

IMPORTANT INFORMATION:

SAXENDA® (LIRAGLUTIDE 3.0 MG) WILL NO LONGER BE AVAILABLE IN NEW ZEALAND FROM 1ST JANUARY 2027

Dear Healthcare Professional,

We are writing to inform you that **Saxenda® (liraglutide) will be discontinued in New Zealand and no longer available from 1st January 2027.**

This decision aligns with Novo Nordisk's commitment to providing our most effective and innovative treatment for people living with overweight and obesity. Wegovy® (semaglutide), our once-weekly treatment, is available in New Zealand as an alternative option.¹

In the STEP 8 head-to-head trial, Wegovy® demonstrated superior weight loss vs. Saxenda®, with a mean weight reduction of 17.1%, compared with 6.6% ($P < 0.001$, trial product estimand).^{1,2*} Rates of adverse events, which were mostly gastrointestinal, were similar for semaglutide and liraglutide and consistent with previous trials.²

This is a significant difference that highlights the effectiveness of Wegovy® for individuals seeking weight management solutions, alongside the benefits beyond weight loss it offers, as outlined by the additional indication in the New Zealand Data Sheet.¹

We encourage you to discuss alternative treatment options with patients currently using Saxenda® and to plan their transition prior to 1st January 2027.

Supply and ordering

- Saxenda® will not be available for purchase from 1st January 2027.
- Separately, from 24th July 2026, NovoFine® needles 32G/6 mm x 100 pack (Pharmacode: 1183684) will no longer be supplied free of charge.
- The Saxenda® pre-filled pen is designed for use with NovoFine® needles up to 8 mm in length; needles are not included with the pen.

Reporting of safety information:

In line with professional obligations, any suspected adverse reactions should be reported to Medsafe or alternatively to Novo Nordisk at [Report a side effect](#)

If you have any questions about the content of this letter, please contact our Medical Information Team on 0800 733 737 or nzlccc@novonordisk.com

Sincerely,



Jay Pirnia
General Manager
Novo Nordisk New Zealand



Dr Ana Svensson
Senior Director, Medical, Regulatory &
Pharmacovigilance
Novo Nordisk Oceania

* 15.8% vs. 6.4% ($P < 0.001$, treatment policy estimand) when taken over 68 weeks as an adjunct to a reduced-energy diet and increased physical activity.^{1,2}

Saxenda® is an unfunded prescription medicine - patient co-payment for medicine and healthcare professional fees apply.

Please review Data Sheet before prescribing. The Data Sheet can be accessed at
<https://www.medsafe.govt.nz/profs/datasheet/s/saxendainj.pdf> or
<https://www.novonordisk.co.nz/content/dam/nncorp/nz/en/pdfs/datasheets/Saxendapi.pdf>

SAXENDA® (liraglutide (rys) 6 mg/mL). Indication: As an adjunct to a reduced-calorie diet and increased physical activity for weight management in adult patients with an initial Body Mass Index of $\geq 30 \text{ kg/m}^2$ (obese) or $\geq 27 \text{ kg/m}^2$ to $< 30 \text{ kg/m}^2$ (overweight) in the presence of at least one weight related comorbidity, such as dysglycaemia (pre-diabetes and type 2 diabetes mellitus), hypertension, dyslipidaemia or obstructive sleep apnoea. Treatment should be discontinued after 12 weeks on the 3.0 mg/day dose if a patient has not lost at least 5% of their initial body weight. **Dose/Administration:** Administered subcutaneously once daily at any time, independent of meals; starting dose 0.6 mg/day; increase to 3.0 mg/day in increments of 0.6 mg per week. If escalation to the next dose is not tolerated for two consecutive weeks, consider discontinuing treatment. Daily doses higher than 3.0 mg are not recommended. Must not be administered intravenously or intramuscularly. **Contraindications:** Hypersensitivity to liraglutide or any of its excipients. **Warnings/Precautions:** Not for use in patients: with obesity secondary to endocrinological or eating disorders or to treatment with medicinal products that may cause weight gain; children (< 18 years); with a history of pancreatitis, severe renal impairment including end-stage renal disease, hepatic impairment or insufficiency, inflammatory bowel disease or diabetic gastroparesis; ≥ 75 years. Must not be used as a substitute for insulin. Should not be used: with insulin; in combination with other prescription, over-the-counter or complementary medicines intended for weight loss. Use with caution in patients: undergoing general anaesthesia or deep sedation due to an increased risk of residual gastric content from delayed gastric emptying which could cause aspiration; 65-74 years; with thyroid disease; on other drugs that increase heart rate. Advise patients of the potential risk of dehydration in relation to gastrointestinal side effects and to take precautions to avoid fluid depletion. If pancreatitis is suspected, treatment should be discontinued and appropriate management initiated. If acute pancreatitis is confirmed, Saxenda® should not be restarted. A higher rate of cholelithiasis and cholecystitis has been observed in patients treated with Saxenda® - patients should be informed of the characteristic symptoms. Cholelithiasis and cholecystitis may lead to hospitalisation and cholecystectomy. Saxenda® should be discontinued for patients who experience a sustained increase in resting heart rate. Reducing the dose of concomitantly administered insulin secretagogues to reduce the risk of hypoglycaemia should be considered. Pregnancy Category B3. Not for use during pregnancy or breast-feeding. **Undesirable effects:** *Very Common:* nausea, vomiting, diarrhoea, constipation, headache. *Common:* dyspepsia, abdominal pain upper, abdominal distension, eructation, flatulence, gastroesophageal reflux disease, dry mouth, gastritis, hypoglycaemia, injection site reactions, rash, fatigue, asthenia, dizziness, dysgeusia, cholelithiasis, insomnia, increased lipase, increased amylase. (January 2025)



Wegovy® is an unfunded prescription medicine - patient co-payment for medicine and healthcare professional fees apply.

