



OMNI Report

# GLP-1 Usage in Canada and the US

March 3, 2026



# Table of Contents

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Methodology	3
Key Highlights	4
Detailed Findings	7
Respondent Profile	20

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# Methodology



## Methodology

Online survey with Canadian and American residents aged 18 years and older.

- **Canada:**
  - n= 1,536
- **United States:**
  - n=1,012

Respondents were randomly recruited using LEO's online panel.



## When

Surveys conducted from February 6-9, 2026.



## Margin of Error

A margin of error cannot be associated with a non-probability sample in a panel survey. However, a probability sample of comparable size would yield the following margins of error:

- **Canada:** A sample of 1,536 respondents yields a margin of error of  $\pm 2.5\%$  (19 times out of 20)
- **United States:** A sample of 1,012 respondents yields a margin of error of  $\pm 3.1\%$  (19 times out of 20).



## Weighting

Results were weighted by age, gender, and region to ensure the data is representative of the Canadian and U.S. populations, using the most recent census data from Statistics Canada and the U.S. Census Bureau.

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## Key Highlights

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Some of **the key highlights** of our survey...

## **GLP-1 use higher in the U.S. than Canada**

More American adults report currently taking a prescription GLP-1 compared to Canadians (11% vs. 8%). In population terms, this represents a substantial user base. Applying these rates to 2025 adult population estimates suggests 28M+ adults in the U.S. and 3M+ adults in Canada are currently taking a prescription GLP-1 medication.

## **Americans twice as likely to have an interest in taking a GLP-1**

Among those surveyed not taking a prescription GLP-1 medication, more Americans than Canadians indicated they have an interest in taking a GLP-1 (12% vs. 6%). Extrapolating, this represents nearly 29M Americans and 2M+ Canadians reporting an interest in taking a GLP-1.

## **Weight loss is the top reason for considering a GLP-1**

Among respondents who take, have taken, or would consider taking a GLP-1, the primary reason for interest in a GLP-1 or alternative is weight loss (Canada: 58%; U.S.: 71%), followed by metabolic health/diabetes. Women are more likely to cite weight loss, while men are more likely than women to cite heart health/cardiovascular risk reduction.

## **Cost is the number one factor influencing likelihood to use a GLP-1**

Among Canadians with past/current/prospective GLP-1 interest (including alternative users), over half say insurance coverage or a lower-cost generic would increase their likelihood of using a prescription GLP-1.

## Key Highlights

### **Self-reported Wellness Gains Extend Beyond Weight Loss**

Many GLP-1 users in the US and Canada report meaningful improvements in confidence, energy, and emotional well-being, with the greatest impact being fewer cravings and lower appetites.

### **Spending Is Being Reallocated Toward Wellness and Lifestyle**

In both markets, dollars are moving away from restaurants and indulgent categories and toward clothing, fitness, personal care, and health-related products.

### **Healthier Consumption Patterns Are Emerging**

Fresh produce and protein-rich foods are on the rise, while snacks, sugary drinks, alcohol, and takeout are declining. Although the direction is consistent cross-border, there is a marked difference in the uptake in fresh produce among American respondents taking a GLP-1 versus Canadians.

### **Restaurant Habits Reflect Portion and Moderation Shifts**

Users are ordering smaller portions, choosing lighter options, skipping appetizers or desserts, and sharing more often.

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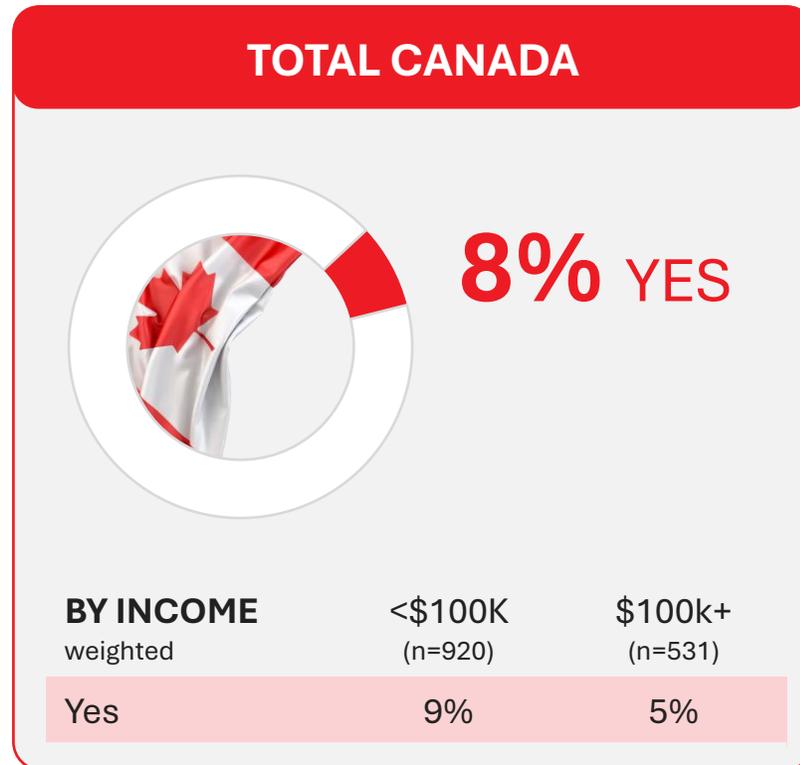
## Detailed Findings



# Adults Currently Taking Prescribed GLP-1 Medication

American adults are more likely than Canadian adults to report taking a prescription GLP-1 (11% versus 8%, respectively).

Extrapolating based on 2025 adult population statistics, these figures suggest that **28M Americans and 3M Canadians** are currently taking a GLP-1 prescription medication.



