

Retatrutide

Patient Education Guide — What It Does, Why a Physician Would Prescribe It, and What the Evidence Says

NJ Weight Loss & Preventive Care Clinics PA · 420 Route 46 East Fairfield NJ 07004 & 1605 E Evesham Road Voorhees NJ 08043 · (908) 598-0509 · jbock@njweightloss.us · njweightloss.us

Important Disclaimer

This information is not medical advice and is provided only to help begin your research. All clinical and dosing decisions must be made with a licensed, experienced physician and a licensed, experienced compounding pharmacist, supported by published clinical studies. This material was compiled using Artificial Intelligence, statements from videos and websites by apparent qualified professionals, and available published research. Anyone starting a medication they have never taken before should take an extremely conservative approach. We are not affiliated with any of the doctors whose videos are referenced below.

Retatrutide

Investigational

Compounded

Category: Triple GLP-1/GIP/Glucagon Receptor Agonist — Weight Management

How it works. Retatrutide is a triple receptor agonist that adds a third target—the glucagon receptor—to the GLP-1 and GIP activation of tirzepatide. Glucagon activation directly increases energy expenditure through hepatic and possibly brown-adipose-tissue mechanisms. In plain English: your body burns more calories at rest, in addition to eating less. That is the theoretical basis for the dramatic weight-loss results seen in early trials.

Regulatory status. Retatrutide is not yet FDA-approved. According to the manufacturer Eli Lilly, **FDA approval is likely in early 2027**. It remains investigational.

Research thoroughly and try various other medications prior to starting medications that are not yet FDA approved.

Discuss with your primary care physician before starting.

Side effects worth naming. Beyond the usual GLP-1 class effects (nausea, vomiting, constipation, fatigue), Phase 2 data flagged an unusual side effect called dysesthesia—abnormal skin sensations, including tingling or burning, particularly at higher doses. Heart-rate increases have been observed. Pancreatitis, gallbladder, thyroid, and MEN-2 class cautions all apply.

FDA / Phase 3 Status: Retatrutide appears likely to receive FDA-approval in early 2027; it has progressed through Phase 1, Phase 2 and now Phase 3 testing, with Lilly planning an FDA submission in early 2027. The published early trials enrolled 691 patients and showed up to 24.2% average weight loss at 48 weeks, substantial HbA1c reductions in patients with diabetes, and mainly gastrointestinal side effects. The larger Phase 3 obesity and diabetes programs enrolled more than 7,850 additional participants, bringing cumulative enrollment to approximately 8,500 patients; Phase 3 results have reported weight loss approaching 30% in some groups, but FDA review of the complete efficacy, manufacturing and safety data must occur before approval. (Eli Lilly and Company)

Key Studies:

- Jastreboff AM, et al. "Triple-Hormone-Receptor Agonist Retatrutide for Obesity — A Phase 2 Trial." *N Engl J Med*. 2023;389(6):514-26.
- Rosenstock J, et al. "Retatrutide for people with type 2 diabetes." *Lancet*. 2023;402(10401):529-44.

Recommended Videos (educational, independent sources)

► **Dr. Ashley Froese — This Is Not Covered** — Dr. Explains Why Retatrutide is KING of Fat Loss Peptides

<https://www.youtube.com/watch?v=ukCySPXN0WU>

► **Doctor Michael Mueller** — Retatrutide Benefits Shock Medical Community (Official Release Date)

<https://www.youtube.com/watch?v=ZUwNaCftplY>

► **Dr. Jones, DC** — Everything You Need To Know About Retatrutide in 2026 (WATCH BEFORE TAKING)

https://www.youtube.com/watch?v=KsLP8L_2zb8

