KAM

FEEDING THE GLP-1 GENERATION

WHY DIET DRUGS MATTER FOR HOSPITALITY

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UNLESS OTHERWISE SOURCED, DATA IN THIS REPORT IS BASED ON FEEDBACK FROM A NATIONALLY REPRESENTATIVE SAMPLE OF 500 UK ADULTS AND INCLUDES A SURVEY WITH 90 GLP-1 USERS COMMISSIONED BY KAM INSIGHT

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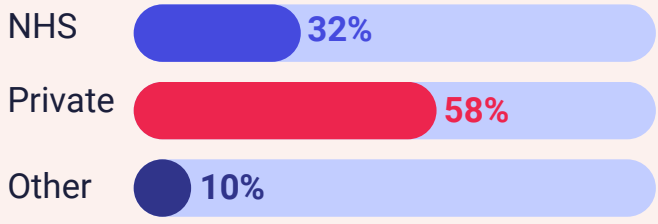
What are GLP-1 Drugs?

A new wave of weight loss drugs is reshaping how the UK thinks about health, eating out, and even the drinks we order.

Once reserved for diabetes care, GLP-1 medicines like Wegovy and Mounjaro are now in the headlines - and in handbags - across the UK. They've been hailed as game-changers for tackling obesity, but they're also sparking big conversations about cost, access, side effects and how they might reshape industries from food retail to hospitality.

Whether obtained via the NHS or privately, GLP-1 medications are becoming an established part of weight management and diabetes care. Their impact is likely to extend beyond clinical use, influencing areas such as consumer behaviour and service provision.

Proportion of users who access GLP-1 drugs via the following prescriptions:



Are they effective?

Yes — but results vary.

Studies show **Wegovy users lost around 14%** (1) of their body weight over 72 weeks, while **Mounjaro users lost about 20%** (1) in the same period. Results vary based on adherence, lifestyle and starting weight (2). The catch? You have to keep taking the drug to maintain results, and side effects (like nausea or digestive issues) can be common (3).

(1) NEJM: Tirzepatide as Compared with Semaglutide for the Treatment of Obesity, 2025.
(2) PubMed: Weight regain and cardiometabolic effects after withdrawal of semaglutide: The STEP 1 trial extension, 2022
(3) NEJM: Trial Finds Semaglutide With Lifestyle Intervention Reduces Body Weight by Nearly 15%, 2021

How do they work?

- Feel full for longer
- Digestion slows down
- Appetite shrinks
- Blood sugar kept steady

GLP-1 (glucagon-like peptide-1) medicines mimic a natural hormone your body releases after eating. The result? You feel fuller for longer, digestion slows down, your appetite shrinks, and your blood sugar stays steadier. This combination makes you less hungry and less likely to overeat. (1)

In a country like the UK, where over one in four adults lives with obesity (2) and the associated costs to the NHS run into the billions (3), these drugs represent a potential shift in how we think about public health. The government is already exploring the idea of prescribing them to unemployed individuals living with obesity, as a possible lever for wider societal change (4).

Semaglutide

The most well-known is semaglutide (found in ***Wegovy***, ***Ozempic***, and ***Rybelsus***), which works solely on the GLP-1 pathway, boosting insulin release, lowering glucagon (a hormone that raises blood sugar) and reducing appetite. (5)