Base: Canadian residents (n=1,536); U.S. residents (n=1,012). Not all respondents chose to answer this question.

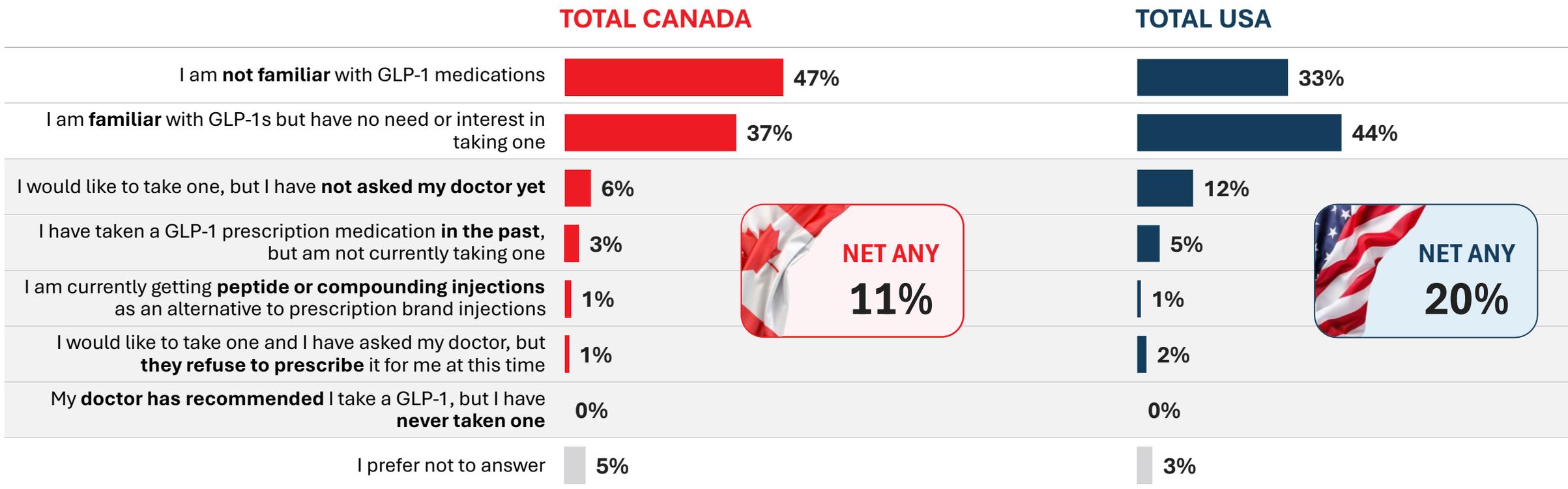
Q3. Are you currently taking a prescription GLP-1 medication that a medical professional has prescribed for you (e.g., Ozempic, Wegovy, Zepbound, Mounjaro, Saxenda, Vlcotoza, Dulaglutide)?

Significantly higher than comparison group(s)

# Personal Experience with GLP-1 Medications

Americans are more likely than Canadians to have an interest in taking a GLP-1 but have not talked to their doctor yet (12% vs. 6% of those not currently taking a prescription GLP-1). If we extrapolate based on the percentage surveyed not taking GLP-1s and apply these to population statistics in each country, that means **nearly 29M Americans and over 2M Canadians would like to take a GLP-1 but have not asked their doctor yet.**

Canadians are more likely to not be familiar with GLP-1 medications (47% vs 33%), which could explain the lower interest rate in Canada. Other reasons could include the higher prevalence of obesity and Type 2 Diabetes in the US versus Canada<sup>1</sup>.



Base: Not currently taking a GLP-1. Canadian residents (n=1,410); U.S. residents (n=894)

Q4. You indicated you are not currently taking a prescription GLP-1 medication. Which of the following best describes your personal experience with GLP-1 medications?

