Weight-loss drug boom risks leaving poorer countries behind, study finds

Drugmakers are prioritising wealthy countries for sales of their GLP-1 drugs, despite significant global demand.



Sales of drugs such as Novo's Ozempic, pictured, and Wegovy, or Eli Lilly's Mounjaro and Foundayo have been focused in wealthier countries, says the report. | Joel Saget/AFP via Getty Images

by **Emma Pirnay** • NOV 10 • 3 MINUTES READ

Big pharmaceutical companies are ramping up investment in novel drugs for diabetes and weight loss, but lower-income countries aren't reaping the benefits, a study found.

So-called GLP-1 medicines — such as Novo's Ozempic and Wegovy or Eli Lilly's Mounjaro and Foundayo — have been launched in wealthier countries, yet companies' efforts to expand availability in poorer countries have been "limited and uneven," with most initiatives concentrated in middle-income markets, the Dutch nonprofit Access to Medicine Foundation found.

The figures come as Danish pharma Novo reported that sales of its GLP-1 obesity drugs jumped nearly a quarter in the third quarter of this year, compared with the same period last year. Meanwhile, sales are concentrated in wealthier countries, with the U.S. alone accounting for 61% of diabetes GLP-1 sales and 58% for obesity drugs.

Since chronic diseases like diabetes are "commercially attractive assets for companies … they tend to prioritize launching them in high-income markets," Moy Bracken, head of research at the foundation, said. That means people in lower-income countries "may have to wait for years for new medicines to reach the market, if at all."

The nonprofit looked at 25 research and development projects in diabetes across six companies — Lilly, Novo, AstraZeneca, Roche, Gilead and Sanofi. It found they have mainly focused on developing GLP-1 drugs, which mimic a hormone that triggers feelings of fullness, or other newer, hormone-based medicines. This narrow drug-development focus could have a knock-on effect on access to a more established staple: insulin, the nonprofit said.

"We also need to make sure that the focus on these newer treatments doesn't mean that essential medicines like insulin get left behind. GLP-1s can reduce the need for insulin for some people with type 2 diabetes, but they cannot replace it," said the nonprofit's research director, Claudia Martinez.

The figures come as companies face upcoming competition from cheaper, generic versions of GLP-1 drugs as patents begin to expire. Swiss generic and biosimilars

company Sandoz recently announced the launch of its own semaglutide — the active ingredient in Ozempic — in Brazil.

Companies are also investing heavily in developing new pill versions of the injectable treatments, which Novo CEO Maziar Mike Doustdar recently said he hopes will capture 50% of the weight-loss drug market by 2030.

While the move could expand access in lower-income countries because it requires less cold-chain storage and distribution, "a pill alone does not guarantee better access," said Martinez.

She added that it largely depends on whether companies plan for access early in a product's pipeline, including affordable pricing, reliable supply and timely registration in those countries.

Around 589 million adults are affected by diabetes globally, with 81% living in low- and middle-income countries. Around 1.1 billion people worldwide live with obesity.

The World Health Organization chief, Tedros Adhanom Ghebreyesus, recently urged companies to expand access to GLP-1s by lowering prices and increasing production.

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