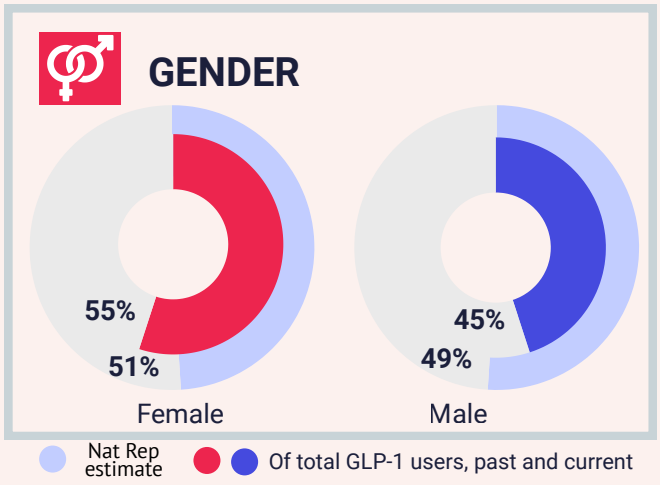
Tirzepatide

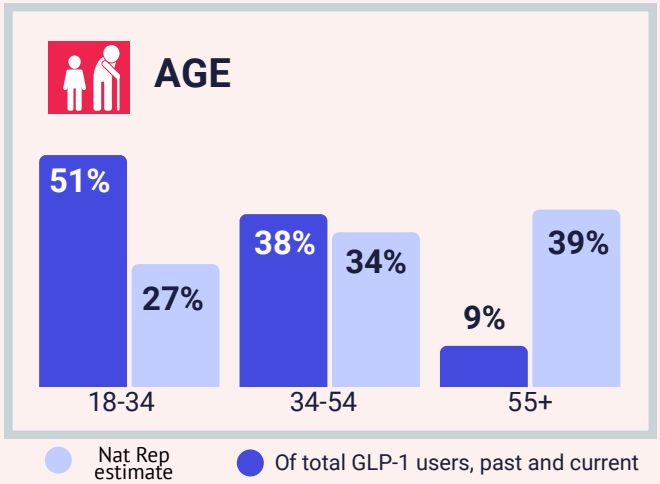
Tirzepatide, found in Mounjaro and Zepbound, is a dual agonist that targets both GLP-1 and GIP hormones, enhancing appetite and blood sugar control. This dual action may lead to greater weight loss compared to GLP-1-only drugs. (5)

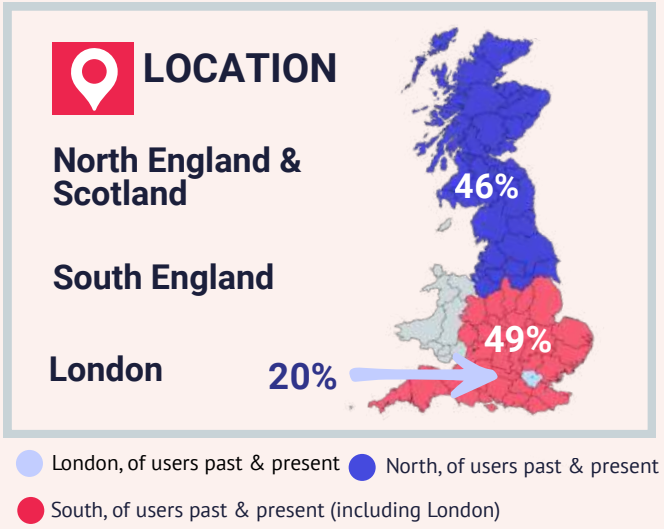
"I find it has three big changes for me - significantly reduced appetite, feeling full very quickly and I only want light and healthy food, anything fatty, oily or with animal protein gives me the ick!"
Find out more here

(1) Science Direct: GLP-1-based medications: Mechanisms involved in obesity treatment, 2025
(2) Gov.uk: Obesity profile: short statistical commentary, May 2025
(3) nesta.org: The economic and productivity costs of obesity and excess weight in the UK, 2025
(4) Diabetes.co.uk: Unemployed could receive weight-loss jabs to return to work, says Health Secretary Wes Streeting: 2025
(5) Review: Frontiers in Endocrinology: 2024

The GLP-1 Generation



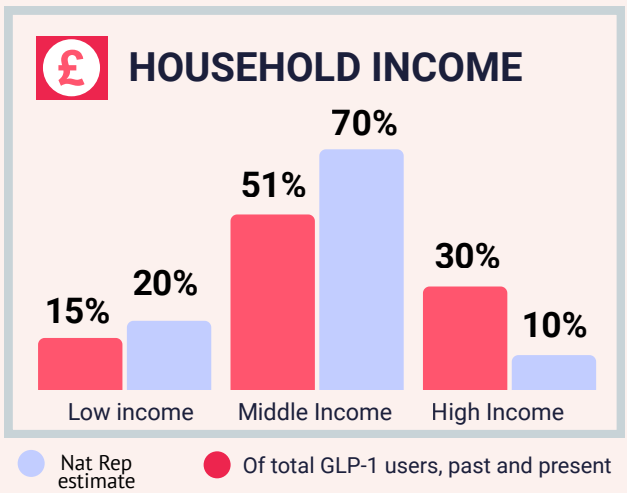




There is no single 'stand-out' demographic profile of GLP-1 medication users in the UK. According to KAM research, the proportion of men and women taking these drugs is relatively balanced, with GLP-1 use spanning a wide range of ages and geographic locations across the UK. However, there are some trends beginning to emerge.

