Dietitians Australia

Joint Statement on multidisciplinary models of care for GLP-1 medications

Dietitians Australia (DA) and Exercise & Sports Science Australia (ESSA) are calling for integrated, multidisciplinary models of care from Accredited Practising Dietitians (APDs) and Accredited Exercise Physiologists (AEPs) to accompany prescription of GLP-1 medications.

We have made a joint submission to the Pharmaceutical Benefits Advisory Committee (PBAC), recommending the PBAC:

- Advise the government that PBS-subsidised GLP-1 treatments be accompanied by funded, voluntary referral pathways to Accredited Practising Dietitians and Accredited Exercise Physiologists during treatment and following dose reduction or cessation
- Refer the need for complementary Medicare funding to the Australian Government, including up to 12 funded APD and AEP services in the first year of GLP-1 treatment, with ongoing access in later years during treatment and following dose reduction or cessation
- Recommend that post-listing evaluation by the government includes nutrition status, muscle strength and physical function alongside weight loss and cardiovascular outcomes.

Under Medicare, people with a chronic condition can get up to five allied health visits a year through a GP chronic condition management plan. Those five visits are shared across every allied health profession, including exercise physiology and dietetics. That is not enough for someone who needs regular care from both an Accredited Practising Dietitian and an Accredited Exercise Physiologist during treatment.

GLP-1 medications reduce appetite and food intake, which makes it harder to get enough protein, vitamins and minerals. Evidence shows that the substantial weight loss associated with GLP-1 medications can have unintended effects, including nutrient deficiencies, lean tissue loss, function loss, and an increased risk of frailty and falls. Left unmanaged, these can harm health and add avoidable costs to the health system.

"Maintaining muscle mass plays a critical role in strength, mobility, and metabolic health," said Katie Lyndon, ESSA's CEO and Accredited Exercise Physiologist.

"These medicines change how much people eat. An Accredited Practising Dietitian makes sure what they do eat still gives them the protein, vitamins and minerals they need to stay well," said Magriet Raxworthy, CEO of Dietitians Australia.

Accredited Practising Dietitians and Accredited Exercise Physiologists are uniquely trained to address the adverse outcomes associated with GLP-1 medications and provide complementary services.

Accredited Exercise Physiologists deliver individually prescribed exercise interventions that protect muscle strength, physical function, and psychological wellbeing, while Accredited Practising Dietitians provide medical nutrition therapy that supports dietary adequacy and preservation of lean tissue.

"For those living with chronic disease or obesity, the rapid lean tissue loss associated with GLP-1s may lead to frailty, functional decline, and falls, increasing the demand for primary care and hospital services," Ms Lyndon said.

"This is why multidisciplinary allied health care from Accredited Exercise Physiologists and Accredited Practising Dietitians should be available to everyone prescribed GLP-1s," she said.

"Most people won't take these medicines forever. An Accredited Practising Dietitian helps them build eating habits they can keep when the medicine stops," Ms Raxworthy said.

We are asking the PBAC to recommend to the Government that Australians accessing GLP-1

medications also have access to the wraparound healthcare needed to protect their long-term health.

Read the submission

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