PATIENT GUIDE · GLP-1 CARE

# A plateau is normal. It is not the end.

Almost everyone on a GLP-1 hits a stretch where the scale stops moving. This guide explains why it happens, how to tell a real plateau from a slow week, and what you can do about it, from your plate to your care team.

- **It is expected.** Your body adapts as you lose weight. A pause is part of the process, not a sign you did something wrong.
- **It is often temporary.** Many plateaus pass with a few small changes to how you eat, move and drink.
- **You have options.** Nutrition, strength training, hydration and, if you need it, a dose review with your Belle care team.



## Week 60

**is about when average weight loss leveled off in a large semaglutide study.**

Loss is usually fastest in the first months, then slows. Leveling off is how these medicines are expected to work, not a sign they stopped working.

WHY IT HAPPENS

## Your body adapts. That is biology.

As you lose weight, your body changes how it uses energy and how it signals hunger. These changes are normal. They are also why the plan that got you here may need a tune-up to keep you going.

### A smaller body needs less fuel

You burn fewer calories at a lower weight. The amount you eat that once led to steady loss may now just hold your weight where it is.

### Your body pushes back

After weight loss, your body can burn a little less energy and turn up hunger signals to protect its stores. This is called metabolic adaptation.

### Habits drift over time

As side effects fade and you feel more like yourself, portions, snacks and drinks can creep back in without you noticing.

WHAT COUNTS AS A PLATEAU

# A slow week is not a plateau.

Your weight goes up and down every day, even when you are losing fat. Before you change anything, make sure you are looking at the real trend.

### It is likely a plateau if:

- Your weight has not changed in a meaningful way for **4 weeks or more.**
- You took every dose on schedule during that time.
- Your waist and how your clothes fit have not changed either.

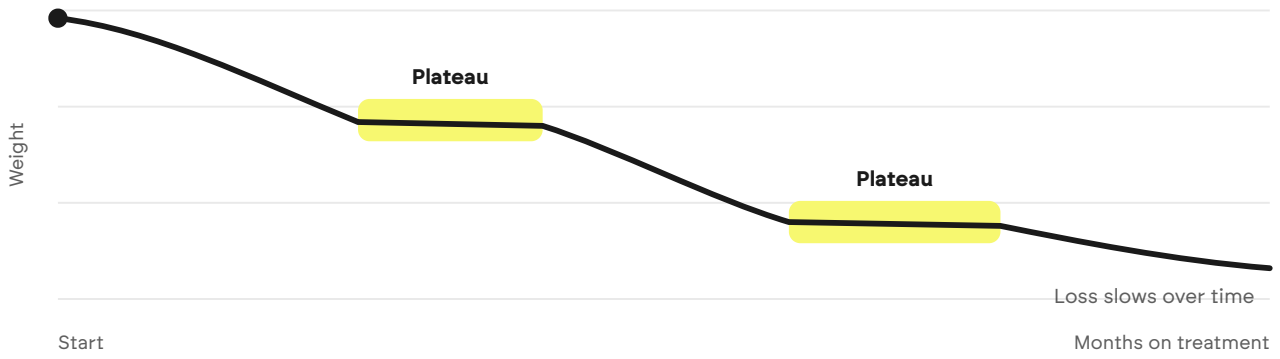
### It is probably not a plateau if:

- Your weight has not moved for a week or two.
- The scale jumped up after a salty meal, a hard workout or a poor night of sleep.
- You are near your period or are constipated. Both can add water and weight for a few days.
- You missed or delayed a dose.
- You just started strength training. Working muscles hold extra water at first.

## Weight loss is a staircase, not a slide.

A common pattern on a GLP-1: steady loss, a flat stretch, then more loss. The flat stretches often come after your body has adjusted to a dose.

Illustration only, not patient data




**WEIGH THE SAME WAY**

Weigh in the morning, after the bathroom, before you eat or drink, in similar clothes each time.

**WATCH THE AVERAGE**

Compare weekly averages, not single days. Or weigh once a week, on the same day each week.