The drug is available on the NHS to those with a BMI equal to or above 35. However, less than one third of those who use GLP-1 medication access it this way. Instead, over half obtain it through private prescriptions. This has resulted in the medication being more prevalent among those from middle and higher income backgrounds.

Although uptake spans all age groups, people below the age of 55 disproportionately make up 89% of all users, while only making up 61% of the total UK population. Noticeably, more than half of users are between the ages of 18 and 34.

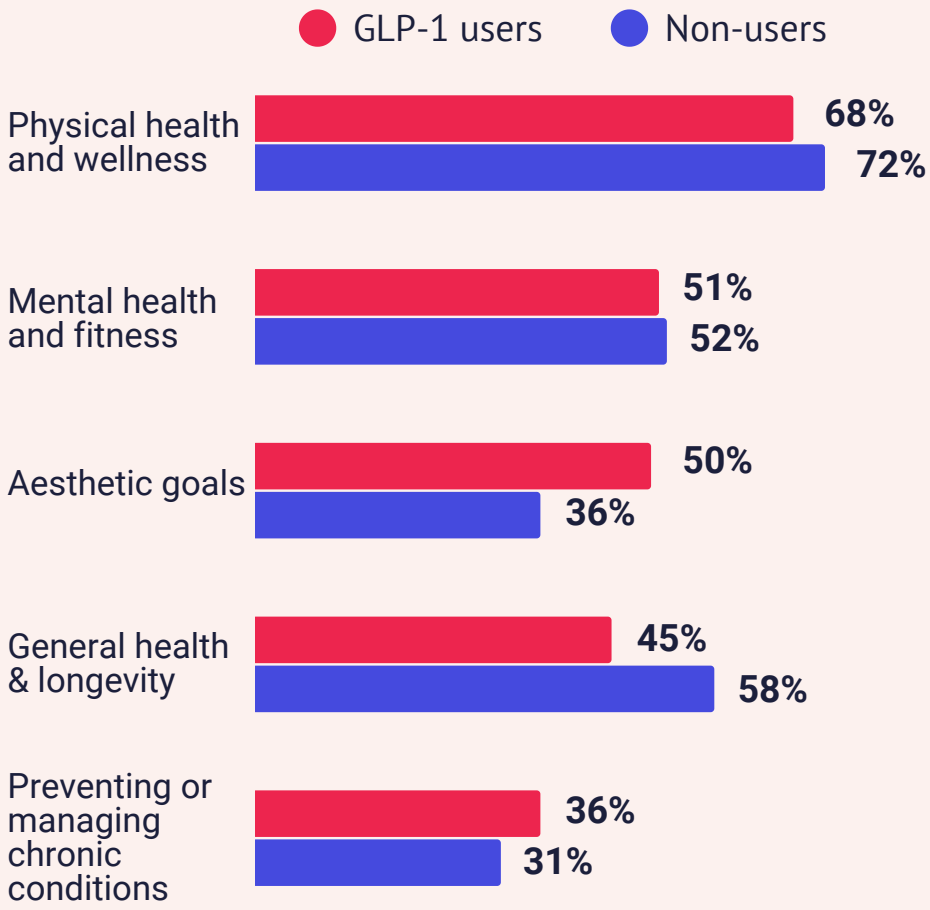


Health Goals and Beyond

Unsurprisingly, over half of GLP-1 medication users are above their ideal weight and would like to lose some. However, weight loss is not the sole reason for using GLP-1 medication. In fact, 68% of GLP-1 users say their primary motive for maintaining a health lifestyle and diet is for their physical health and wellness, and 51% say it is for their mental health and wellness.

Although 50% identify aesthetic goals (such as weight loss and body image) as a main driver, these factors rank lower in priority compared to physical and mental well-being. This being said, only 36% of non-GLP-1 users cite aesthetic goals as a primary motivation for maintaining a healthy lifestyle, indicating weight loss in order to look better, as a clear key driver of GLP-1 drug use.