<sup>1</sup> Statistics Canada, Diabetes Atlas, CDC

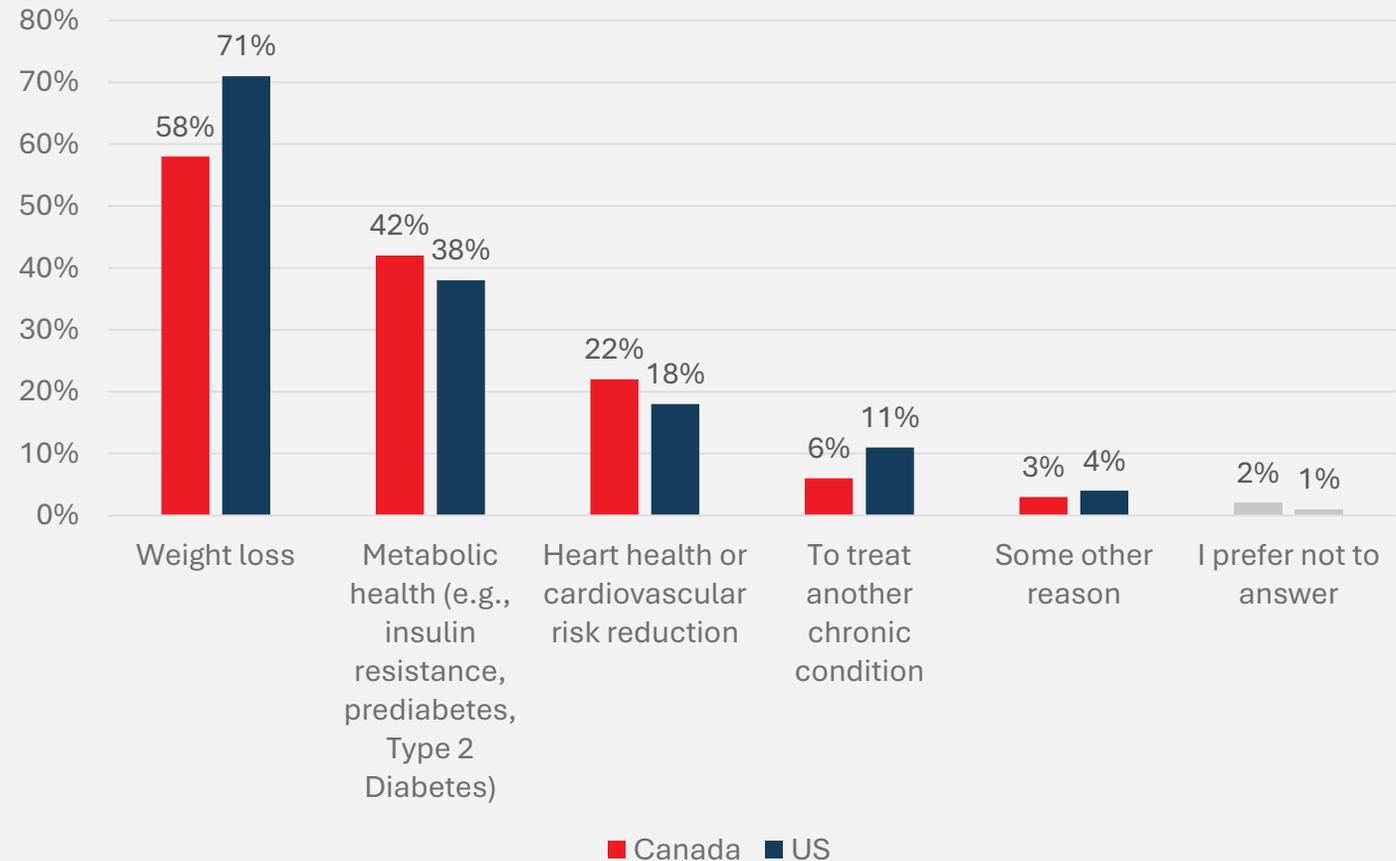
# Primary Reasons for Interest in GLP-1 or Alternative Agent

- Weight loss is the primary reason cited for taking a GLP-1 (past, current, considering).
- Men are more interested in taking GLP-1s for heart health:

Canadian men: 29%  
 Canadian women: 14%  
 American men: 23%  
 American women: 12%

- Women are more interested in taking GLP-1s for weight loss:

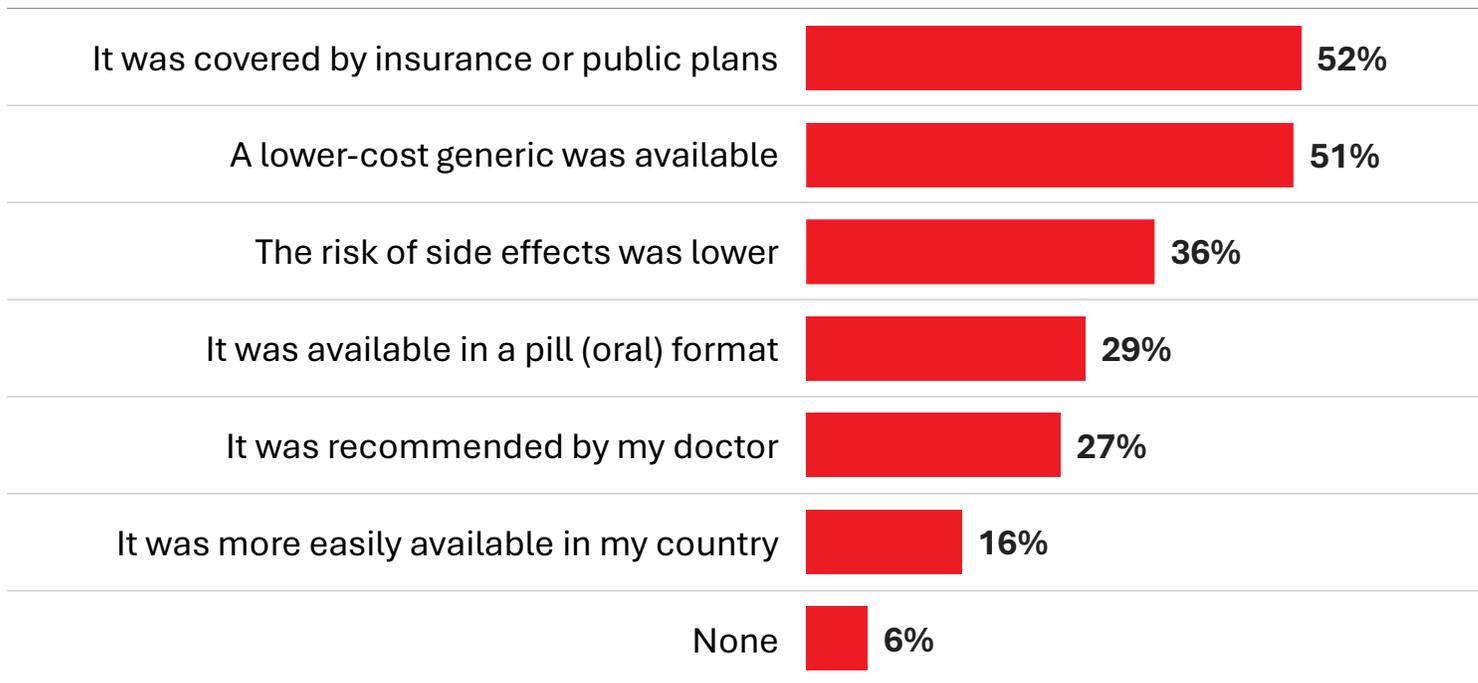
Canadian men: 41%  
 Canadian women: 71%  
 American men: 64%  
 American women: 77%



