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Abigail Cowher: PEIA faces weighty decision (Opinion)

By Abigail Cowher

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After years of college and medical school research, I'd never once gotten emotional while reading interviews from research participants. That is, until I came across an interview of one of the many patients losing insurance coverage for their anti-obesity medication: a breast cancer survivor who had gained weight as a result of her hormonal cancer treatment.

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As I read the interview, I was instantly reminded of how my own weight fluctuated while undergoing cancer treatment. I was entirely at the mercy of whichever medication I needed at the time and felt like a stranger in my own body. It has taken over a year of being cancer-free for me to start feeling like myself again, and I can't imagine someone taking away one of the tools I've been using to do so.

This, unfortunately, is a painful reality that the previously mentioned patient must face, and while she was unique among interviewees in her identity as a cancer survivor, she was far from the only patient out of the dozens interviewed that had extenuating circumstances impacting their ability to lose weight. In addition, all patients interviewed about PEIA refusing to continue coverage for their anti-obesity medication were enrolled in a specialized weight management program at West Virginia University Medicine, which follows the current guideline-based treatment for obesity— a combination of behavioral modification, nutrition, exercise, and medical considerations.

The rising obesity rates in the United States are widely considered to be a public health crisis, and West Virginia leads the nation with the highest prevalence of obesity.

While dismissed by some as simply a cosmetic issue, obesity can impact the health of every system in an individual's body and is associated with type 2 diabetes; dyslipidemia; hypertension; coronary artery disease; osteoarthritis; gout; gastroesophageal reflux disease; gallbladder disease; nonalcoholic fatty liver disease; obstructive sleep apnea; asthma; depression; anxiety; increased cancer risk; infertility; erectile dysfunction; and chronic inflammation. In fact, medical complications of obesity cost the U.S. an estimated \$173 billion annually. This compels us to ask: why can't we do better?

Anti-obesity medications are highly effective, safe options that aid in weight reduction. When used appropriately along with lifestyle changes, these drugs can help patients lose as much as 20% of their body weight.

For comparison, intense lifestyle-only changes usually result in a mere 5% to 7% loss. Some of the most effective anti-obesity medications on the market, a drug class known as the GLP-1 agonists, are the subject of PEIA's recent policy change. GLP-1 agonists can also be used in the treatment of diabetes and include medications like Ozempic, Wegovy, Zepbound, and Victoza, among others.

These drugs, due to a combination of their high efficacy and minimal side-effects, have been nothing short of life-changing for many West Virginia residents, enabling them to perform better at their jobs, have a higher quality of life, and resolve many of the chronic health issues that were associated with their weight.

However, due to the high retail price of GLP-1 agonists (roughly \$1,000 per month), PEIA has decided to discontinue coverage of the medications for weight-loss indications with minimal efforts to offer any alternative, let alone one nearly as effective as the GLP-1 agonists.

For example, one alternative that was offered to patients was a gym membership with personal trainers. While this seems like a good option on the surface, it does little to help obese patients who are disabled or who live in rural areas, where the nearest gym included in the program is over an hour away.

Frankly, PEIA's most recent meeting on the topic last month centered around one main concern: the upfront cost of providing GLP-agonists to West Virginians. Fiscal considerations that were neglected in the conversation include lost investment in patients who are having these drugs taken away, regardless of where they are at in their treatment, and the eventual cost the state will incur from the many complications these patients will undoubtedly experience as a result of their untreated obesity.

As a future doctor and proud West Virginia native, I urge you to advocate for your health and the health of your neighbors. Reach out to your local legislators and tell them to push

PEIA to make a more reasonable decision regarding the coverage of anti-obesity medications, one that not only considers finances, but the wellbeing of the state of West Virginia.

Abigail Cowher is a third-year medical student at the West Virginia University School of Medicine and is a medical researcher with multiple peer-reviewed publications. She was born and raised in Weirton and looks forward to serving the state as a physician.