Primary motives for maintaing a healthy lifestyle & diet



Why UK Hospitality Operators Should Care

GLP-1 medications aren't just a healthcare story - they're a potential game-changer for *how*, *when*, and *what* people eat and drink. Taking into account multiple recent studies as well as our own research, KAM estimates that the number of people using GLP-1 medication in the UK is **between 2.1 million and 3.7 million**, and this number isn't showing any signs of slowing down.

% of the UK population who claim to be:

- **5%** — **Vegetarian (2)**
- **4-7%** — **Current GLP-1 users**
- **3%** — **Vegan (2)**
- **6%** — **Clinically confirmed food allergy (3)**

Current estimates from recent trusted sources suggest that between **4-7% of the UK population** are currently taking some form of GLP-1 medication (1). To put this into perspective, this proportion is comparable to other groups often accounted for in menu planning, such as vegetarians (around 5%) or individuals with food allergies (c.6%).

This growing proportion of GLP-1 users are reshaping eating, drinking and socialising habits. **32% say they're going out to eat drink less often** as a result of taking the drugs, with **57% more likely to go out for special occasions only**. The influence extends beyond users themselves. 44% of people who know someone taking GLP-1 medication report that their own food choices are somewhat or greatly shaped by the GLP-1 user's eating preferences when dining together.

(1) Kantar PanelVoice May 2025 (12,000 UK households)
(2) YoiGov tracker (2024)
(3) Food Standards Agency (2025)

Shift in Food Preferences

What GLP-1 users say that they want to see more of...

31% Health focussed desserts

32% Transparent nutritional information

35% Functional, health boosting ingredients

40% Low calorie or sugar alternatives of popular dishes

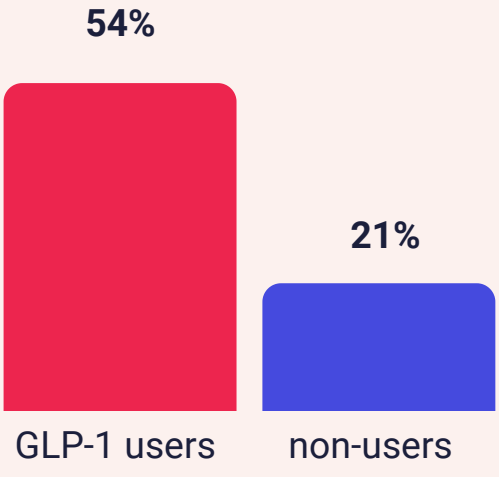
49% Smaller portion sizes

Overall, 65% of GLP-1 medication users say that they·now eat different types of food when they're out since starting taking the drug. As a result of having a reduced appetite, users say that they avoid large meals and instead prioritise smaller or shareable dishes. They are also more likely to view food as fuel, as opposed to something pleasurable, and to therefore consider the health and nutritional value of what they are eating above all else. Consequently, small meals that are low in calorie but nutritionally dense (especially in protein) are particularly appealing to this group.

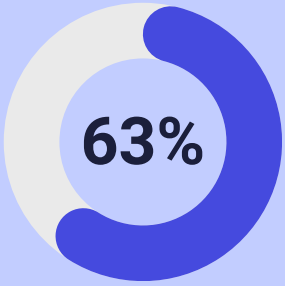
This being said, GLP-1 users express that they are willing to pay a premium for higher quality food and drink options, or for food and drink fortified with functional or healthier ingredients.

"I prefer to have less, but higher quality - I'm happy to pay more for a dish as I'm likely to only have one that is great rather than three that are average"
Find out more here

Proportion willing to pay a premium for healthier food and drink options when eating out:



Shift in Drink Preferences



Of GLP-1 users 'agree' or 'strongly agree' that they now drink less alcohol when eating or drinking out

GLP-1 drugs aren't just affecting eating habits - they are also **impacting the way that users drink** when out as well. Many report that while on the medication, they not only crave alcohol less but also have a lower tolerance for it. As a result, many GLP-1 users note that they would like to see more low alcohol or no alcohol alternatives when they go out for drinks or dinner.

