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GLP-1 STARTER GUIDE

Your first month on a GLP-1, made simple.

Thinking about starting, or just got your first box? This is everything we walk new Belle patients through, from how the medication works to your very first injection.

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TALK FIRST

Talk with our welcome team

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How GLP-1s actually work.

GLP-1 is a hormone your body already makes after you eat. GLP-1 medications mimic it, which helps with appetite, fullness, cravings and blood sugar.

You feel full sooner

The medication slows how fast your stomach empties, so smaller meals satisfy you and you stay full longer.

Less food noise

Many people find they think about food less often and have fewer cravings.

Insulin works better

It helps your body use insulin the way it's meant to: turning food into fuel instead of storing it.

TIRZEPATIDE AND SEMAGLUTIDE

Tirzepatide acts on two hormones, GLP-1 and GIP. It's what most Belle patients start on. **Semaglutide** acts on GLP-1 alone. Both are once-weekly injections, and a Belle provider decides which one, and which dose, is right for you.

What to expect

- Everyone's timeline is different. Some people notice changes after the first injection; for others it takes up to 6 weeks. Both are normal.
- You start on a low dose. It isn't meant to do the heavy lifting. It gets your body ready and keeps side effects down.
- Mild nausea, constipation or diarrhea, and tiredness are common early on, and usually ease as your body adjusts.
- It isn't an instant fix. Most people don't see dramatic changes in the first month, and that's expected.

"The biggest mistake I see is comparing your journey to someone else's. Your body is unique, and so is your journey."

TIFFANY, PA

Before your first injection.

A little prep goes a long way. Here's how to set yourself up for an easy first week.

Pick your day

You'll inject once a week, on the same day each week. Choose one you can stick with.

- Many people pick Thursday or Friday, so any early side effects land on the weekend.
- Skip a first dose right before a vacation or a big work event.

Fuel up

- Drink plenty of water the day before and the day after you inject. It's one of the hidden keys to a good experience.
- Eat a meal with protein the day before.
- On injection day, most people do better injecting with a little protein than on an empty stomach.
- Have a plan for constipation: water, fiber and movement (more on page 8).

Gather your supplies

- **Your medication.** It comes in a small vial inside a medicine bottle.
- **Alcohol swabs.** Included in your package.
- **Syringes.** Also included.
- **A sharps container.** No container? A coffee can or a thick plastic jug, like a laundry detergent bottle, works.

It's okay to be nervous

The needles are tiny. Most people are surprised how quick and nearly painless it is. Breathe. You've got this.

WATCH IT Tiffany walks through every step on video in the free GLP-1 Basics course in the Belle Community. It's open to everyone: link.joinbelle.com/Zb9421o

When your box arrives.

Take a few minutes to check everything and get your medication into the fridge.

Arrival checklist

- Check the vial for any damage.
- Make sure the liquid is clear, with nothing floating in it.
- Confirm all your supplies are there.
- Put the vial in the refrigerator as soon as you can.
- Never freeze it.
- Something look off? Message us before you use it.

MELTED ICE PACKS ARE NORMAL

Your medication ships in an insulated cooler, and the ice packs are almost always melted when it arrives, especially in warm weather. That's expected. The pharmacy knows exactly what temperature the medication can handle in transit. Even if it arrives warm, it's fine: just get it into the fridge.

KEEP THE BOTTLE

Your vial comes inside a medicine bottle, and your dosing instructions are printed on that bottle. Don't throw it away.

Meet your vial

It's small

People often message us surprised that everything fits in one tiny vial. It always holds enough for your prescription.

Toss the plastic cap

Pop off the plastic flip cap and throw it away. It doesn't go back on.

The rubber stopper

Underneath is a rubber stopper. That's where your needle goes in. The vial won't spill when you turn it over.

Units, mg and mL, in plain English.

Almost everyone new to GLP-1s mixes these up. It's simpler than it sounds.

MILLIGRAMS (MG)

How much medication

This is your dose, the strength of what you're taking.

MILLILITERS (ML)

How much liquid

This measures volume. A vial might hold 2 mL of liquid, for example.

UNITS

The lines on your syringe

Your insulin syringe (the one with the orange cap) is marked in units. This is what you'll actually measure.

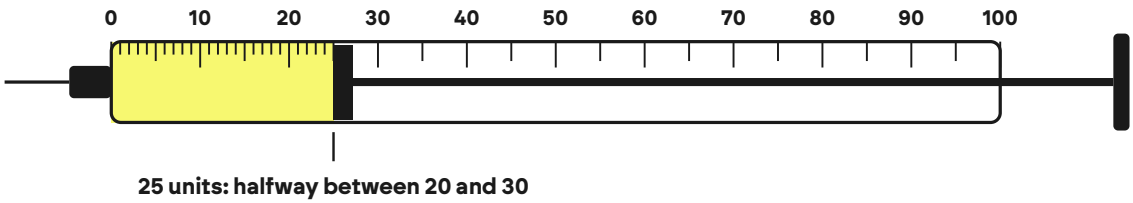
100 units

= 1 mL

On a standard insulin syringe, 100 units always equals 1 mL. That math never changes. Your prescription bottle tells you exactly how many units to draw, so you never have to convert anything yourself.

Reading your syringe

Numbers are printed every 10 units. The small unlabeled lines between them are single units.



25 units: halfway between 20 and 30

REMEMBER Units, mg and mL aren't interchangeable, and different medications and concentrations need different amounts. Always follow the instructions on **your** bottle. If you're ever unsure, don't guess: message us first.

