



GUIDE 02 · MAREN WHITLOCK



Move to Keep It

The GLP-1 Exercise Guide for Preserving Muscle While Losing Weight

Think before you inject.

A NOTE BEFORE YOU START

Losing weight on a GLP-1 medication is the easy part. Losing the right kind of weight — fat rather than muscle — requires deliberate, consistent movement.

This guide is for men and women who want to protect their muscle mass, strength, bone density, and long-term metabolic health while the medication does its work. No gym membership required. No prior fitness experience necessary.

This guide is educational. Talk to your clinician before changing your exercise routine, especially if you have existing joint, cardiovascular, or metabolic conditions.

What GLP-1 Medications Do to Your Muscle

Multiple studies on semaglutide and tirzepatide show that without deliberate resistance training and adequate protein intake, lean muscle mass loss accompanies fat loss.

Muscle regulates your resting metabolic rate, controls blood sugar, protects your joints, supports your bones, and is most strongly associated with longevity. Losing it during GLP-1 treatment creates a problem that outlasts the medication itself.

The good news is that muscle loss during GLP-1 treatment is largely preventable with the right combination of resistance exercise and protein intake.

***Maren's note:** The medication handles the calorie equation. Your job is to handle the muscle equation.*

The Non-Negotiable Foundation

Resistance training is the single most evidence-supported intervention for preserving muscle during caloric restriction. The minimum effective dose is two sessions per week covering all major muscle groups. Three is better.

FOR EVERYONE — FOUNDATIONAL MOVEMENTS

- Squats — quadriceps, glutes, hamstrings. Start bodyweight, progress to goblet squat
- Hip hinges / deadlifts — posterior chain, lower back, glutes
- Push movements — chest, shoulders, triceps. Push-ups or dumbbell press
- Pull movements — upper back, biceps. Resistance band or dumbbell rows
- Overhead press — shoulders, upper back
- Plank variations — core stability and posture support

FOR MEN — COMPOUND LIFT PROTOCOLS

Men who want to maximize muscle preservation and hormonal support should prioritize heavy compound movements with progressive overload.

- Barbell or dumbbell deadlift — 3 sets of 5 to 8 reps, 2 to 3 times per week
- Barbell or dumbbell squat — 3 sets of 6 to 10 reps
- Bench press or weighted push-up — 3 sets of 6 to 10 reps

- Weighted rows — 3 sets of 8 to 12 reps
- Overhead press — 3 sets of 8 to 12 reps
- Progressive overload — increase weight by the smallest increment each week
- Track your lifts — strength is the metric that matters most

FOR WOMEN — BONE DENSITY AND JOINT HEALTH FOCUS

Women should prioritize weight-bearing resistance exercises. Estrogen decline in perimenopause and postmenopause accelerates bone loss — resistance training is one of the most effective interventions for maintaining bone density at any age.

- Standing exercises are preferred over seated — weight bearing maximizes bone stimulus
- Single leg exercises — lunges and step-ups improve balance and bone density
- Hip extension exercises — protect against osteoporosis-related fracture risk
- Upper body work — vertebral and wrist fracture risk increases with age

Maren's note: *Two sessions per week is the minimum. Start where you are, not where you think you should be.*

03 — WALKING

The Most Underrated Tool in Your GLP-1 Toolkit

Walking after meals is one of the most consistently supported lifestyle interventions for improving glucose uptake, reducing post-meal blood sugar spikes, and supporting digestion. A 2022 meta-analysis by Buffey and colleagues confirmed meaningful metabolic benefit from even short post-meal walks.

- 10 to 15 minutes after each main meal is the minimum effective dose
- 7,000 to 8,000 steps per day is associated with significant health benefits
- Walking outdoors adds natural light exposure supporting circadian rhythm and vitamin D
- A walking pad or under-desk treadmill removes the weather barrier entirely

Maren's note: *Easy and consistent outperforms intense and intermittent on GLP-1 medications where energy is already reduced.*

04 — BREATHWORK

Rebuilding the Body Connection That GLP-1s Quiet

GLP-1 medications affect interoception — the body's ability to sense its own internal signals. Many people describe feeling disconnected from their body in ways that go beyond appetite suppression. Breathwork is a practical neurological intervention for reconnecting with those quieted signals.