"I drink a lot less alcohol. If I do drink, I'll pick one or two nicer cocktails or a glass of wine rather than several rounds"
Find out more here

1 in 3

GLP-1 users say that they would like to see more alcohol-free or low-alcohol drink options available when they go to pubs, bars or restaurants.

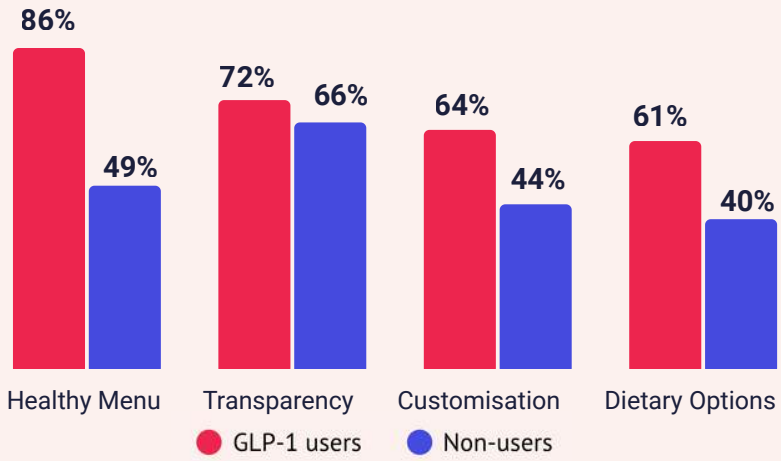
What's Driving Venue Choice?

In line with changing food and drink preferences, GLP-1 users also seek out different types of venues when choosing where to eat out. Overall, they are more likely to actively seek venues based on their health and wellness-focused reputation than they were before, prioritising venues with **healthy menus** and **transparency** about ingredients and sourcing.

"When I do go out, it's less about 'eating' and more about the social side. I find myself choosing places with smaller plates, sharing options, or just good atmosphere where food isn't the main attraction"
Find out more here

How important are the following to you when choosing a restaurant or pub nowadays?

Customisation is also a significant driver of venue choice for GLP-1 users. As a result, they find venue formats that allow for meal personalisation or the freedom to chose multiple smaller sharing dishes more appealing e.g. tapas, multiple small plates.

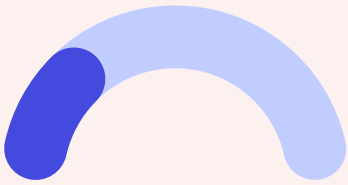


Another factor that influences GLP-1 users when deciding where to eat out is the option to **take leftovers home.** 38% say that they actively look for this as an option when deciding where to go, compared to just 15% of non-users.

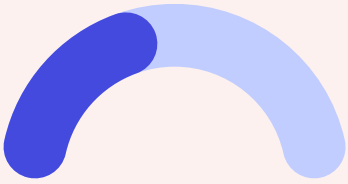
Smaller Plates, More Sharing

How GLP-1 users' eating habits are changing...

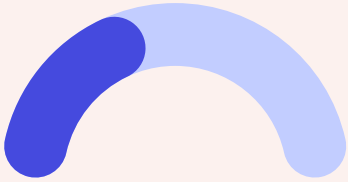
32%
share meals or sides with others



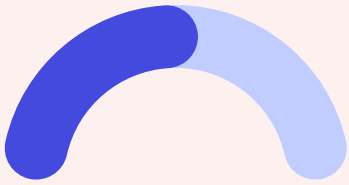
46%
Only order bar snacks, starters or small plates



43%
Skip starter or dessert



55%
Avoid heavy large meals



Case Study

Town Restaurant, Drury Lane

Town say that they provide for the 'mounjaro generation, offering various ways to customise dishes so that they can appeal to those eating smaller, healthier portions. Main courses can be adjusted to smaller portions (for example, seabass available whole or half served with only lemon, oil and salt). They have also reconfigured their plates so that they are easier to share, with steak and pork chops pre-sliced so that sharing the meal is easier. (1)

(1) Financial Times: Ozempic has curbed the obesity crisis. Has it killed the joy of food?