Please review Data Sheet before prescribing. The Data Sheet can be accessed at
<https://www.medsafe.govt.nz/Profs/Datasheet/w/wegovyinjection.pdf> or
<https://www.novonordisk.co.nz/content/dam/nncorp/nz/en/pdfs/datasheets/wegovy-nz-datasheet.pdf>

Wegovy® FlexTouch® (semaglutide solution for injection). Available in the following dose forms: 0.25 mg (0.68 mg/mL), 0.5 mg (1.34 mg/mL), 1.0 mg (1.34 mg/mL), 1.7 mg (2.27 mg/mL) and 2.4 mg (3.2 mg/mL). **Indication:** As an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management (including weight loss and weight maintenance) in adult patients with an initial Body Mass Index (BMI) of ≥ 30 kg/m² (obesity) or ≥ 27 kg/m² to < 30 kg/m² (overweight) in the presence of at least one weight-related comorbidity; in adolescents ages 12 years and above with initial obesity* and body weight above 60 kg (*obesity (BMI ≥ 95 th percentile) as defined on sex- and age-specific BMI growth charts (CDC.gov) – refer to full datasheet); as an adjunct to standard of care therapy to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction or non-fatal stroke) in adults with established cardiovascular disease, with a BMI ≥ 27 kg/m², and without established Type 1 or Type 2 diabetes. Treatment with Wegovy® should be re-evaluated and discontinued if adolescent patients have not reduced their BMI by at least 5% after 12 weeks on the 2.4 mg or maximum tolerated dose. **Dosage and administration:** Administered subcutaneously once weekly at any time of day, with or without meals; starting dose 0.25 mg; increase to a maintenance dose of 2.4 mg over a 16-week period at 4 weekly intervals. In case of significant gastrointestinal symptoms, consider delaying dose escalation until symptoms have improved. If patients do not tolerate the 2.4 mg dose, the dose can be decreased to 1.7 mg weekly. Patients should re-escalate to the 2.4 mg dose if tolerated. Doses higher than 2.4 mg are not recommended. Must not be administered intravenously or intramuscularly. **Contraindications:** Hypersensitivity to semaglutide or any of its excipients. **Warnings and precautions:** Consider the risk of aspiration during general anaesthesia or deep sedation; dehydration in relation to gastrointestinal side effects in patients with impaired renal function may cause deterioration in renal function; there have been postmarketing reports of acute kidney injury and worsening of chronic renal failure. Inform patients of the characteristic symptoms of acute pancreatitis, and discontinue if suspected; do not restart if confirmed. Exercise caution in patients with a history of pancreatitis. Not studied in patients: treated with other products for weight management; with Type 1 diabetes; with congestive heart failure New York Heart Association (NYHA) class IV. Limited experience in patients: aged 85 years or more; with inflammatory bowel disease; with diabetic gastroparesis; with severe renal impairment; with severe hepatic impairment. Must not be used as a substitute for insulin. Should not be used in combination with other GLP-1 products. Treatment in combination with a sulfonylurea or insulin may have an increased risk of hypoglycaemia. The addition of Wegovy® in patients treated with insulin has not been evaluated. Patients with a history of diabetic retinopathy should be monitored for worsening. Not recommended for patients with uncontrolled or unstable diabetic retinopathy. When initiating treatment of semaglutide in patients treated with warfarin or other coumarin derivatives, frequent monitoring of INR is recommended. Pregnancy Category D. Not for use during pregnancy or breastfeeding. **Interactions:** Semaglutide delays gastric emptying, use with caution in patients receiving oral medicinal products that require rapid gastrointestinal absorption. **Undesirable effects:** *Very Common ($\geq 10\%$):* nausea, vomiting, diarrhoea, constipation, abdominal pain, headache, fatigue. *Common (≥ 1 to $< 10\%$):* gastritis, gastroesophageal reflux disease, dyspepsia, eructation, flatulence, abdominal distension, dry mouth, dizziness, dysgeusia, dysaesthesia, cholelithiasis, hair loss, injection site reactions; in patients with Type 2 diabetes: hypoglycaemia, diabetic retinopathy. (April 2025)

References: 1. Wegovy® New Zealand Data Sheet. 2. Rubino DM, *et al.* JAMA. 2022;327:138–150 (including Supplementary Appendix).

Novo Nordisk Pharmaceuticals Ltd., Auckland, New Zealand. Novo Nordisk Medical Information 0800 733 737
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