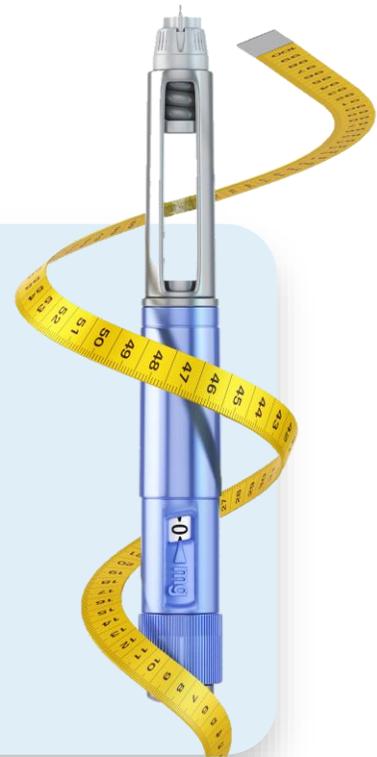
# Drivers of Future GLP-1 Consideration

Among Canadians who either have taken a GLP-1 in the past, are taking an alternative, or would like to take a GLP-1, **half indicated insurance coverage or a lower cost generic version would affect their likelihood of using a prescription GLP-1.** Women were more likely than men to be influenced by price, which may be in part because more women are taking GLP-1s for weight loss, which is more likely to incur out of pocket costs.

## TOTAL CANADA



1/3 of Canadian respondents indicated a pill format would impact their likelihood of taking a prescription GLP-1 medication.

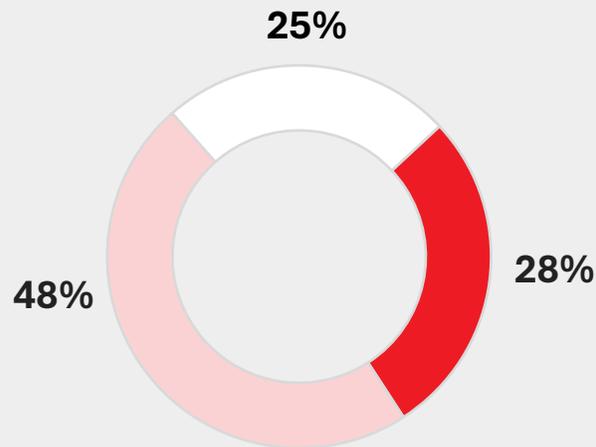


# Method of Payment for GLP-1 Medications (Canada)

Among Canadians surveyed who are taking a GLP-1, a quarter were paying out of pocket, another quarter had their prescription fully covered by insurance, and half had partial coverage. Male respondents—who more often reported using GLP-1s for heart health—were more likely to report partial coverage. Female respondents—who more often reported using GLP-1s for weight loss—were more likely to report paying fully out of pocket.

## TOTAL CANADA

- 100% covered by insurance
- Partially covered by insurance
- 100% out of pocket

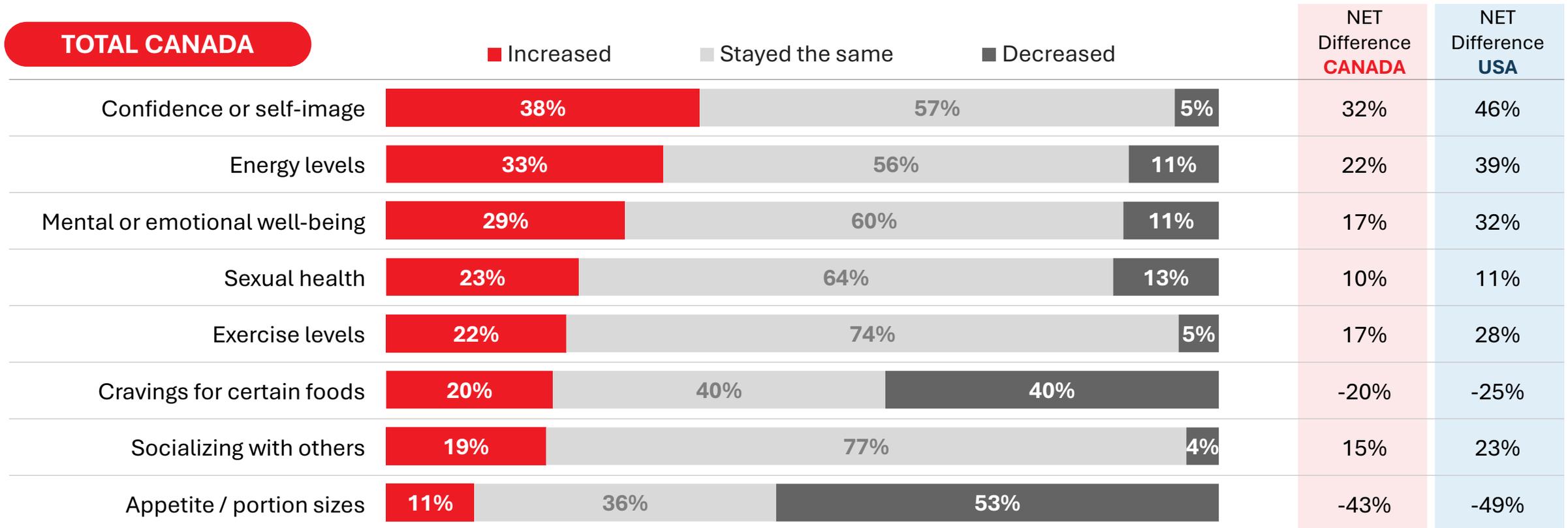


### BY GENDER

	Male (n=69)	Female (n=57)
100% covered by insurance	25%	30%
Partially covered by insurance	61%	33%
100% out of pocket	13%	36%