Drawing up your dose.

This is the part that feels intimidating at first. After a couple of weeks it becomes routine.

1. **Wash your hands**
   Soap and water.
2. **Clean the stopper**
   Wipe the rubber stopper with an alcohol swab and let it dry.
3. **Check your instructions**
   Find your number of units on the bottle, then find it on your syringe.
4. **Draw in air**
   Pull the plunger back to your dose to fill the syringe with air.
5. **Push the air into the vial**
   Uncap the needle without touching it, go through the stopper, and push the air in. It makes drawing the medication much easier.
6. **Flip the vial upside down**
   Once the needle is through the stopper you can let go. Flip the vial and syringe together; twisting can bend the needle.
7. **Draw your dose**
   Pull back past your dose, then push the extra back into the vial until the plunger lines up with your number.
8. **Check, then inject**
   No big air bubbles, plunger right on your dose. You're ready.

TIFFANY'S TRICK FOR AIR BUBBLES

Pull up more than you need (say, to 60 when your dose is 25), then push the extra back into the vial. The bubbles go with it.

Want it less cold?

Some people let the filled syringe sit 10 to 15 minutes to warm up. If you do, recap the needle carefully to keep it clean.

Never guess

If you're unsure about your dose, stop and message us before you inject.

Where to inject, and why you rotate.

GLP-1s go into the fatty layer just under your skin, never into muscle. That's why the needles are so short.

MOST COMMON

Your abdomen

Anywhere you can pinch an inch works. Stay at least 2 inches away from your belly button.

SECOND MOST COMMON

Top or outer thigh

Skip the inner thigh. Skin there is more likely to be raw or broken, and you never inject into broken skin.

EASIER WITH A HELPER

Back of the upper arm

Works well, but it's hard to reach on your own.

How to inject

- Clean the skin with an alcohol swab and let it dry.
- Gently pinch up the skin, not enough to hurt.
- Insert the needle into the pinch and push the plunger. All the way in or halfway in, it still reaches the right layer. It's hard to get this wrong.
- Put the used syringe straight into your sharps container.

Rotate every week

Using the same spot over and over can build scar tissue, which makes it harder for the medication to absorb. Move to a new spot each week.

Normal reactions

Mild redness, bruising, itching or tenderness at the site is normal and usually fades on its own. If anything worries you, message us.

"There's no one perfect injection site. Just the one that's comfortable for you, and that you rotate regularly."

TIFFANY, PA

Side effects, and what helps.

Most side effects show up early and ease as your body adjusts. A few habits make a big difference.

NAUSEA

Eat smaller meals and stop when you feel full. Go easy on greasy or very rich foods, and sip water through the day.

CONSTIPATION

Drink more water, add fiber slowly, and keep moving. Ask us what's good to keep on hand before you need it.

DIARRHEA

Keep up your fluids, and favor simple, gentle foods for a day or two.

TIREDNESS

Usually tied to eating and drinking less. Prioritize water and protein, and give yourself extra rest the first few weeks.

THE HIDDEN KEY Staying well hydrated the day before and the day after your injection helps with almost every early side effect.

GET HELP RIGHT AWAY

Message your care team right away, or call 911 in an emergency, if you have:

- Severe stomach pain that won't go away, with or without vomiting
- Vomiting or diarrhea so bad you can't keep fluids down
- Swelling of your face, lips, tongue or throat, trouble breathing, or a severe rash
- Pain in your upper right belly, fever, or yellowing of your skin or eyes
- Shakiness, sweating or confusion if you also take medication for diabetes
- A lump or swelling in your neck, trouble swallowing, or hoarseness that won't go away

Habits that make it work.

GLP-1s are a powerful tool. They work best alongside a few simple habits.

Protein first	When you're eating less, every bite counts. Start meals with protein to help you stay full and hold on to muscle.
Smaller meals	Your stomach empties more slowly now. Smaller portions, eaten slowly, sit better than big plates.
Water, all day	Keep a bottle with you. Hydration helps with energy, constipation and nausea.
Keep your muscle	Weight loss can pull from muscle as well as fat. Strength training a few times a week, even with bodyweight or bands, signals your body to keep it.
Fiber, slowly	Vegetables, fruit, beans and whole grains help keep things moving. Add them gradually.

"Lasting success is about consistency, not perfection."

Want recipes and meal ideas? The free **Eat to Thrive** nutrition course is in the Belle Community too.

Your first month, week by week.

What a typical start looks like. Your plan comes from your provider, and your timeline is your own.

DELIVERY DAY	**Unpack and refrigerate** Check the vial and supplies, get the medication into the fridge, and keep the bottle with your instructions.
WEEK 1	**Your first injection** Pick your day, hydrate, eat some protein, and take your first dose. Feeling full sooner, or nothing at all yet, are both normal.
WEEKS 2 TO 4	**Same day, same dose** Inject on the same day each week and rotate your site. Early side effects usually ease. You may notice less food noise and smaller portions feeling like enough.
AROUND WEEK 4	**Check in on your dose** Tell us how you're feeling. Your provider reviews your progress and decides whether and when to adjust your dose. Never change your dose on your own.
ONGOING	**Keep going** Changes build over time. Stick with the habits, keep your weekly rhythm, and reach out whenever something comes up.

YOUR CARE TEAM Every Belle patient has licensed providers and a patient success team behind them. Questions are part of the process, not a bother.

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10 · QUESTIONS? WE'RE HERE

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