**Transcript Details**
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Incretin-Based Advances in Obesity and T2D Care

**Announcer:**
This is *Diabetes Discourse* on ReachMD. On this episode, Dr. Javier Morales will share insights on emerging incretin-based therapies for patients with type 2 diabetes and obesity, a topic he also discussed at the 2026 American Diabetes Association Scientific Sessions. Dr. Morales is an Associate Clinical Professor of Medicine at the Barbara and Donald Zucker School of Medicine at Hofstra University and Northwell Health. Let's hear from him now.

**Dr. Morales:**
When we're looking at incretin-based hormones, GLP-1 ends up being the cornerstone. But there's a lot of different players that are involved. You have GIP. As we know, tirzepatide is a GLP-1 and GIP co-agonist, although it's based on the structure of GIP. We also have amylin, which is another peptide hormone that's also responsible for benefits on weight. And then you have glucagon. And glucagon is an interesting peptide because this actually leads to glycogenolysis and gluconeogenesis to some degree or another, but more so glycogenolysis. So in some of the rodent data that we've seen, it actually may help to rev up metabolism, although I'm unaware of any data with humans demonstrating that. But nonetheless, they actually show significant promise with respect to weight loss.

There was a whole study based on a drug called survodutide called SYNCHRONIZE. Now, when we're looking at the survodutide doses that were explored, they looked at 3.6 milligrams or 6 milligrams once weekly. And that makes it a little bit easier, again, because it's in that once-weekly paradigm. So the SYNCHRONIZE-1 trial really enrolled patients with obesity or who are overweight with comorbidities in the absence of type 2 diabetes. And in this phase III trial, we did see about a 16.6 percent reduction in body weight at about 76 weeks, compared to 3.2 percent with the placebo.

Now, in patients with type 2 diabetes, the weight loss is not as robust with these agents, and we've known this with all of these other incretin-based therapies. So there is a SYNCHRONIZE-2 trial that has been reported, and then there's also a dedicated cardiovascular outcomes study that's underway right now called SYNCHRONIZE-CVOT. So we're holding steady for those results. But nonetheless, this is an agent that will be available in the marketplace.

A new agent that also will be coming to the marketplace soon is the triagonist. So now that I spoke a little bit about glucagon, how about looking at GLP-1, GIP, and glucagon all in one? So this is an interesting compound called retatrutide. And retatrutide did demonstrate even greater weight loss compared to using two incretin-based therapies.

So as we progress in the management of diabetes and obesity—and again, they're hand-in-hand—we are now approaching, ever closer than before, weight loss that's achievable with bariatric surgery and with cardiovascular benefit.

**Announcer:**
That was Dr. Javier Morales discussing hot topics in diabetes care. To access this and other episodes in this series, visit *Diabetes Discourse* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!