy should always be evaluated by a qualified healthcare provider. That said, research and clinical experience suggest it is particularly well-suited for individuals who:

- **Insulin resistance:** Struggle with metabolic markers such as elevated fasting blood sugar, high triglycerides, or belly-predominant weight gain that does not respond to conventional dietary approaches.
- **Hormonal shifts:** Are in perimenopause, menopause, or experiencing other hormonal transitions that alter metabolism, body composition, and hunger regulation.
- **Chronic weight management difficulty:** Have made consistent, genuine efforts with diet and exercise and found that weight either does not shift or returns reliably despite compliance.
- **Elevated metabolic risk:** Have risk factors for type 2 diabetes, cardiovascular disease, or non-alcoholic fatty liver disease that would benefit from metabolic intervention.
- **Longevity and healthy aging goals:** Are interested in supporting long-term metabolic health, reducing visceral fat, and preserving cardiovascular and cognitive function as they age.

Two Clinical Approaches

Depending on your goals and health profile, there are two primary ways GLP-1 therapy is structured at Core Function Health:

Approach 1: Full Metabolic Support

This approach is appropriate for individuals with a significant weight loss goal, clear signs of insulin resistance, or metabolic dysfunction that requires meaningful intervention. It typically involves a gradual dose escalation over several months under provider supervision, paired with nutritional guidance and lifestyle support.

This is a comprehensive metabolic reset — addressing not just weight, but blood sugar regulation, inflammation, energy, and hormonal balance simultaneously.



CORE FUNCTION HEALTH

Approach 2: Wellness Maintenance Protocol

This approach uses lower doses to provide ongoing metabolic support without strong appetite suppression. It is suited for individuals who are near their goal weight and focused on maintaining results, preventing regain, or supporting healthy aging, cardiovascular health, and longevity.

Think of this as consistent metabolic tuning — low-intensity support that keeps your metabolism functioning optimally over time.

YOUR SITUATION	SUGGESTED APPROACH
Significant weight loss goal (20+ lbs) or signs of insulin resistance	Full metabolic support protocol — discuss dosing with your provider
Near goal weight; focused on maintenance and preventing regain	Wellness maintenance protocol
Navigating perimenopause, menopause, or hormonal shifts	Either approach depending on symptoms — discuss with your provider
Focused on longevity, energy, inflammation reduction, or healthy aging	Wellness maintenance protocol

Choosing Between Available Medications

Two GLP-1 receptor agonists are most commonly used in clinical practice for metabolic support: semaglutide and tirzepatide. Your provider will guide this selection based on your health history, goals, and individual response, but a brief overview is helpful:

Semaglutide (GLP-1 receptor agonist)

- Acts on GLP-1 receptors only
- Well-established efficacy for blood sugar regulation and weight loss
- Average weight loss of approximately 15% in clinical trials
- Generally well tolerated; often used as a first-line option

Tirzepatide (dual GLP-1 and GIP receptor agonist)

- Acts on both GLP-1 and GIP receptors simultaneously
- Stronger appetite regulation and metabolic effects in many patients



CORE FUNCTION HEALTH

- Average weight loss of 20–25% in clinical trials
- May be better tolerated by some patients despite its greater potency

Section 3: Addressing Common Questions and Concerns

Is This a Shortcut or an Easy Way Out?

This question comes up frequently, and it deserves a direct answer. GLP-1 medications are prescription therapies approved and prescribed for metabolic disorders with a clear biological basis. Insulin resistance, disrupted hunger signaling, and hormonal dysregulation are not character flaws — they are physiological conditions.

We do not ask people with thyroid disorders whether they feel embarrassed about taking medication. We do not suggest that someone with elevated blood pressure is taking the easy way out when they accept treatment. The same logic applies here.

Choosing a clinically supported medical intervention for a recognized metabolic condition is not weakness. It is informed, evidence-based decision-making.

Will It Work for Me?

No treatment produces identical results in every person, and GLP-1 therapy is no exception. However, the clinical evidence is among the strongest in the history of obesity medicine. In large randomized controlled trials, GLP-1 receptor agonists produced 15–25% total body weight loss — results that far exceed what lifestyle intervention alone typically achieves.

The patients who tend to see the strongest outcomes are those who:

- **Start low and increase gradually:** rather than escalating doses too quickly, which is the most common driver of side effects
- **Maintain adequate protein intake:** consistently, even when appetite is reduced
- **Stay well hydrated:** particularly in the first several weeks of treatment
- **Build supportive lifestyle habits:** including regular movement and consistent sleep
- **Work with experienced clinical guidance:** rather than self-managing dosing decisions

What About Side Effects?