# Impact of GLP-1 Medications on Self-Reported Well-Being

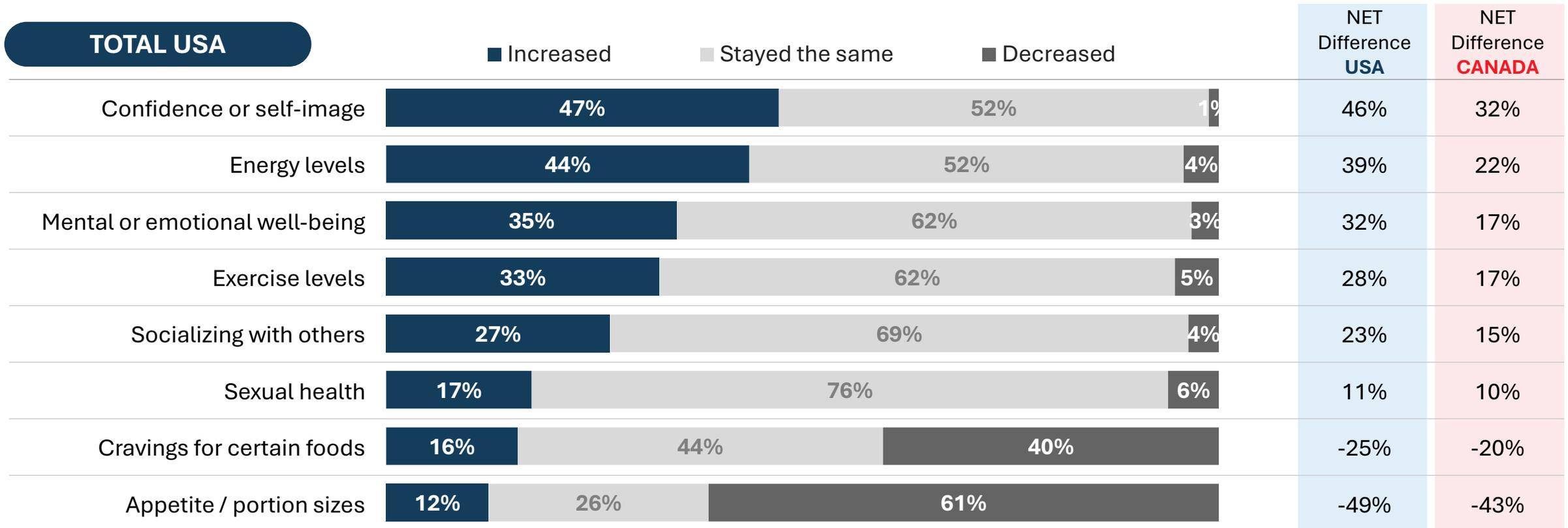
Approximately 1/3 of Canadian GLP-1 users report meaningful improvements in confidence, energy, and emotional well-being. The greatest impacts, however, have been fewer cravings for 40% of users and lower appetite/portion sizes for over 50% of GLP-1 users in Canada.



Base: Canadian residents who are current users (n=126); U.S. residents who are current users (n=118)  
 Q8. What impact has taking a GLP-1 medication had on the following?

# Impact of GLP-1 Medications on Self-Reported Well-Being

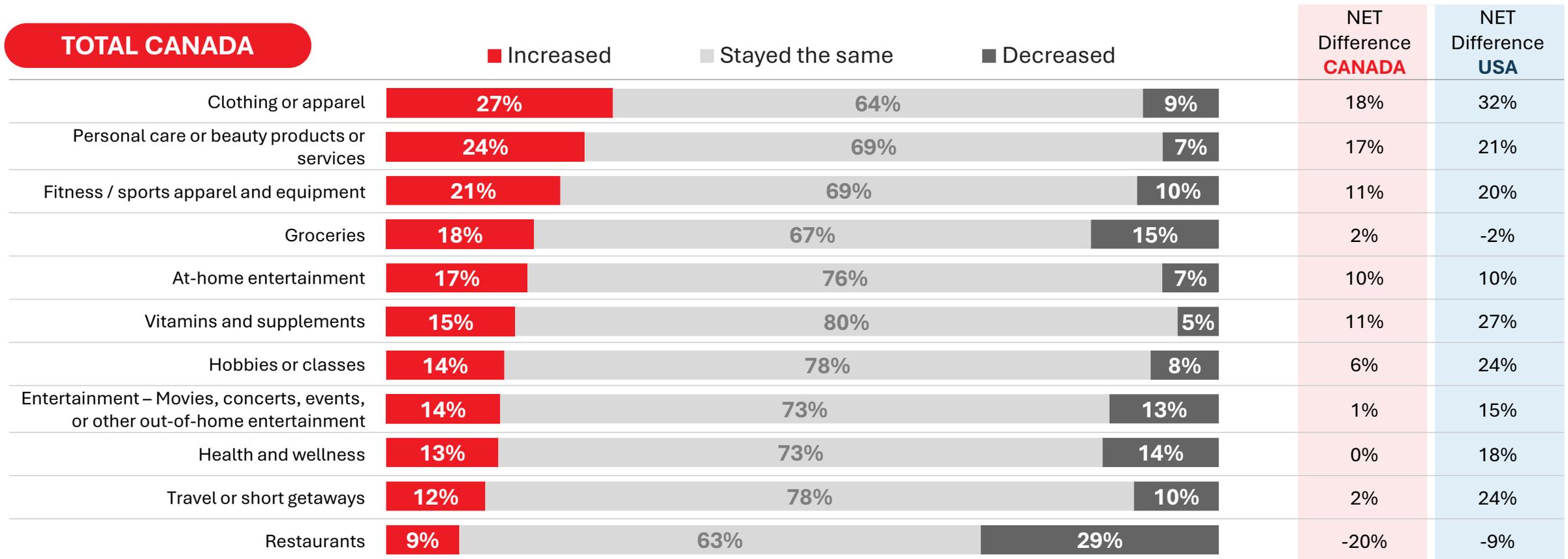
Mirroring the Canadian results, **GLP-1 medications in the U.S. are reshaping more than weight.** Most notably, almost half of Americans using prescription GLP-1 medications report increased confidence or self-image.



