Cancer Prevention: Weighing In on Weight Loss Shots

Matthew Lunning, DO, FACP University of Nebraska Medical Center April 2025



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Disclosures

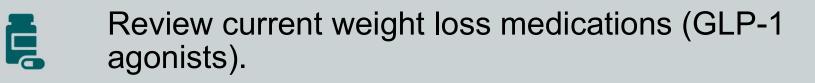


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Learning Objectives



Understand the relationship between obesity and cancer risk.



Evaluate evidence linking weight loss shots to cancer prevention.



Discuss ethical and clinical implications of widespread use.



Modifiable Risk Factors





Modifiable Risk Factors

Lifestyle Factor	Associated Cancer(s)	Approximate OR Range
Smoking	Lung, bladder, esophagus, head & neck	10–30+
Alcohol	Liver, oral, esophagus, breast	1.5–5
Obesity	Breast, endometrial, colorectal, kidney	1.2–2.5
UV Exposure	Melanoma, squamous/basal cell skin cancer	2–4
HPV (sexual behavior)	Cervical, anal, oropharyngeal	5–100 (varies by subtype)



Defining Obesity



BMI

Measure of weight in relation to height (kg/m²)

VISCERAL FAT

Excess body fat stored within the abdominal cavity

BODY COMPOSITION

Proportion of fat mass to lean mass

Excess body fat that impairs health



Obesity and Cancer



Chronic Inflammation

Excess adipose tissue promotes a pro-inflammatory state



Hyperinsulinemia

Increased insulin and IGFF-1 levels stimulate cell growth



Increased Estrogen

Aromatase in fat tissue covnverts androgens to estrogens



Adipokine Imbalance

Low adiponectin and high leptin affect cell proliferation



Altered Gut Microbiome

Obesity-associated dysbiosis may increase carcinogens

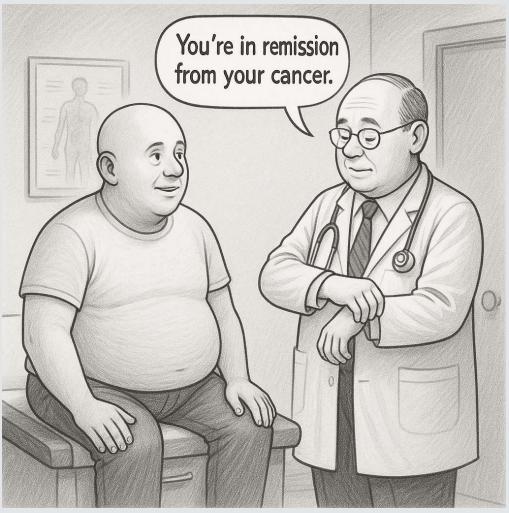


Does Obesity Matter





Does This Now Matter



But.....Worse Disease-Free Survival

Meyerhardt JA et al., JNCI, 2004



Treatment Landscape



Lifestyle: Diet and exercise



Pharmacologic: GLP-1s, SGLT2s, others



Surgical: Bariatric procedures



Gila Monster & My Dad





Proliferation of GLP-1





Proliferation of GLP-1





GLP-1 Shaming

Impact	Description	
Underreporting to physicians	Patients may avoid disclosing off-label or self-managed use of GLP-1s.	
Reduced adherence	Embarrassment or stigma may cause early discontinuation.	
Unsafe use	People might obtain medication without proper oversight, labs, or dose titration.	
Delayed follow-up	Fear of being judged may prevent timely checkups or monitoring for side effects.	



Prevention of Return



Data Generating Phase

TRIM-EBC Trial

Objective: Investigate whether tirzepatide, a GIP/GLP-1 RA, can reduce breast cancer recurrence by lowering or clearing circulating tumor DNA (ctDNA) in overweight or obese patients.

•**Design**: Patients with early-stage breast cancer and detectable ctDNA receive tirzepatide for 24 months.

•Significance: This is among the first trials to directly assess a GLP-1 RA's impact on cancer recurrence using ctDNA as a biomarker.

White Health News

Data Generating Phase

Memorial Sloan Kettering Breast Cancer Cohort Study

•**Objective**: Evaluate weight loss outcomes in breast cancer patients prescribed GLP-1 RAs.

•Findings: Among 75 patients, an average weight loss of 5% was observed, with longer treatment durations correlating with greater weight loss.

•Implications: While weight loss was achieved, further research is needed to determine the effect on cancer recurrence.



Data Generating Phase

Northwestern Medicine Retrospective Study

•**Objective**: Assess associations between GLP-1 inhibitor use, cancer recurrence, and all-cause mortality among cancer survivors.

•Findings: GLP-1 inhibitor use was linked to a significant reduction in all-cause mortality (HR 0.36) among cancer survivors, though no significant association with cancer recurrence was found.

GLP-1 Inhibitor Cancer Concerns

Thyroid C-cell Tumors (Rodent Studies)

- •All GLP-1 RAs carry a **black box warning** for:
 - "Risk of thyroid C-cell tumors, including medullary thyroid carcinoma (MTC)"
- No proven link in humans

Contraindicated in:

•Personal or family history of **Medullary Thyroid** Cancer (MTC)

 History of MEN2 (Multiple Endocrine Neoplasia Type 2)



Multi-pronged Approach



Key Takeaways

- Obesity increases cancer risk.
- GLP-1s offer effective weight loss.
- Cancer prevention is plausible, but the evidence is early.
- Clinical trials looking at a reduction of cancer recurrence are ongoing in "high-risk cancers."

