



foi.request@mhra.gov.uk.

[MHRA Website](#)

Our Ref: **FOI2026/00455**

18 May 2026

Dear [REDACTED]

Thank you for your Freedom of Information (Fol) request received on 25 April. You wrote:

Thank you very much for the help and information thus far. I'm giving a talk on GLP1 agonists and would really appreciate it if I could please repeat my previous request but now with the most up to date information? i.e everything up to now so far.

MHRA Response

We confirm that we hold the information you have requested.

This request follows your previous FOI request and asks for the same information with the most up-to-date data available. The data provided in this response reflects all reports received up to 1st May 2026.

Information on patient age, sex and ethnicity is exempt under Section 21(1) of the Freedom of Information Act because the information is reasonably accessible to you, as it is already in the public domain.

However, to be helpful you can find the information you seek at [SEMAGLUTIDE | Making medicines and medical devices safer](#) where the information can be retrieved. The information on ethnicity is available under the yellow card overview tab. Information on patient age and sex is available under the yellow card overview tab and the total report profile tab. This can be accessed for each GLP-1 from this page: [What is being reported | Making medicines and medical devices safer](#).

The rest of the requested information is attached in annex 1.

The MHRA codes suspected Adverse Drug Reactions (ADRs) within Yellow Card reports using the Medical Dictionary for Regulatory Activities (MedDRA). There are five levels to the MedDRA hierarchy, arranged from very specific to very general. At the most general level, called System Organ Class (SOC), suspected adverse reactions are grouped by aetiology. We have conducted a search of our database for reported reactions within the Skin and subcutaneous tissue disorders MedDRA SOC associated with the drug substances of interest.

1. Please see Table 1 in Annex 1 which displays a breakdown of UK spontaneous suspected ADR reports received since the start of the Yellow Card Scheme until 1st May 2026 per brands of semaglutide, liraglutide and tirzepatide where a suspected reaction has been reported within the Skin and subcutaneous tissue disorders MedDRA SOC. Please note that brand names and indications for use are not mandatory for Yellow Cards and are not always provided.
2. Please see Table 2 in Annex 1 which displays UK spontaneous suspected ADR reports received since the start of the Yellow Card Scheme until 1st May 2026 where a suspected reaction has been reported within the Skin and subcutaneous tissue disorders MedDRA SOC and an indication related to weight loss has been reported. Weight-loss related indications were identified using the following MedDRA Preferred Terms (PTs): Central obesity, obesity, overweight, weight, weight control, weight decreased, weight increased, weight loss diet, and weight loss poor. Table 3 in Annex 1 displays UK spontaneous ADR reports received since the start of the Yellow Card Scheme until 1st May 2026 where a suspected reaction has been reported within the Skin and subcutaneous tissue disorders MedDRA SOC and a non-weight loss indication has been reported. Please note reports can include more than one indication and therefore reports could be included in both table 2 and table 3.
3. Please see Table 4 in Annex 1 which displays UK spontaneous suspected ADR reports received since the start of the Yellow Card Scheme until 1st May 2026 where a suspected reaction has been reported within the Skin and subcutaneous tissue disorders MedDRA SOC and the patient has a reported medical history also within the Skin and subcutaneous tissue disorders MedDRA SOC.
4. As stated above information regarding patient age, sex and ethnicity is available on the MHRA's website. The reported dose range was between 1µg and 30mg. The reported patient weight range is between 49kg and 208kg. Please note both dose and weight are free text fields and this information is as reported by the original reporters. Please note that whilst a report must have one patient identifier for a report to be considered valid, patient age, sex, ethnicity, dose and weight are not mandatory for Yellow Cards and are not always provided.

When considering this spontaneous Adverse Drug Reaction (ADR) data, it is important to be aware of the following points:

- A reported reaction does not necessarily mean it has been caused by the drug, only that the reporter had a suspicion it may have. The fact that symptoms occur after use of a drug, and are reported via the Yellow Card scheme, does not in itself mean that they are proven to have been caused by the drug. Underlying or concurrent illnesses may be responsible and such events can also be coincidental.
- It is also important to note that the number of reports received via the Yellow Card scheme does not directly equate to the number of people who suffer adverse reactions and therefore cannot be used to determine the incidence of a reaction. ADR reporting rates are influenced by the seriousness of ADRs, their ease of recognition, the extent of use of a particular drug, and may be stimulated by promotion and publicity about a drug. Reporting tends to be highest for newly introduced medicines during the first one to two years on the market and then falls over time. For these reasons the enclosed data should not be used as a basis for determining incidence of side effects.
- Please be aware that the data provided should not be used as a list of side effects to the available GLP-1RAs, nor should this data to be used to estimate the frequency of

side effects or to compare the safety profile of different medicines. All established undesirable effects for the available GLP-1RAs can be found in the Summary of Product Characteristics (SmPC) for healthcare professionals and the Patient Information leaflet (PIL), both of which can be found on the [MHRA Products | Home](#).

The MHRA continuously monitors the safety of medicines through a variety of pharmacovigilance processes including the Yellow Card scheme. As part of our signal detection processes all adverse reaction reports received by the Yellow Card scheme are individually assessed and cumulative information reviewed at regular intervals. If appropriate, regulatory action would be taken if any serious risks were confirmed.

The MHRA and CHM encourage the use of data from the Yellow Card Scheme in research and for publication, but wish to ensure that the limitations of interpretation of the data are made clear. If you propose to publish information based on Yellow Card data, the MHRA is most willing to provide advice on how the Yellow Card information might be best used and presented. The MHRA is also willing to provide feedback on manuscripts prior to publication. If you have any queries about this letter, please contact us quoting the reference number above. Please write to the Director, Vigilance and Risk Management of Medicines Division at the address below:

Telephone: 020 3080 6000 E-mail: info@mhra.gov.uk

If you are planning a media story, please contact the MHRA News Team on 02030807651 or by email at newscentre@mhra.gov.uk.

If you have any queries about this letter, please contact us quoting the reference number above.

Yours sincerely,

MHRA Central Freedom of Information Team
Medicines & Healthcare products Regulatory Agency

Your right to complain under the Freedom of Information Act

If you are not happy with this response you may request an internal review by e-mailing foi.request@mhra.gov.uk or by writing to: MHRA Central Freedom of Information Team, 10 South, Colonnade, Canary Wharf, London, E14 4PU

Any request for an internal review must be received by us within 40 working days of the date of this letter. Please note we are not obliged to provide a review if it is requested after more than 40 working days.

If you are not content with the outcome of the internal review, you may apply directly to the Information Commissioner's Office for a decision. Generally, the Commissioner cannot make a decision unless you have exhausted our own complaints procedure. The Information Commissioner can be contacted at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF.

Website: [ICO FOI and EIR complaints](#) or telephone 0303 123 1113.

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<https://www.nationalarchives.gov.uk/doc/open-government-licence/version/3/>