Base: U.S. residents who are current users (n=118); Canadian residents who are current users (n=126)  
 Q8. What impact has taking a GLP-1 medication had on the following?

# Spending Changes Since Starting GLP-1 Medications

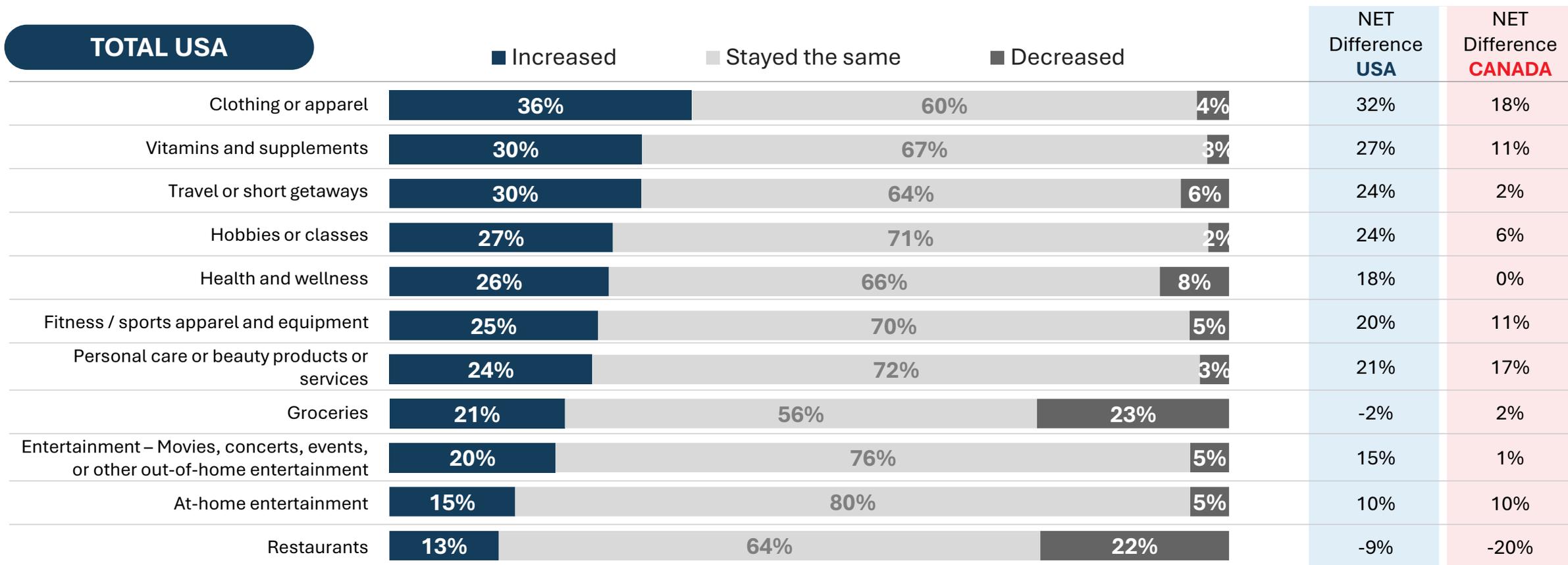
Among Canadians, GLP-1 use is reshaping spending patterns — with dollars shifting toward appearance, wellness, and lifestyle enhancement. The largest increases are in **clothing and apparel, personal care, and fitness-related categories**, reinforcing the confidence and well-being gains seen earlier. At the same time, restaurant spending shows the most notable decline, suggesting that reduced appetite and fewer cravings are influencing foodservice dollars — while overall spend reallocates toward feeling good, looking good, and living well.



Base: Canadian residents who are current users (n=126); U.S. residents who are current users (n=118)  
 Q9. Since starting a GLP-1 medication, how has your spending changed in each of the following areas, if at all, due to taking a GLP-1 medication?

