

From Adiposity to Hepatic Health: Exploring the Pleiotropic Clinical Impact of Semaglutide (Novo Nordisk) (Complete Session)

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Presentation

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This industry-sponsored symposium presented clinical trial evidence that semaglutide 2.4 mg weekly demonstrated dual efficacy in adults with biopsy-proven NASH and F2/F3 fibrosis, with the speakers reporting approximately 63% NASH resolution and 37% fibrosis improvement in the phase 3 ESSENCE trial.

KEY POINTS

- In the ESSENCE trial (800 patients, 72 weeks), the speakers reported semaglutide achieved NASH resolution in approximately 63% versus placebo with an estimated 29% difference, yielding a number needed to treat of three, and fibrosis improvement by at least one stage in 37% versus 22% placebo with an estimated 14.5% difference.
- The speakers stated semaglutide reduced liver stiffness by 20% on average, with 52% of patients achieving 30% or greater reduction in transient elastography versus 30% placebo, and that effects on NASH and fibrosis were partially mediated by weight loss with additional weight-independent mechanisms.
- Semaglutide produced 10.5% average weight loss, reduced waist circumference by 15 cm, and demonstrated cardiometabolic benefits including modest improvements in lipids, blood pressure, HbA1c, and high-sensitivity CRP, with safety profile consistent with GI side effects seen in obesity and diabetes trials.
- The speakers emphasized that NASH resolution and fibrosis improvement occurred independently of age, gender, baseline fibrosis stage, diabetes status, and BMI category, and that longer treatment duration may yield greater fibrosis regression based on bariatric surgery data.

- The speakers recommended screening all patients with type 2 diabetes and cardiometabolic risk factors for MASLD, staging disease with non-invasive tests, and treating F2/F3 fibrosis as a chronic condition requiring long-term management, positioning semaglutide alongside the previously approved thyroid hormone receptor-beta agonist resmetirom.

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