

Dr Pothan Alexander  
Dr Vikas Dullo  
Dr Anna Alexander  
Dr Jonathan Jeyatheswaran



13<sup>th</sup> May 2025

Dear Patient

We receive frequent enquiries asking if the General Practitioner could prescribe weight loss injections on the NHS, namely Mounjaro.

The current pathway for your weight loss journey is a Tier 2 and Tier 3 pathway.

All patients must complete the Tier 2 local Public Health free 12 week weight management programme to lose weight if your BMI is between 25-39.9. You can self-refer online at

[https://my.crawley.gov.uk/service/wellbeing\\_support\\_request](https://my.crawley.gov.uk/service/wellbeing_support_request)

If at the end of the 12 weeks you have not lost 5% of your body weight and you fit into one of the following categories you can be referred to the Tier 3 pathway.

<input type="checkbox"/> <b>SECTION 4A: REFERRAL CRITERIA FOR TIER 3 SERVICES</b>
Patient meets <b>all</b> of the criteria below: <i>(tick to confirm)</i>
<input type="checkbox"/> Adult (18 years and over)
<b>AND</b>
<input type="checkbox"/> Fully engaged & completed a Tier 2 programme without losing 5% whilst being compliant
<b>AND</b> one of:
<input type="checkbox"/> BMI >40 kg/m <sup>2</sup> <b>OR</b>
<input type="checkbox"/> BMI >35 kg/m <sup>2</sup> with co-morbidities <b>OR</b>
<input type="checkbox"/> BMI of >30 kg/m <sup>2</sup> with type 2 diabetes and is considering bariatric surgery <b>OR</b>
<input type="checkbox"/> BMI of >27.5 kg/m <sup>2</sup> , with recent-onset type 2 diabetes and who are of a South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean family background
<b>OR</b>
<input type="checkbox"/> Adult with BMI >50 who have not yet engaged with weight management services, at GP discretion. Best practice is to consider bariatric surgery as a first-line treatment for those with a BMI >50. See <a href="https://ebi.aomrc.org.uk/interventions/referral-for-bariatric-surgery">https://ebi.aomrc.org.uk/interventions/referral-for-bariatric-surgery</a>
<b>EXCLUSIONS AND CAUTIONS FOR TIER 3 SERVICES:</b>
<b>For consideration and discussion with Tier 3 service</b>
<ul style="list-style-type: none"><li>• Those with suicidal thoughts or who have self-harmed within the last 6 months</li><li>• Those with unstable mental health condition</li><li>• Patients must be clear of addiction for at least 6 months, e.g., alcohol or recreational drugs</li><li>• Patients who have been previously referred into the service and have left a pathway early or have disengaged from the services within the last two years</li></ul>

The accepted comorbidities are at least one co-existing health condition related to weight such as Type 2 Diabetes, high blood pressure, high cholesterol, sleep apnoea or heart disease.

Patients may begin to hear in the News that Mounjaro will be rolled out in the NHS from late June 2025 therefore we wanted to clarify how this NHS England initiative is going to be planned.

The local Integrated Care Boards have been asked to meet the costs of treatment for obesity in Primary Care from the 23<sup>rd</sup> June 2025. Tirzepatide (Mounjaro) will be made available to prioritised cohorts on a phased basis. The funding recommends the identification of 220,000 individuals over three years as part of a phased introduction for delivering Tirzepatide (Mounjaro).

The phasing table is shown below.

As you will see year 1 is focused on those with a BMI over 40 with four qualifying comorbidities.

In year 2 (2026/27) people with a BMI of 35-39.9 with four qualifying comorbidities will be eligible.

In year 2/ 3 (2026 and 2027/28) people with a BMI over 40 with three qualifying comorbidities will become eligible.

Funding Variation Year*	Estimated Cohort Duration	Cohorts	Cohort Access Groups	
			Comorbidities	BMI**
Year 1 (2025/26)	12 months	Cohort I	≥4 'qualifying' comorbidities hypertension, dyslipidaemia, obstructive sleep apnoea, cardiovascular disease,  type 2 diabetes mellitus	≥ 40
Year 2 (2026/27)	9 months	Cohort II	≥4 'qualifying' comorbidities hypertension, dyslipidaemia, obstructive sleep apnoea, cardiovascular disease,  type 2 diabetes mellitus	35 – 39.9
Year 2/3 (2026 and 2027/28)	15 months	Cohort III	3 'qualifying comorbidities hypertension, dyslipidaemia, obstructive sleep apnoea, cardiovascular disease, type 2 diabetes mellitus	≥ 40

The qualifying comorbidities are

<b>Qualifying Comorbidities</b>	<b>Definition for Initial Assessment</b>
Atherosclerotic cardiovascular disease (ASCVD)	Established atherosclerotic CVD (ischaemic heart disease, cerebrovascular disease, peripheral vascular disease, heart failure)
Hypertension	Established diagnosis of hypertension and requiring blood pressure lowering therapy
Dyslipidaemia	Treated with lipid-lowering therapy, or with low-density lipoprotein (LDL) $\geq 4.1$ mmol/L, or high-density lipoprotein (HDL) $<1.0$ mmol/L for men or HDL $<1.3$ mmol/L for women, or fasting (where possible) triglycerides $\geq 1.7$ mmol/L
Obstructive Sleep Apnoea (OSA)	Established diagnosis of OSA (sleep clinic confirmation via sleep study) and treatment indicated i.e. meets criteria for continuous positive airway pressure (CPAP) or equivalent
Type 2 diabetes mellitus	Established type 2 diabetes mellitus *

The practice are waiting for further guidance on when and how we will be offering phase one to those eligible. We will be in touch with further information to anyone who fits this eligible criteria once this has been clarified to us.

In the meanwhile we actively encourage everyone to review the guidance about the Tier 2 pathway and self-refer. Should after completing this 12 week programme you wish to be referred for Tier 3 and feel you are eligible we will be happy to check this and refer as appropriate.

Yours sincerely

**Sharon Nunweek**  
**Practice Manager**