# Spending Changes Since Starting GLP-1 Medications

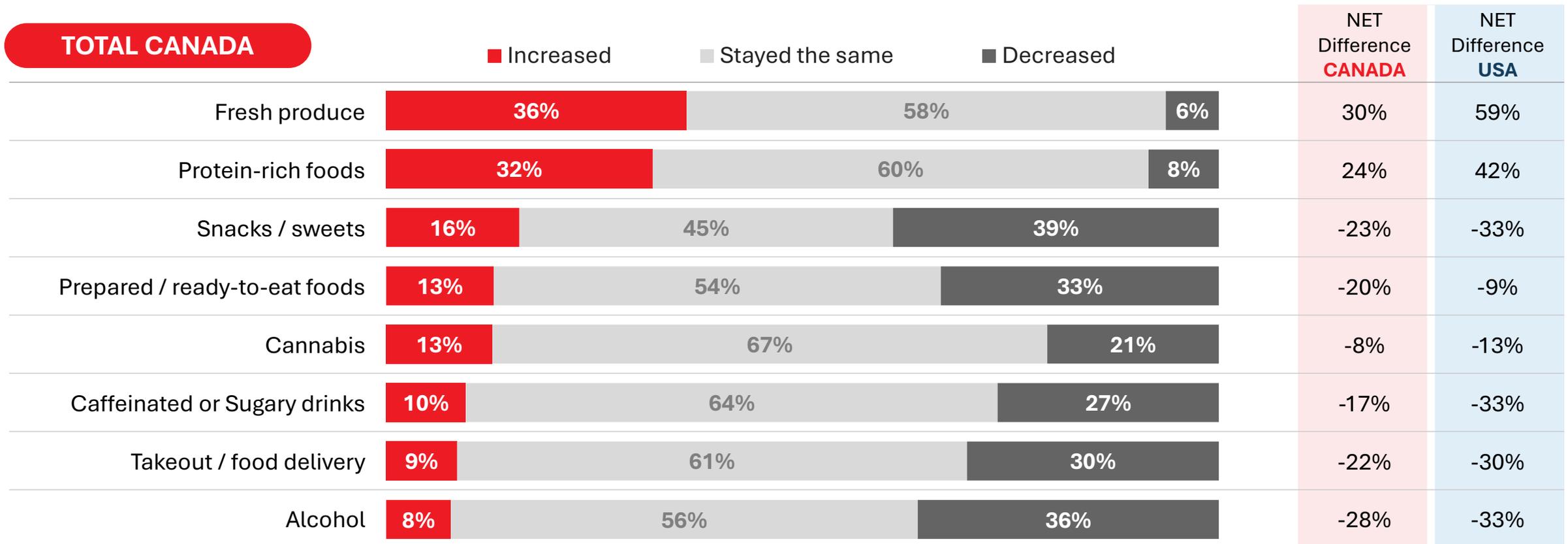
Mirroring the Canadian shift, GLP-1 use in the U.S. is reallocating spending toward appearance, wellness, and lifestyle categories. Americans report stronger increases in **clothing, vitamins and supplements, travel, hobbies, and health & wellness**, reinforcing earlier gains in confidence and vitality. As in Canada, restaurant spending is one of the few categories in net decline, suggesting reduced appetite and fewer cravings are impacting foodservice — while dollars shift toward feeling better, looking better, and living more actively.



Base: U.S. residents who are current users (n=118); Canadian residents who are current users (n=126)  
 Q9. Since starting a GLP-1 medication, how has your spending changed in each of the following areas, if at all, due to taking a GLP-1 medication?

# Consumption Changes Since Starting GLP-1 Medications

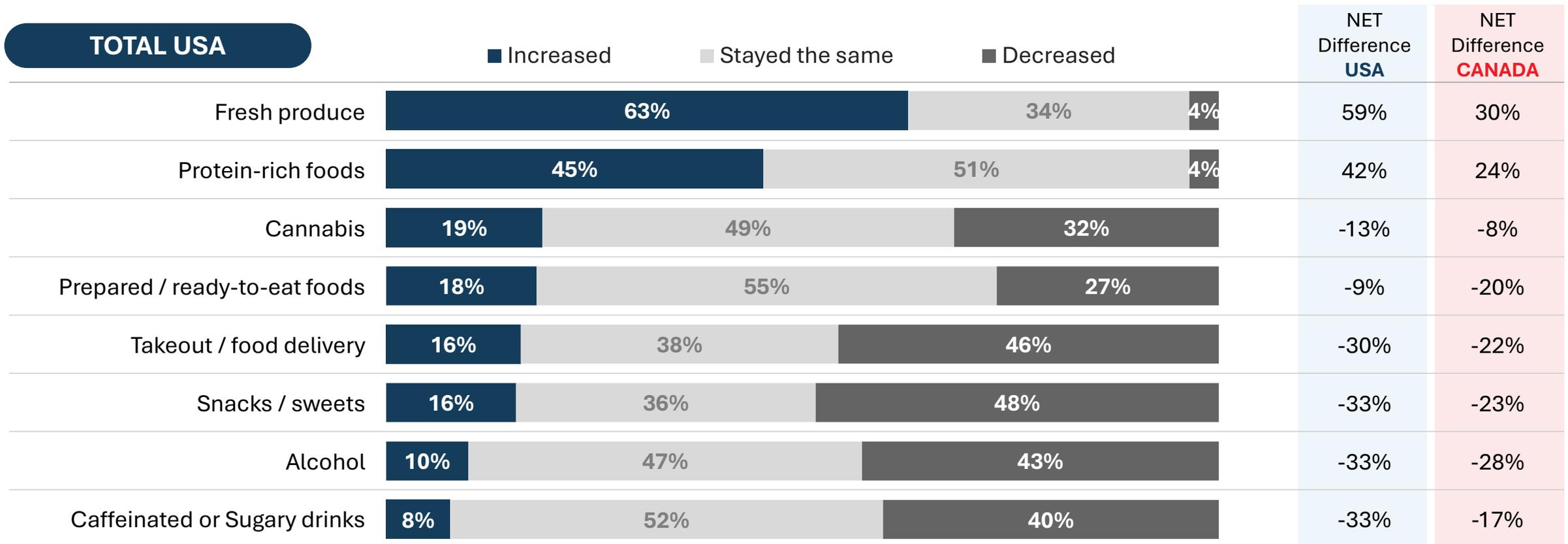
GLP-1 use is shifting consumption **toward fresh produce and protein-rich foods**, while **reducing intake of snacks, ready-to-eat meals, takeout, sugary drinks, and alcohol** — reflecting fewer cravings and more intentional eating. While the pattern is consistent across both markets, declines in indulgent categories are generally even more pronounced in the U.S., reinforcing the scale of behavioral change south of the border.



