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A GUIDE FROM THE METHOD

The GLP-1 Companion

Muscle, protein, appetite, and the plan for after.

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First, the boundary

Whether to start, continue, or stop a GLP-1 medication is a decision for you and your physician; this guide takes no position on it. What follows is the lifestyle work around the prescription, which too often goes unmanaged.

What rapid loss takes with it

When weight leaves quickly, the body does not neatly choose fat. Some of what goes is muscle, and losing it is how women arrive at a smaller number feeling weaker and colder, with a slower engine waiting on the other side. Protecting muscle is the whole game.

The two-part job

The playbook is boring and non-negotiable:

- Resistance, two to four times a week. Muscle stays when it is given a reason; walking, wonderful as it is, does not count for this purpose.
- Protein, scheduled rather than left to appetite. When you barely want dinner, protein goes first on the plate, every time.
- Hydration and electrolytes, because appetite suppression quiets thirst signals too.
- Sleep guarded like an appointment; recovery is where the body decides what to keep.

Planning the after

Appetite returns in some form for most who stop. The women who do well built the standard during the medicated months: the strength habit, the protein defaults, the honest mirror. The medication was a tool. The standard is the exit plan.

No moralizing, no fear. Evidence, and a plan.