**TRACK MORE THAN WEIGHT**

Measure your waist once a month. Notice how clothes fit, your energy and your strength. These often change when the scale does not.

PART 1 · NUTRITION

# Check your plate. Fuel your progress.

You are eating less than before, so what you eat matters more than ever. Small, steady changes here are the first and best way to get the scale moving again.

OFTEN MISSED

## Are you eating enough?

It sounds backwards, but **eating too little can stall your progress.** GLP-1s can quiet your appetite so much that some people get through most of the day on a few bites.

When your body gets too little food for too long, it can break down muscle, burn less energy to save fuel, and leave you too tired to move. All of that makes it harder to keep losing.

- **Eat on a schedule,** even if you are not hungry. Try 3 small meals plus 1 or 2 snacks.
- **Start every meal with protein,** then add vegetables and other foods.

**SIGNS YOU MAY BE UNDER-EATING**

- You often skip meals because you are not hungry.
- You eat less than about 1,200 calories most days.
- You feel tired, dizzy, cold or foggy.
- Your hair is shedding more than usual.
- You are far from your daily protein goal.

Your care team can give you a calorie and protein target that fits your body.

1

### Put protein first

Protein helps you keep muscle while you lose fat, and it keeps you full longer. Many people aim for about 25 to 30 grams at each meal.

- Eat the protein on your plate before the rest.
- Ask your care team for your daily target.

2

### Track for one week

Portions and snacks creep up slowly. A short, honest food log often shows what changed, or that you are eating too little.

- Use an app or your phone's notes for 3 to 7 days.
- Count bites, tastes, sauces and drinks too.

3

### Fill up on fiber

Vegetables, fruit, beans and whole grains add volume for few calories and help keep your gut moving.

- Fill half your plate with vegetables.
- Add fiber slowly, with plenty of water.

4

### Watch what you drink

Liquid calories add up fast and do not keep you full. They are one of the most common hidden causes of a stall.

- Swap sweet coffee drinks and soda for water or unsweetened tea.
- Cut back on alcohol. It adds calories and lowers your guard around food.

PART 1 · WHAT TO EAT

# Protein at every meal. Every day.

You do not need fancy foods or powders to hit your protein goal. These everyday foods make it easier. Amounts are approximate, so check labels when you can.

| Easy protein foods | PROTEIN |
|---|---|
| Chicken breast, cooked<br>3 oz, about the size of a deck of cards | 26 g |
| Salmon or other fish, cooked<br>3 oz | 22 g |
| Lean ground turkey, cooked<br>3 oz | 22 g |
| Canned tuna or chicken<br>3 oz | 20 g |
| Protein shake<br>1 ready-to-drink bottle | 20–30 g |
| Plain Greek yogurt<br>3/4 cup | 17 g |
| Cottage cheese<br>1/2 cup | 12 g |
| Eggs<br>2 large | 12 g |
| Lentils or edamame<br>1/2 cup cooked | 9 g |
| String cheese<br>1 stick | 7 g |



**A SAMPLE DAY · ABOUT 90 GRAMS**

| | |
|---|---|
| Breakfast<br>2 eggs and 1/2 cup cottage cheese | 24 g |
| Lunch<br>3 oz chicken over a big salad | 26 g |
| Snack<br>3/4 cup Greek yogurt with berries | 17 g |
| Dinner<br>3 oz salmon, vegetables, a little rice | 22 g |

**KEEP IT EASY**

Stock grab-and-go protein: yogurt cups, hard-boiled eggs, string cheese and tuna packets.

**DO NOT SAVE UP**

Skipping meals to save calories often backfires. It leads to low energy and bigger portions later.

