

Information for Patients

Surrey Heartlands Integrated Care Board (ICB) in line with National Institute for Care and Excellence (NICE) and NHS England guidance is working towards ensuring we have a sustainable and equitable weight management programme in place across our local area.

As part of this work tirzepatide, also known as Mounjaro will be available to people who are within the highest risk group and who have been assessed in line with national criteria to have the most urgent clinical need.

Initially, from the end of March 2025, individuals can be referred to the specialist weight management service at Ashford & St Peter's Hospitals NHS Foundation Trust (ASPH) providing they meet the criteria set out below. The team at ASPH will be able to discuss treatment options available such as bariatric surgery and medical options, including tirzepatide for weight loss. GPs and health care professionals in primary care will currently **not** be able to prescribe tirzepatide.

People who meet the criteria will have the following:

A Body Mass Index (BMI) of 35 kg/m² or above (-2.5 kg/m² for ethnic minorities) and **one** of the following:

- Precancerous or cancerous condition in which weight loss would aid access to therapies
- Patients requiring urgent weight loss for organ transplant
- Idiopathic intracranial hypertension (IIH) requiring frequent lumbar punctures under neurology specialist and/or with visual compromise
- Patients awaiting surgery for life limiting conditions, where high BMI is the primary barrier to surgery and weight loss would be beneficial
- Weight loss required for assisted conception in women currently not eligible for fertility treatment and have been advised to lose weight
- Proven genetic cause of obesity and not eligible for setmelanotide (Imcivree®)
- Severe Obstructive Sleep Apnoea

As work progresses around the establishment of our weight management programme, including establishing a service delivering care in the primary care setting from the end of June 2025, the criteria will be reviewed and updated. NHS England has advised that in the first year individuals with the most urgent clinical need to be prioritised for treatment in primary care as detailed below:

- BMI **≥40 and** **≥ 4** qualifying comorbidities:
 - Atherosclerotic Cardiovascular disease: Ischaemic Heart Disease, cerebrovascular disease, peripheral vascular disease, heart failure
 - Hypertension: established diagnosis of hypertension **and** requiring BP lowering therapy
 - Dyslipidaemia: treated with lipid lowering therapy or with LDL **≥**4.1mmol/L or HDL **<**1.0mmol/L for men or HDL **<**1.3mmol/L for women, or fasting TG **≥**1.7mmol/L
 - Obstructive sleep apnoea (OSA): established diagnosis of OSA (sleep clinic confirmation via sleep study) **and** treatment indicated
 - Type 2 diabetes mellitus (T2DM): established T2DM