CORE FUNCTION HEALTH

Side effects are real and worth understanding clearly. The most common are gastrointestinal in nature and are almost always related to dose escalation that proceeds too quickly or inadequate nutrition and hydration. When managed correctly, the majority of patients find side effects mild and short-lived.

COMMON SIDE EFFECT	PRACTICAL MANAGEMENT
Nausea	Start at the lowest dose; eat small, bland meals; avoid greasy or spicy foods
Constipation	Increase fiber and fluid intake; add a magnesium supplement if needed
Fatigue (early)	Often resolves within 2–4 weeks; prioritize sleep and adequate caloric intake
Acid reflux	Eat smaller meals; avoid lying down after eating; discuss antacid options with provider
Reduced appetite	This is expected — ensure you still meet protein and nutrient targets daily

The single most important factor in managing side effects is patience with dose escalation. Your body needs time to adjust to each dose level before moving higher. Rushing this process is the primary reason people experience significant nausea or fatigue.

Is This a Long-Term Commitment?

This is an important question to discuss honestly with your provider. For many people, GLP-1 therapy is most effective as a medium-to-long-term support during an active phase of metabolic improvement — typically 12 to 24 months or longer, depending on goals and response.

Some individuals use it for a defined period while establishing new metabolic habits and then transition off with maintained results. Others find ongoing low-dose maintenance beneficial for sustained metabolic health. There is no single correct answer; your approach should be individualized based on your specific situation and goals.

Section 4: Practical Guidance for Getting Started

Preparing for Your First Several Weeks



CORE FUNCTION HEALTH

Beginning GLP-1 therapy is a meaningful step, and preparation can significantly improve your early experience. The first four to six weeks are an adjustment period in which your body adapts to altered hunger signals, slowed gastric motility, and shifting blood sugar patterns.

Hydration

Because GLP-1 medications slow gastric emptying and reduce the drive to eat and drink, dehydration is one of the most common and preventable contributors to side effects. Begin each morning with water before coffee, food, or your medication. Carry water consistently throughout the day.

Target: approximately half your body weight in fluid ounces daily. A 150-pound person should aim for roughly 75 fluid ounces.

Protein

Reduced appetite does not mean reduced nutritional need. Your muscles, organs, immune system, and hormones all depend on adequate protein regardless of how much or little you feel like eating. Protein also plays a direct role in preserving lean muscle mass during weight loss, which is critical for long-term metabolic health.

Target: a minimum of 25–30 grams of protein per meal. Do not skip meals entirely even when not hungry — eat smaller portions focused on protein-dense foods.

Practical protein strategies:

- Greek yogurt, cottage cheese, eggs, and lean poultry are easy, high-protein options that are gentle on digestion
- A high-quality protein powder can be blended into smoothies or stirred into oatmeal when appetite is reduced
- Prepare protein sources in advance so eating well requires minimal decision-making when appetite is low

Meal Composition

With slowed gastric emptying, the types of foods you eat matter more than usual. Heavy, greasy, very fatty, or highly processed meals are much more likely to cause nausea and discomfort. Focus on foods that are relatively easy to digest, particularly in the first several weeks.



CORE FUNCTION HEALTH

Think: lean protein, cooked vegetables, whole grains in modest portions, and fresh fruit. Avoid large volumes at any one sitting. Smaller, more frequent meals are generally better tolerated early on.

Movement

Physical activity is not required for GLP-1 therapy to work, but it meaningfully amplifies the results. Resistance training in particular helps preserve and build lean muscle during a period of caloric reduction, which protects your metabolism. Even modest daily movement — walking after meals, bodyweight exercises, or cycling — has measurable benefits on blood sugar regulation and cardiovascular health.

Consistency matters far more than intensity, especially in the early weeks. Start with what is sustainable.

Sleep and Stress

Cortisol, the body's primary stress hormone, directly impairs insulin sensitivity and drives hunger and cravings. Sleep deprivation has a similar effect. Both factors can work against the progress GLP-1 therapy is trying to support. Addressing sleep quality and stress management is not optional — it is part of the metabolic picture.

Diaphragmatic breathing, consistent sleep schedules, and deliberate downtime are not soft lifestyle suggestions. They are physiological interventions that affect the same hormonal pathways your medication is targeting.

Section 5: Tracking Progress Beyond the Scale

The scale is one data point. It is not the whole picture, and it is often a poor short-term indicator of real progress when metabolic remodeling is occurring.