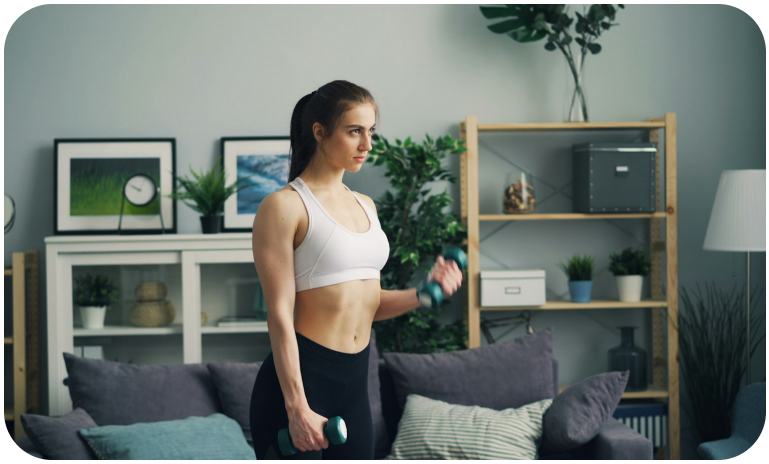
**WATCH THE WEEKENDS**

Many plateaus hide in weekend meals, drinks and snacks. Try to keep a similar rhythm all week.

PART 2 · MOVEMENT

# Build strength. Protect your progress.

When you lose weight, some of it comes from muscle. Muscle keeps you strong and burns more energy than fat, even at rest. Holding on to it is one of the best ways to keep losing.



## 25 to 40%

**of the weight lost on a GLP-1 can come from lean mass, which includes muscle.**

That is what body scans showed in large studies of semaglutide and tirzepatide. Strength training and enough protein help you keep more of it.

1

### Lift 2 to 3 times a week

Work your legs, hips, back, chest, shoulders and arms. You do not need a gym.

- Start with your body weight: chair squats, wall push-ups, glute bridges.
- Add bands or dumbbells as it gets easier.

2

### Add more daily steps

Everyday movement adds up, and it is easy on your body.

- Find your daily average, then add 1,000 to 2,000 steps.
- Take a 10-minute walk after meals. It can also ease fullness.

3

### Build to 150 minutes

That is the weekly goal for moderate activity, like brisk walking, cycling or swimming.

- Break it into 10-minute pieces if that is easier.
- Pick something you like. You will stick with it.

### A sample week to start

Strength days in ink

| MON | TUE | WED | THU | FRI | SAT | SUN |
|---|---|---|---|---|---|---|
| Strength, 20 to 30 min | Brisk walk, 30 min | Strength, 20 to 30 min | Brisk walk, 30 min | Strength, or rest if sore | Longer walk or something fun | Rest and gentle stretching |

**THE SCALE MAY LAG**

When you start lifting, your muscles hold extra water as they recover. Your weight may hold steady for a week or two while you are making real progress. Check your waist and how your clothes fit.

**CHECK WITH US FIRST**

Talk to your care team before you start if you have heart, lung, joint or balance problems, or have not been active in a long time. Start light and build slowly.

PART 3 · HYDRATION AND RECOVERY

# Drink up. It matters more than you think.

GLP-1s can dull your thirst along with your hunger, so many people drink less than they realize. Low fluids can leave you tired, constipated and snacky, and all three can stall your progress.

## 64 oz+

**of fluid a day is a good starting goal.**

That is 8 cups. You may need more if you exercise, sweat a lot or it is hot out. Ask your care team if you have heart or kidney problems.



### Thirst can feel like hunger

Feeling snacky between meals? Drink a glass of water and wait 15 minutes. You may find you were thirsty.

### Water keeps you moving

Constipation is common on a GLP-1. A backed-up gut can add pounds on the scale and leave you bloated. Water and fiber help.

### Salt holds on to water

A salty meal can add water weight overnight. It is not fat, and it usually passes in a day or two.

### Easy ways to drink more

- Carry a bottle with time or ounce markings.
- Drink a full glass when you wake up.
- Sip through the day. If you feel full or queasy, drink between meals, not with them.
- Add lemon, cucumber or a low-sugar electrolyte packet for flavor.
- Check your urine. Pale yellow means you are on track.
- Choose water over juice, soda and sweet coffee drinks.

## Three more things that can stall progress

**SLEEP**

Short sleep raises hunger hormones and cravings. Aim for 7 to 9 hours a night.

