HSD34

Tirzepatide prescribing in England: findings following the rollout to primary care

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Background

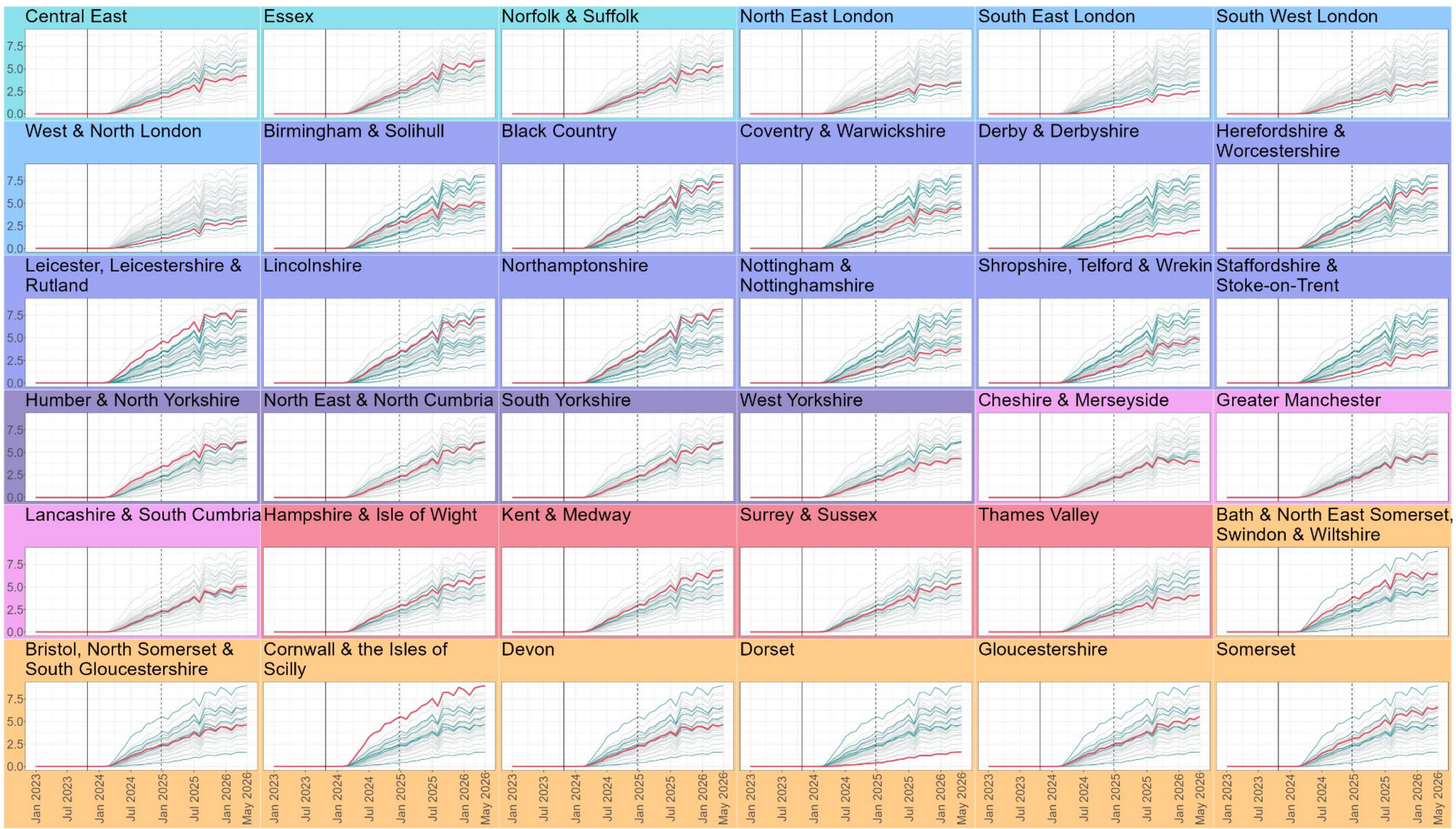
- GLP-1/GIP products, such as **tirzepatide** (Mounjaro®**)** have received substantial public attention due to their effectiveness in promoting **weight loss**.
- The **high demand** for these medications has led to concerns over the ability of the NHS to manage demand for weight-loss drugs
- This original research investigated the rollout of **tirzepatide,** via Integrated Care Boards (ICBs), across all general practices in England

Aims

Using data from **OpenPrescribing** we aimed to describe how tirzepatide prescribing by General Practitioners in England has changed over time, and how it varies across ICBs.

Methods

- We conducted an observational descriptive study using prescribing data from **all NHS general practices in England** between **January 2023** and **May 2026**.
- We analysed monthly time trends of prescribing for tirzepatide



Results

- We found substantial variation in the prescribing rate both within and across ICBs. The prescribing rate of tirzepatide across ICBs in **May 2026** ranged from **1.6 per 1,000 patients** (NHS Dorset) to **8.97 per 1,000 patients** (NHS Cornwall and the Isles of Scilly).
- We also found **variation** in the timing of the **first prescription across ICBs** (February 2024 to April 2024).

Conclusions

- These differences in the ability of ICBs to manage demand may be an important factor in **inequity of access**.
- This provides a case study of the **phased rollout of tirzepatide**, for which **ICBs** were legally responsible.
- Understanding variation across and within ICBs has important implications for the future rollout of similar obesity drugs
- To our knowledge this is the **largest use of real-world evidence** to identify the use of tirzepatide prescribing in primary care in England.