GLUCAGON-LIKE PEPTIDE RECEPTOR 1 ANALOGUE COULD REDUCE ALCOHOL INTAKE IN PEOPLE WITH ALCOHOL USE DISORDER: A SYSTEMATIC REVIEW

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A systematic review of seven studies comprising 88,163 participants found that GLP-1 receptor agonists show promise in reducing alcohol consumption in people with alcohol use disorder, though study heterogeneity warrants further research.

KEY POINTS

- In a Danish population-based study of 87,676 participants, people on GLP-1 RAs had lower risk of alcohol-related events at 90 days compared to those on DPP-4 inhibitors (HR 0.46, 95% CI 0.24 to 0.86), with sustained long-term effect.
- One RCT found no significant difference in alcohol measures with exenatide versus placebo overall, but in participants with BMI greater than 30 kg/m^2 (n=30), exenatide significantly reduced heavy drinking days (percentage point reduction 23.6, P=0.034) and total alcohol consumed (-1,205 g, P=0.026).
- A dulaglutide RCT showed users were 29% more likely to reduce weekly alcohol consumption versus placebo (relative effect size 0.71, p=0.04), and smaller studies with liraglutide, semaglutide, and tirzepatide reported significant reductions in drinking.
- Functional brain imaging demonstrated significant reductions in alcohol cue reactivity in ventral striatum, dorsal striatum, and putamen after 26 weeks of exenatide treatment compared with placebo.
- Study quality varied (two high, two medium, three low quality), and the review notes heterogeneous findings require additional research to establish effectiveness and safety of GLP-1 RAs in alcohol use disorder.

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