

HEALTH YOURSELF * A PHYSICIAN'S GUIDE

Don't Lose the **Wrong Weight**

Protecting Your Muscle on GLP-1 Medications



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Why I wrote this

GLP-1 medications like Ozempic®, Wegovy®, Zepbound®, and Mounjaro® are some of the most effective weight-loss tools we've ever had. As a physician, I'm genuinely glad they exist. But there's a piece of the conversation that almost no one is having with you — and it's the piece that determines whether you come out of this stronger and healthier, or smaller but weaker.

Here's the truth: **when you lose weight on a GLP-1, a significant portion of what you lose can be muscle, not just fat.** And muscle is the single most important tissue for your metabolism, your strength, your independence, and your long-term health.

Here's what most people aren't told: muscle loss is largely preventable — *if* you do a few specific things on purpose. This guide shows you what they are.

*Muscle is medicine.
Protecting it while you lose fat is the whole game.*

What's actually happening on a GLP-1

These medications work by reducing appetite and slowing digestion, so you eat considerably less. That calorie reduction is why they work. But it also creates two risks most people aren't warned about:

- **You're eating far less protein.** When appetite drops, protein is usually the first thing to fall — it's filling and easy to skip. Without enough protein, your body breaks down muscle.
- **You're losing weight fast without a stimulus to keep muscle.** Your body only keeps muscle it's being "asked" to use. Lose weight quickly with no strength training, and your body lets muscle go along with fat.

Research on rapid weight loss consistently shows that a meaningful share of the weight lost can come from lean mass (muscle) when protein and resistance training aren't in place. That's the gap this guide closes.

Why muscle matters more than the scale

Losing "weight" sounds like the goal — until you understand what muscle does for you:

- **It runs your metabolism.** Muscle is metabolically active tissue. Lose it, and you burn fewer calories at rest — which is exactly how people regain weight after the scale drops.
- **It keeps you strong and independent** as you age — carrying groceries, getting off the floor, keeping up with your kids or grandkids.
- **It protects your metabolic health** — better blood sugar control, better insulin sensitivity, lower long-term disease risk.
- **It's what makes you look "toned."** The lean, defined look most women want is muscle — not just a lower number on the scale.

If you lose 30 pounds but a big chunk is muscle, you can end up smaller, softer, weaker, and with a *slower* metabolism than when you started. That's not a win.

The 4 things that protect your muscle

You don't need to do everything perfectly. You need to do these four things consistently.

1

Eat enough protein — every day, on purpose

Protein is the raw material your body uses to preserve muscle. On a GLP-1, this takes intention because your appetite is suppressed.

- Prioritize protein **first** at every meal, before you fill up.
- Aim for a consistent, adequate daily target (your exact number depends on your body weight and goals — something I dial in individually with clients).
- Lean on easy options: Greek yogurt, eggs, chicken, fish, lean meats, and protein shakes when food feels like too much.

2

Strength train 2–4 times per week

This is non-negotiable. Resistance training is the signal that tells your body *"keep this muscle — I'm using it."*

- You don't need to be an athlete or live in the gym.
- Focus on the big movements that work the most muscle: squats, hinges, presses, rows.
- Progress gradually over time — that's what drives results safely.

3

Don't lose weight faster than your muscle can handle

Faster isn't better. A more controlled pace of fat loss, supported by protein and training, protects far more muscle than crashing the scale down as quickly as possible.

4

Track the right things

The scale alone will lie to you. What matters is **body composition** — how much of you is fat vs. muscle. This is why I use body-composition testing with clients instead of just weight, so we can confirm you're losing fat and keeping muscle.

A quick gut-check *

Ask yourself:

- Am I hitting a real protein target most days — or just eating less of everything?
- Am I strength training at least twice a week?
- Do I actually know whether I'm losing fat or muscle, or am I just watching the scale?

If you answered "no" or "not sure" to any of these, you have an opportunity to make this medication work *far* better for your long-term health.

The bottom line

GLP-1 medications can be a powerful tool. But used without protein and strength training, they can cost you the very muscle that keeps you healthy, strong, and metabolically resilient. Used *with* them, you can lose fat, keep (or even build) muscle, and come out the other side genuinely healthier — not just lighter.

That's the difference between losing weight and transforming your health.

YOUR NEXT STEP

Want a plan built for your body?

I'm Dr. Rachel Felber — a board-certified physician and strength coach. I help women lose fat while protecting muscle and metabolic health, with a physician-led, data-driven approach (real labs, real body-composition testing — no guessing).

If you're on a GLP-1, or considering one, and you want to be sure you're doing it the *right* way, I'd love to talk.

Apply for a free consultation

No obligation — just a conversation to see if working together is the right fit.

*This guide is for general education and is not medical advice or a substitute for care from your own physician.
Always consult your prescribing doctor about your medications and health plan.*