**STRESS**

Ongoing stress can drive cravings and water retention. A walk, a call with a friend or a few slow breaths all help.

**HORMONES AND MEDICINES**

Perimenopause, menopause, thyroid problems and some medicines can affect weight. Your care team can help sort it out.

PART 4 · YOUR DOSE

# Still stuck? Your care team can help.

If you have used the steps in this guide for 4 weeks or more and your weight still has not moved, it may be time to review your plan with your Belle clinician. This is extra true if your food noise has come back.

DOSE REVIEW THROUGH BELLE

## Is a dose increase right for you?

GLP-1 doses go up in steps. Many people lose weight steadily on one dose, then level off. A higher dose may help, but it is not right for everyone. Your clinician will look at your whole picture before making a change.

**It may be time to ask if:**

- **Your food noise is back.** You think about food a lot again, get hungry soon after eating, or have cravings that had gone quiet.
- **Your plateau has lasted 4 weeks or more,** even with steady habits.
- **Side effects are mild or gone** at your current dose.

Message your Belle care team about your dose →

**WHAT IS FOOD NOISE?**

Constant thoughts about food: what to eat next, cravings, snacking when you are not hungry. When a GLP-1 is working, many people say it goes quiet.

**WHAT TO SHARE WITH US**

How long you have been on your dose, your weight trend, how hungry you feel, what you are eating, and any side effects.

**HEADS UP**

A dose increase can bring back side effects like nausea for a few days. See our nausea guide for help.

### Your clinician may:

- Raise your dose to the next step.
- Keep your dose the same and adjust your nutrition or activity plan.
- Check for other causes, like thyroid problems, sleep, hormones or other medicines.
- Talk with you about whether you have reached a healthy weight to maintain.

### Please do not:

- Raise your dose or take extra doses on your own.
- Stop your medicine to try to reset it.
- Cut your food way down to force the scale. It can backfire.
- Add another weight loss product without talking to us.

**IF YOU ARE ALREADY AT YOUR HIGHEST DOSE**

You still have options. Your clinician can review your plan, talk about other treatments, or help you shift to keeping off the weight you have lost. Holding steady at a healthier weight is a real success.

PUTTING IT TOGETHER

# A simple plan, one step at a time.

Start at the top and give each change a few weeks to work. This is a general plan. Your care team may give you one that fits you better.

1

FIRST · CHECK THE TREND

### Make sure it is a real plateau

Weigh the same way each time and compare weekly averages. Measure your waist. Give it 4 weeks before you call it a plateau.

2

EVERY DAY · CHECK YOUR PLATE

### Eat enough, and lead with protein

Eat 3 small meals and 1 or 2 snacks, even when you are not hungry. Aim for 25 to 30 grams of protein at each meal. Log your food for a week.

3

EVERY WEEK · MOVE AND BUILD

### Lift 2 to 3 times and walk more

Strength train your whole body 2 to 3 times a week. Add 1,000 to 2,000 steps a day and build toward 150 minutes of activity.

4

EVERY DAY · DRINK AND REST

### Hydrate and recover

Drink at least 64 ounces of fluid. Sleep 7 to 9 hours. Find small ways to ease stress.

5

STILL STUCK AFTER 4 WEEKS, OR FOOD NOISE IS BACK

### Message your Belle care team

Ask whether a dose increase is right for you. Your clinician can also check for other causes and adjust your plan.

## Message your care team sooner if:

- You cannot eat or drink enough because of nausea or no appetite.
- You feel dizzy, faint, or very weak or tired.
- You take insulin or a diabetes pill and are changing how you eat.
- Food or your weight is causing you a lot of stress or worry.

**PLEASE READ**

This guide is general health information. It is not medical advice for you. It does not replace advice from your Belle clinician, your own doctor or your pharmacist. Every person is different.

Talk to your care team before you change your dose, start a new exercise program or make big changes to how you eat. This is extra important if you are pregnant or breastfeeding, have diabetes, kidney, liver or heart disease, or take other medicines.