- Box breathing: inhale 4, hold 4, exhale 4, hold 4. Repeat 5 to 8 times
- Body scan: 5 minutes lying still moving attention slowly from feet to head
- Diaphragmatic breathing: hand on belly, breathe into the hand not the chest
- 4-7-8 breathing: inhale 4, hold 7, exhale 8. Strong parasympathetic activation
- 5 minutes before each meal to help reconnect hunger and satiety signals

Maren's note: *Try breathwork before meals for two weeks and notice whether awareness of hunger and fullness begins to return.*

05 — EXERCISE TIMING

When to Move When You Have No Energy

Fatigue is one of the most commonly reported GLP-1 side effects. Most users find energy is highest in the morning before cumulative fatigue and post-meal heaviness set in.

FOR MEN — MORNING TRAINING AND TESTOSTERONE

Testosterone levels in men peak naturally in the morning. Many men feel strongest training at this time. Whether morning timing produces meaningfully different muscle outcomes versus later in the day is still debated — but if morning training feels better and gets done more consistently, that consistency is the real advantage.

- Exercise in the morning when energy is typically highest
- Do not exercise immediately after eating — wait 60 to 90 minutes minimum
- Reduce intensity after a dose increase — fatigue dips are temporary
- Light movement on low-energy days is always better than none
- Consistency of schedule matters more than intensity of any single session

Maren's note: Lower the bar on bad days. A ten-minute walk counts. The habit maintained through difficulty is worth more than the perfect session that never happens.

The Hormonal Dimension of Movement

FOR MEN

Heavy resistance training produces acute increases in testosterone and supports long-term hormonal health through reduced body fat, improved insulin sensitivity, and improved sleep quality. Men experiencing reduced libido, motivation, or drive should prioritize heavy resistance training above all other forms of exercise.

- Prioritize compound movements — they produce the greatest acute hormonal response
- Train at 70 to 85 percent of your maximum effort
- Keep sessions to 45 to 60 minutes — longer sessions can increase cortisol
- Sprint intervals once per week — 6 to 8 sprints of 20 to 30 seconds with full recovery
- Sleep is non-negotiable — most testosterone production occurs during deep sleep

FOR WOMEN

Exercise supports estrogen metabolism, reduces perimenopausal symptoms, improves mood through endorphin pathways, and directly supports bone density after 40.

- Weight-bearing exercise is the strongest non-pharmaceutical intervention for bone density
- Yoga and pilates support pelvic floor health and body awareness
- Moderate intensity cardio supports mood and cardiovascular health

***Maren's note:** Choosing the right type of exercise for your specific hormonal needs is as important as the exercise itself.*

07 — RECOVERY

Where the Muscle Is Actually Built

Recovery is where muscle is built. Exercise creates the stimulus. Sleep and nutrition create the adaptation. On GLP-1 medications where food intake and energy are both reduced, recovery takes longer than normal.

Poor sleep undermines the metabolic environment GLP-1 medications work in — and the consequences compound over time. Seven to nine hours is a physiological requirement, not a luxury.

- Allow 48 hours between resistance training sessions targeting the same muscle group

- Protein within 60 minutes after exercise supports muscle protein synthesis
- Active recovery — light walking or stretching — is superior to complete rest on off days
- Soreness is normal. Sharp joint pain is not. Know the difference.
- Prioritize 7 to 9 hours of sleep — this is the most important recovery variable
- Magnesium glycinate before bed supports sleep quality and muscle recovery
- Reduce training volume — not frequency — during high medication side effect periods

Maren's note: Sleep is the most underused performance tool on GLP-1 medications. It costs nothing and produces measurable improvements in muscle preservation, mood, and energy.

The supplements, foods, and products referenced throughout this guide are ones Maren has researched carefully. For current recommendations and vetted links visit Maren's profiles on Instagram, TikTok, and Facebook — or go directly to marenwhitlock.com. These are updated regularly as the evidence evolves.

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This guide is for educational purposes only and does not constitute medical advice. Consult your licensed healthcare provider before making any changes to your medication, diet, or exercise routine.

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