

GLP-1 RAs for Substance Use Disorder: The Potential and the Challenges



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Introduction

- Substance Use Disorders (SUDs) represent a significant global health burden. Recently, Glucagon-Like Peptide-1 Receptor Agonists (GLP-1 RAs), initially developed for type 2 diabetes and obesity, have emerged as a potential novel treatment for SUDs.
- Preclinical studies and anecdotal reports suggest they may reduce cravings and consumption of alcohol, nicotine, and other psychoactive substances.

Objective

· This review examines the current evidence, underlying mechanisms, and considerable challenges facing the repurposing of GLP-1 RAs for SUD treatment, particularly in the context of rising off-label use and illicit online markets.

Methods

- A narrative review was conducted by searching PubMed, Scopus, and Google Scholar for articles published between 2015 and 2025.
- Keywords such as "GLP-1," "semaglutide," "exenatide", "liraglutide, "substance use disorder," "addiction," "alcohol," and "nicotine." Over 25 relevant preclinical and clinical studies were analyzed.
- Additionally, this review incorporates a regulatory analysis of a report from Indonesia's National Agency of Food and Drug Control (BPOM) on the abuse potential of GLP-1 RAs and an observational analysis of their illicit online sale patterns on Indonesian social media and e-commerce platforms.

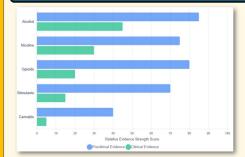
Discussion

- GLP-1 RAs present a mechanistically plausible and promising new avenue for SUD pharmacotherapy.
- · However, the current evidence is largely preclinical, and the hype surrounding their weight-loss effects has dangerously outpaced clinical validation for SUDs.
- The analysis of the Indonesian landscape. as highlighted by the BPOM report, reveals a critical public health threat: a burgeoning black market driven by social media.
- This illicit trade not only exposes users to counterfeit products but also circumvents the necessary medical supervision required to manage significant side effects and complex comorbidities, such as diabetes.
- · A standardized therapeutic framework for SUDs is completely absent, making unsupervised use particularly hazardous.

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References Guerrero et al. Pharmacoepidemiology 2024, 3(4), 365-372; doi: 10.3390/pharma3040025 Jedhag E. Front. Pharmacol. 2023;14:1063033. doi: 10.3389/rphar.2023.1063033 Meneses et al. Int J Mol Sci. 2025 Jun 1;26(11):5338. doi: 10.3390/rjms26115338

Results: The Dual Narrative of Potential and Challenges



Preclinical & Early Clinical Evidence

- Promising reductions in substance intake across various models.
- Data is still limited, but the trend is consistent.

CHALLENGE 1: The Regulatory & Abuse Landscape

BPOM Indonesia: Key Findings

Sharp increase in non-prescribed use for weight loss, fueled by social media.

Identified illegal online promotion and sales channels.

Significant risk of counterfeit or substandard products circulating online.

Emphasizes that GLP-1 RAs are prescriptiononly drugs requiring medical supervision.

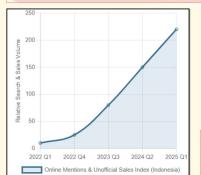
The Illicit Online Sales Pathway

Social Media Hype & Unverified Claims

llicit Sales on E-Commerce & Social Platforms

Oversight

th Risk of Counterfeit Drugs, Improper Dosing & Unmanaged Side Effects



Platform Type	Number of Accounts/Listings Found
Marketplace (Tokopedia, Shopee, etc.)	19
Social Media (TikTok, Instagram)	3
Website	1

Regarding GLP-1 Receptor Agonists (GLP-1 RA) and their potential for SUD treatment, the discussion on Indonesian social media is not as prevalent or specific compared to its main uses for diabetes and obesity.

CHALLENGE 2: Clinical & Safety Barriers

No Standardized Protocols: Optimal dosing, duration, and patient selection for . SUDs are unknown.

Psychiatric Effects: Reports of depression and suicidal ideation are under investigation and require careful monitoring.

Comorbidity Risks: Potential for severe hypoglycemia in patients with comorbid diabetes using other glucose-lowering agents.

Long-Term Efficacy: Durability of effect after treatment cessation is not established.



Conclusions

- GLP-1 RAs hold significant potential for treating SUDs, but they are not a "magic bullet" and are far from ready for widespread clinical use for this indication.
- Conduct large-scale, randomized controlled trials (RCTs) to establish efficacy and safety
- Develop evidence-based clinical guidelines for dosing, monitoring, and patient selection.
- Increase regulatory surveillance and public awareness campaigns to combat illicit online sales and the dangers of self-medication.