Here is what we encourage patients to track alongside weight:

- **Energy levels:** Note how your energy feels throughout the day — particularly whether the afternoon energy crashes or mid-morning fatigue that often accompany blood sugar dysregulation begin to stabilize.



CORE FUNCTION HEALTH

- **Sleep quality:** Improvements in sleep are often reported early in GLP-1 therapy, partly due to improved blood sugar regulation overnight.
- **Hunger and cravings:** Track the frequency and intensity of food cravings and urges to snack. A significant reduction in 'food noise' is one of the most commonly reported early effects.
- **Physical measurements:** Waist, hip, and thigh circumference often change before scale weight moves significantly, particularly when muscle is being preserved or built alongside fat loss.
- **Laboratory markers:** If accessible, periodic blood work including fasting glucose, HbA1c, triglycerides, and inflammatory markers provides the most objective picture of metabolic improvement.
- **Mood and mental clarity:** Many patients report improvements in cognitive focus and emotional stability as blood sugar regulation improves. These are real and measurable benefits.

A note on plateaus:

Weight loss with GLP-1 therapy is not always linear. Periods of slower progress are normal and do not indicate failure. Metabolic adaptation, hormonal fluctuations, and changes in body composition (gaining muscle while losing fat) can all produce scale results that do not reflect actual progress. Trust the process, continue the habits, and assess progress across multiple metrics.

Section 6: Mindset and Long-Term Success

This Is a Tool, Not a Cure

GLP-1 therapy creates a biological window of opportunity. During that window, hunger is regulated, blood sugar is more stable, and the mental bandwidth previously consumed by food preoccupation becomes available for building habits that will sustain your results long after any medication.

The patients who maintain their results most effectively are those who use this window deliberately — establishing consistent movement practices, building a nourishing and sustainable way of eating, addressing sleep and stress, and developing a relationship with their body that is rooted in function rather than restriction.

Expectations and Patience



CORE FUNCTION HEALTH

Meaningful metabolic change takes time. Most patients begin to notice appetite changes within the first one to two weeks. Visible physical changes typically become more apparent between weeks four and twelve. Significant laboratory marker improvements often emerge over three to six months.

The most common reason people feel frustrated early is expecting faster results than the biology allows. Trust the timeline. The slower, more gradual approach is both safer and more durable.

Journal Reflection: Your Reasons and Your Vision

Before beginning — or as you continue — take time to reflect on the following questions. Writing your answers down gives them weight and creates something you can return to when the process feels slow or difficult.

Reflection prompts:

What has my relationship with my body and my weight cost me over the years?

What does my life look like six months from now if this works?

What daily habits, beyond medication, do I want this period to help me establish?

What does feeling genuinely well in my body mean to me?

Your answers:

Quick Reference: Your First 30 Days



CORE FUNCTION HEALTH

WEEK	PRIMARY FOCUS
Week 1	Establish your hydration routine. Begin medication at lowest dose. Focus on protein at every meal. Move gently daily.
Week 2	Monitor how fullness signals are shifting. Continue building protein habits. Note energy, sleep, and craving changes.
Weeks 3–4	Begin to notice appetite changes more consistently. Assess digestion and side effects. Keep portions moderate and food choices clean.
Weeks 5–8	Review progress across multiple metrics. Discuss dose adjustment with provider if appropriate. Deepen movement and sleep habits.
Days 1–30 overall	Build the foundation — consistency over perfection. Document what you are learning about your body.

Working with Core Function Health

Beginning GLP-1 therapy is a significant decision, and it deserves the same level of clinical oversight as any other meaningful medical intervention. At Core Function Health, we provide individualized provider-guided protocols that are calibrated to your specific health history, goals, and response.

Our approach integrates medication with nutrition guidance, lifestyle support, and ongoing clinical monitoring — because we know that the medication works best as part of a comprehensive, patient-centered plan.

What working with us includes:

- Licensed provider consultation and ongoing clinical oversight
- Personalized dosing protocol and adjustment guidance
- Nutritional recommendations tailored to your medication and goals
- Regular check-ins and progress monitoring
- Access to educational resources and patient support

Disclaimer



CORE FUNCTION HEALTH

The information in this guide is intended for educational purposes and does not constitute medical advice, diagnosis, or a treatment plan. GLP-1 medications are prescription therapies that require clinical evaluation and ongoing provider oversight. Individual results vary. All medication decisions should be made in consultation with a qualified healthcare provider who has reviewed your complete health history.



Core Function Health

Functional medicine-informed care for lasting results.