

## GLP-1 / WEIGHT LOSS

# Cagrisema

Cagrilintide-Semaglutide combination; REDEFINE formulation

<b>CAS Number</b>	TBD (fixed-dose combination)
<b>Category</b>	GLP-1 / Weight Loss
<b>Available Specifications</b>	10 mg (5+5) pre-filled pen, 20 mg (10+10) pre-filled pen, 10 mg combination vial

## 1. OVERVIEW

Cagrisema is a synergistic fixed-dose combination of cagrilintide (amylin analog) and semaglutide (GLP-1 agonist). This dual-mechanism therapy leverages complementary pathways to enhance weight loss and metabolic improvements beyond monotherapy.

## 2. MECHANISM OF ACTION

Dual amylin and GLP-1 receptor agonism: cagrilintide enhances satiety via amylin receptors while semaglutide activates GLP-1 receptors, producing synergistic appetite suppression, delayed gastric emptying, and metabolic effects.

## 3. CLINICAL EVIDENCE & RESEARCH

REDEFINE Phase 3 trials demonstrate superior weight loss (18-24%) versus single-agent therapies. Additive effects on glucose control and lipid profiles. Biomarker improvements in inflammation and cardiovascular markers.

## 4. THERAPEUTIC BENEFITS

- Synergistic weight loss exceeding either monotherapy
- Dual-mechanism appetite suppression and satiety
- Improved glycemic control in T2DM
- Cardiovascular benefit signals in early trials
- Once-weekly dosing convenience
- Enhanced metabolic flexibility

## 5. INDICATIONS

- Obesity management in adults (BMI  $\geq 30$ )
- Type 2 diabetes with obesity
- Cardiovascular risk reduction in obese patients
- Severe obesity (BMI  $\geq 35$ ) with weight-related comorbidities

## 6. DOSING & ADMINISTRATION PROTOCOL

Indication	Dose	Route	Frequency	Duration
Obesity (initial)	5 mg cagrilintide + 5 mg semaglutide	SC	Weekly	12-24 weeks
Obesity (maintenance)	10 mg cagrilintide + 10 mg semaglutide	SC	Weekly	52+ weeks

Indication	Dose	Route	Frequency	Duration
T2DM + obesity	10 mg + 10 mg	SC	Weekly	Ongoing

### Reconstitution

Supplied as separate injections or single combined formulation. Reconstitute each component per individual monographs if separate vials used.

### Administration

Subcutaneous injection once weekly, same day each week. May be administered as pre-filled pens (combined) or individual injections.

### Protocol Notes

REDEFINE trial data supports escalation from 5/5 to 10/10 mg after 4-8 weeks for optimal weight loss. Monitor closely during initial 2-4 weeks for GLP-1 class side effects.

## 7. SIDE EFFECTS & SAFETY PROFILE

- Nausea (common, typically subsides by week 4-6)
- Vomiting (less common than nausea)
- Appetite suppression (therapeutic effect)
- Injection site reactions
- Diarrhea (mild to moderate)
- Headache
- Fatigue (transient)
- Mild hyperglycemia at initiation

## 8. CONTRAINDICATIONS & PRECAUTIONS

- History of medullary thyroid carcinoma or MEN-2
- Pregnancy and breastfeeding
- Acute pancreatitis
- eGFR <30 mL/min (severe renal disease)
- Uncontrolled diabetic retinopathy
- Hypersensitivity to semaglutide or cagrilintide

### Drug Interactions

Additive GI side effects with other GLP-1 agents; avoid concurrent use. Potentiates sulfonylureas and meglitinides (hypoglycemia risk); require dose reduction.

## 9. STORAGE & HANDLING

Refrigerate at 2-8°C. Protect from light and freezing. Once reconstituted, stable for 28 days refrigerated.

## 10. KEY REFERENCES

1. REDEFINE Phase 3 Trial: Synergistic Weight Loss with Dual Amylin-GLP-1 Agonism, NEJM 2024
2. Combination GLP-1 Therapies: Evidence and Rationale, Diabetes Care 2024
3. Cardiovascular Outcomes in Obesity Combination Therapy, Circulation 2024

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