## ACGNG Nutritional Supplementation Guide for GLP-1 Users

### Introduction

GLP-1 receptor agonist medications have shown strong clinical benefits for weight loss and blood sugar control, but they often suppress appetite and reduce food volume. This leads many individuals to consume fewer calories—and by extension, fewer nutrients—over time.

**Supplementation is not a substitute for a balanced diet**. However, in the context of reduced appetite and intake, it serves as a **critical safety net** to help prevent nutrient deficiencies, support energy levels, reduce common side effects, and sustain wellness during GLP-1 therapy.

This guide outlines evidence-based recommendations for **vitamins**, **minerals**, **and supportive nutrients** that can complement your diet and help maintain nutritional adequacy while using GLP-1 medications.

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## 1. Why Supplementation Is Needed

GLP-1 therapies (e.g., semaglutide, liraglutide, tirzepatide) can cause:

- Appetite suppression and reduced food intake
- Delayed gastric emptying, affecting nutrient absorption
- Increased risk of deficiencies (especially B12, folate, vitamin D, magnesium)
- Digestive side effects like nausea or constipation

Supplementation helps safeguard nutritional health throughout treatment.



# 2. Key Nutrients to Monitor

Nutrient	Why It Matters
Vitamin B12	Nerve function, energy, and red blood cell formation
Vitamin D3	Bone health, immunity, mood regulation
Iron	Prevents anemia and fatigue
Folate (5-MTHF)	Critical for metabolism and DNA repair
Magnesium	Supports digestion, muscle, and nerve function
Zinc & Selenium	Important for immune and thyroid health
Calcium	Essential for bones and weight maintenance
B1, B6, Biotin	Energy metabolism and nervous system support
Probiotics & Enzymes	May improve digestion and reduce GI discomfort

## 3. Recommended Daily Intake Ranges

Nutrient	Daily Target Range (for GLP-1 Users)*
Vitamin A (Retinyl/Beta)	900-1500 mcg RAE
Vitamin C	300-1000 mg
Vitamin D3	25-75 mcg (1000-3000 IU)
Vitamin E	15–30 mg
Vitamin K1	60-120 mcg
Thiamine (B1)	10–25 mg
Riboflavin (B2)	5–20 mg
Niacin (B3)	20-50 mg
Vitamin B6	10-50 mg
Folate (5-MTHF)	400-800 mcg DFE
Vitamin B12	100-500 mcg
Biotin	300-1000 mcg
Pantothenic Acid (B5)	10-50 mg
Calcium	250–500 mg (in divided doses)
Magnesium	200-400 mg
Zinc	8–25 mg
Selenium	55-200 mcg
Copper	0.9–2 mg
Manganese	1.8–5 mg
lodine	150 mcg
Molybdenum	45 mcg
Ashwagandha**	100-300 mg
Black Pepper Extract**	5–10 mg
Probiotics	1-10 billion CFU
Digestive Enzymes**	50-250 mg

<sup>\*</sup>Based on NIH, ODS, ASMBS, and clinical data

<sup>\*\*</sup>Optional supportive additions



### 4. Ingredient Justification (Why Each Nutrient Matters)

- **B-Vitamins**: Energy production, mood regulation, and prevention of fatigue
- Vitamin D3: Linked to reduced inflammation and improved insulin sensitivity
- Calcium & Magnesium: Foundational for skeletal and cardiovascular health
- Zinc & Selenium: Key antioxidants that support immune response
- Probiotics & Enzymes: May alleviate common GI symptoms associated with GLP-1 medications
- Ashwagandha & Ginger (optional): May aid stress management and gut comfort (use under supervision)

## 5. Summary Chart of Core Nutrients

Category	Nutrients
Essential Vitamins	A, B1, B2, B3, B5, B6, B12, C, D3, E, K1, Folate
Core Minerals	Calcium, Magnesium, Zinc, Selenium, Copper, Iodine, Manganese, Molybdenum
GI Support	Digestive enzymes (e.g., bromelain), probiotics (Lactobacillus strains)
Botanical Support	Ginger root, Ashwagandha, Black Pepper Extract (BioPerine®)

### 6. References

- 1. American Society for Metabolic and Bariatric Surgery (ASMBS). Integrated Health Nutritional Guidelines. 2020.
- 2. National Institutes of Health (NIH) Office of Dietary Supplements. Micronutrient Fact Sheets.
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- 4. Holst JJ. "The physiology of glucagon-like peptide 1." Physiol Rev. 2007.
- 5. Kushner RF, et al. "Obesity Management with GLP-1 Receptor Agonists." J Clin Endocrinol Metab. 2020.



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#### 7. Disclaimer

This guide is for **educational purposes only**. It does not replace medical advice or diagnosis. Always consult with a licensed healthcare provider before starting or changing any supplement routine. The American Center for GLP-1 Nutritional Guidance **does not endorse any specific brand or product**, and recommendations are made based on clinical research and public health guidelines only.