Base: Canadian residents who are current users (n=126); U.S. residents who are current users (n=118)  
 Q10. How has your consumption of the following changed since taking a GLP-1?

# Consumption Changes Since Starting GLP-1 Medications

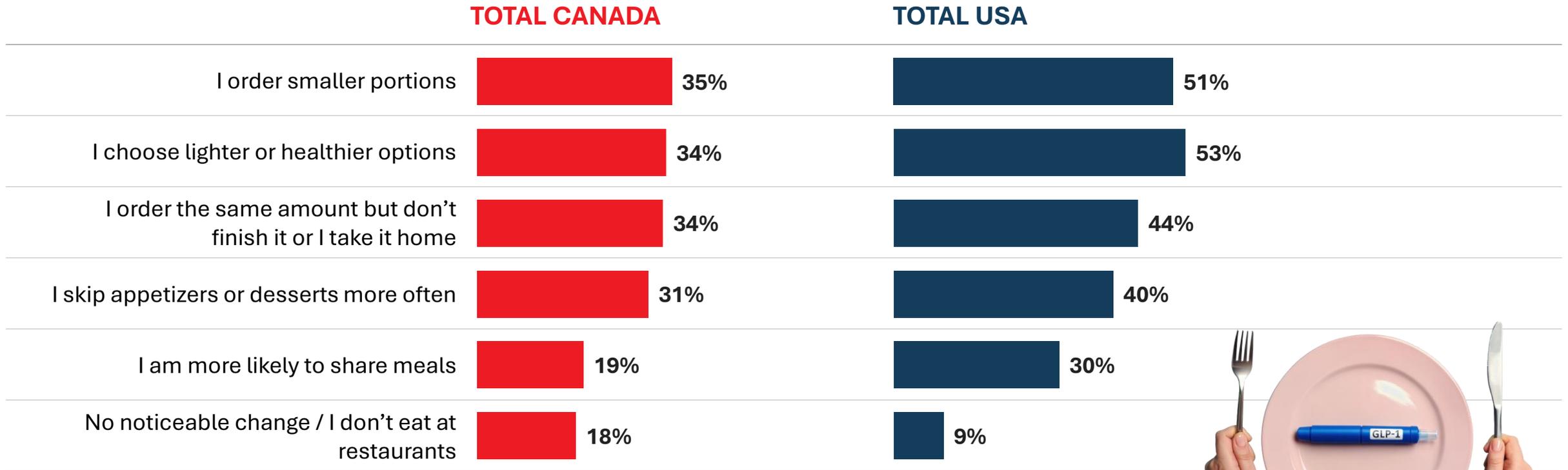
GLP-1 use in the U.S. is driving a pronounced shift **toward fresh produce and protein-rich foods**, alongside **sharp declines in takeout, snacks and sweets, alcohol, and sugary drinks** — underscoring fewer cravings and more intentional consumption. While the direction mirrors Canada, the magnitude of change is generally stronger in the U.S., particularly in the move toward fresh foods and away from indulgent categories.



Base: U.S. residents who are current users (n=118); Canadian residents who are current users (n=126)  
 Q10. How has your consumption of the following changed since taking a GLP-1?

# Changes to Restaurant Ordering Habits Since Taking GLP-1 Medications

GLP-1 use is clearly reshaping restaurant behavior, with many opting for **smaller portions, lighter options, skipping appetizers or desserts, and sharing more often**. A significant share also order the same amount but don't finish, reinforcing the impact of reduced appetite. While the pattern is consistent across both markets, **changes are notably more pronounced in the U.S.**, where fewer report “no noticeable change” and more are actively adjusting how — and how much — they order.



Base: Canadian residents who are current users (n=126); U.S. residents who are current users (n=118)  
 Q11. When eating at restaurants, which best describes how your ordering habits have changed since taking a GLP-1?

# 3

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## Respondent Profile



## Weighted and Unweighted Sample

The tables below present the distribution of respondents on key variables before and after weighting.

February 2026

	Weighted	Unweighted
<b>Region Canada</b>	<b>1,536</b>	<b>1,536</b>
British Columbia	213	160
Alberta	171	129
Saskatchewan/Manitoba	99	129
Ontario	595	601
Quebec	355	416
Atlantic	103	101
<b>Region US</b>	<b>1,012</b>	<b>1,012</b>
Northeast	173	193
Midwest	215	229
South	396	374
West	228	216

February 2026

	Canadian Residents		U.S. Residents	
	Weighted	Unweighted	Weighted	Unweighted
<b>Area</b>				
Urban	668	671	323	270
Suburban	572	561	452	502
Rural	280	294	236	240
<b>Gender</b>				
Male	749	772	487	520
Female	787	764	525	492
<b>Age</b>				
18-34	410	372	272	124
35-54	494	440	333	301
55+	633	724	407	587

# Our services

## Leger

Marketing research and polling

## Customer Experience (CX)

Strategic and operational customer experience consulting services

## Leger Analytics (LEA)

Data modelling and analysis

## Leger Opinion (LEO)

Panel management

## Leger Communities

Online community management

## Leger Digital

Digital strategy and user experience

## International Research

Worldwide Independent Network (WIN)

**300**  
employees

**235**  
consultants

**8**  
offices

MONTREAL | QUEBEC |  
TORONTO | WINNIPEG  
EDMONTON | CALGARY |  
VANCOUVER | NEW YORK

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