Menu Redesigns

What GLP-1 users want to see more of on menus

- High protein options
- Smaller portions
- More plant-based options
- Lighter meals
- Alcohol free/low alcohol options
- Functional, health boosting ingredients

Some venues. are beginning to adapt to the rise in popularity of GLP-1 drugs by adapting their menus to include more flexibility and customisation, allowing customers to add fortified ingredients (such as more protein) to pre-existing dishes, or by allowing them to downsize standard main dishes in order to suit their reduced appetite. While some venues (especially in the USA) specifically label these changes as GLP-1 adaptations on the menu, in the UK, **16% of GLP-1 users say that they are not comfortable sharing that they are on the medication**, and would therefore not want a menu that draws attention to this.

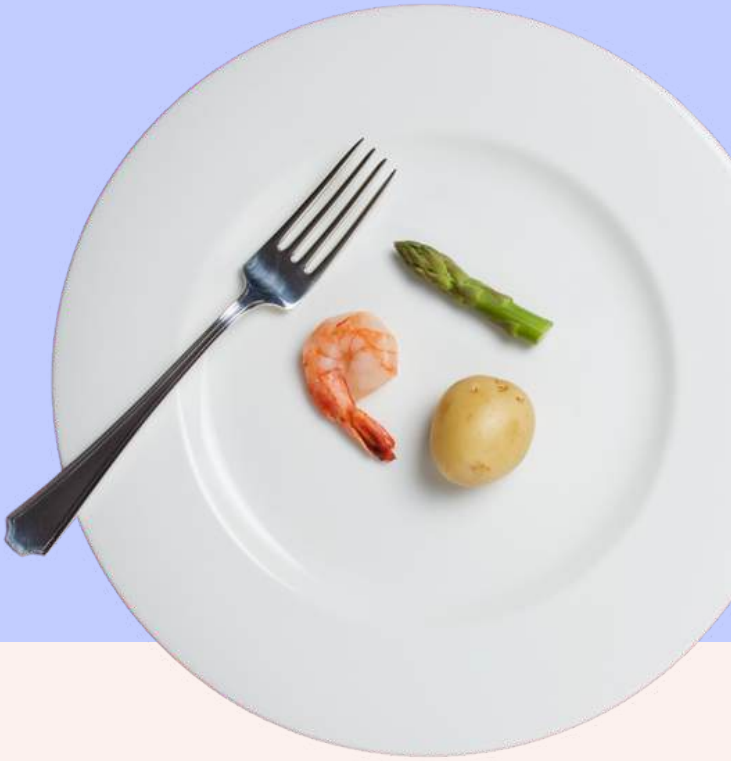
Case Study

Smoothie King, USA

Smoothie King have released a 'GLP-1 Support' menu that includes smoothie recipes specifically designed to support users of GLP-1 medication. The smoothies all contain added protein and fibre, as well as no added sugar options, making them ideal for user who are eating less but still want to ensure that they consume all their needed protein and fibre throughout the day.

Summary

The popularity of GLP-1 drugs has grown exponentially in the past year, and shows no sign of slowing down. However, while they may be eating less, users of GLP-1 medication are still wanting to visit restaurants, pubs and bars - just for different reasons and for different dishes.



Customisation is key

When choosing where to eat or drink, GLP-1 users look for the option to customise their meals to fit their needs, whether that be downsizing to suit their reduced appetites, adding extra healthy ingredients to help maintain a healthy diet or mix and matching various smaller dishes.

Socialisation first

Despite craving food and drink less, GLP-1 users still enjoy the social aspects of going out to pubs, bars and restaurants. Therefore, venues that offer a unique experience or allow for a more social meal (for example with smaller sharing dishes) will be more popular.

Subtlety

Despite the steady rise in popularity of GLP-1 medications, many users prefer to keep their use of the drug private. Consequently, pubs, bars and restaurants that make GLP-1 friendly adjustments should avoid using “GLP-1” in the title, instead focussing on names like ‘snacking options’ or ‘small plates’.

FEEDING THE GLP-1 GENERATION

WHY DIET DRUGS MATTER FOR HOSPITALITY

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So much more than just a research agency, KAM is the supportive voice of the UK hospitality industry. We take pride in offering cutting-edge consultancy backed by deep insights. We thrive on providing our clients with valuable and actionable insight solutions that drive real results and purposeful change. If you're ready to be informed, educated, and inspired, hop on board and let's embark on an exciting journey together.

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