

Factsheet:

Almonds and Weight Loss Medications



For people using GLP-1 weight loss medications, keep almonds on the menu. Research suggests a handful of almonds a day supports good nutrition, improves overall diet quality, and aids in weight management.

Prescription medications called GLP-1 receptor agonists are used to support weight management and to help manage blood sugar levels in people with type 2 diabetes. These medications work in part by reducing appetite and increasing fullness, which can lower overall calorie intake.



GLP-1 (glucagon-like peptide-1) is a hormone that's naturally released by the body after eating. It slows down the emptying of the stomach, increases feelings of fullness, and helps regulate appetite and blood sugar levels. GLP-1 medications work by mimicking the effect of this hormone.

Almonds: the perfect partner for healthy eating

Because GLP-1 medications often reduce the amount of food people can comfortably eat, meeting nutrient needs with smaller portions can be challenging. This is where almonds shine. They contain protein, fiber, and many vitamins and minerals, so can help to fill nutrient gaps. This makes them an ideal complement for weight loss plans that include GLP-1 medications. Here are some of the key nutrients that almonds provide...

- **Protein:** A 28g/1oz serving of almonds contains 6g protein, a nutrient that builds and

maintains muscle. Research shows weight loss leads to a loss of muscle as well as fat¹, so it's vital to get enough protein to help preserve muscle when losing weight. Protein-containing foods can also promote satiety.²

- **Fiber:** Almonds are a good source of fiber, which keeps the digestive system working well and aids fullness, further supporting weight management. A 28g/1oz serving provides 4g of fiber – 14% of the recommended daily amount.
- **Healthy fats:** A one ounce serving of almonds has 13 grams of healthy unsaturated fats and just 1 gram of saturated fat. Good unsaturated fats support heart health; they can maintain or reduce cholesterol levels when replacing saturated fat. Scientific evidence suggests but does not prove that consuming 1.5 ounces (43g) of most nuts, including almonds as part of a diet low in saturated fat and cholesterol may reduce the risk of coronary heart disease. Emerging research also suggests unsaturated fats may help to stimulate the body's natural release of GLP-1³, although more research is needed.

- **Vitamins and minerals:** For people taking GLP-1 medications, it's vital to make every calorie count by choosing nutrient-rich foods. Almonds provide a host of vitamins and minerals including magnesium, phosphorus, potassium, several B vitamins and vitamin E. Almonds also have zinc (8% DV), calcium (6% DV), and iron (6% DV) per serving so they can help to make up for nutrient shortfalls that may result from consistent reduced food intake. Research shows that eating almonds is linked to better diet quality with a higher intake of some vitamins and minerals and less sugar and salt. ⁴⁻⁷

How almonds benefit waistlines

With over 200 peer-reviewed publications on their nutrition and health benefits, almonds are one of the world's most-researched foods. Research shows almonds can support weight management in several important ways.



1. Almonds may promote weight loss

A panel of leading scientists and nutrition experts recently reviewed the body of research from the last three decades and found that almonds aid weight management. Better still, they concluded that eating at least 50g/1.8oz almonds a day may lead to **modest weight loss** in some people.⁸

2. Almonds may potentially deliver fewer calories than expected

Almonds are a nutrient-dense food, which means they contain a lot of nutrients relative to their calorie content. However, studies also suggest **almonds may provide fewer calories than is shown on food labels.**⁹ This is because the calories in almonds aren't fully absorbed by the body. It means a 28g/1oz serving of almonds is estimated to provide around 120kcal which is approximately 25% lower than the calories shown on food labels. Further research is needed.

3. Almonds may reduce hunger

Clinical trials suggest that eating almonds may improve satiety and reduce hunger.^{10,11} This may support the effects of GLP-1 medications, which **help reduce appetite and increase fullness.**

4. Almonds may support the release of the body's natural GLP-1

The natural package of nutrients found in almonds – including protein, fiber and monounsaturated fats – may help to **stimulate the natural release of GLP-1**, although more research is needed in this area.¹²

Putting almonds on the menu

Almonds are a delicious, natural, versatile and convenient way to boost nutrient intake. They make a great snack and are perfect to add to cereal, yogurt, curries, salads and stir fries. They can be enjoyed in various forms such as whole, chopped or as almond butter, flour, milk or oil.

Following a reduced-calorie diet is typically recommended for people on GLP-1 medications. Almonds can easily be included in popular weight loss diets such as low-carbohydrate and Mediterranean diets. They're also a good choice for including in plant-based, vegetarian or vegan diets.

**Serving size =
28g/1oz = around 23
almonds or a handful**



Bringing it together

Almonds are a nutrient-dense food ideal for those looking to manage their weight, including those following plans that include GLP-1 medications. They can be easily incorporated into a variety of diets, in multiple forms, to help **meet nutrient needs and support weight management goals**.



FOOTNOTES:

- ¹ Anyiam, O et al. [A Systematic Review and Meta-Analysis of the Effect of Caloric Restriction on Skeletal Muscle Mass in Individuals with, and without, Type 2 Diabetes](#). *Nutrients*. 2024 Sep 30;16(19):3328.
- ² Paddon-Jones, D et al. [Protein, weight management, and satiety](#). *The American Journal of Clinical Nutrition*. 2008; 87(5):1558S.
- ³ Kaviani S and Cooper J A. [Appetite responses to high-fat meals or diets of varying fatty acid composition: a comprehensive review](#). *Eur J Clin Nutr*. 2017 Oct;71(10):1154-1165.
- ⁴ Dikariyanto V et al. [Whole almond consumption is associated with better diet quality and cardiovascular disease risk factors in the UK adult population: National Diet and Nutrition Survey \(NDNS\) 2008-2017](#). *Eur J Nutr*. 2021 Mar;60(2):643-654. O'Neil, C.
- ⁵ Nicklas, T. and Fulgoni III, V. (2016) [Almond Consumption Is Associated with Better Nutrient Intake, Nutrient Adequacy, and Diet Quality in Adults: National Health and Nutrition Examination Survey 2001-2010](#). *Food and Nutrition Sciences*, 7, 504-515.
- ⁶ Carter S, Hill AM, Mead LC, Wong HY, Yandell C, Buckley JD, Tan S, Rogers GB, Frayssse F, Coates AM. [Almonds vs. carbohydrate snacks in an energy-restricted diet: Weight and cardiometabolic outcomes from a randomized trial](#). *Obesity*. 2023 August 24; doi: 10.1002/oby.23860.
- ⁷ Brown RC, Ware L, Gray AR, Tey SL, Chisholm A. [Comparing the Effects of Consuming Almonds or Biscuits on Body Weight in Habitual Snackers: A 1-Year Randomized Controlled Trial](#). *Am J Clin Nutr*. 2023 May 6:S0002-9165(23)48908-3. doi: 10.1016/j.ajcnut.2023.05.015.
- ⁸ Trumbo, P R et al. [Perspective: Current Scientific Evidence and Research Strategies in the Role of Almonds in Cardiometabolic Health](#). *Current Developments in Nutrition*. 2025; 9(1): 104516.
- ⁹ Novotny JA et al. [Discrepancy between the Atwater factor predicted and empirically measured energy values of almonds in human diets](#). *American Journal of Clinical Nutrition*. 2012;96(2):296-301.
- ¹⁰ Hull S, Re R, Chambers L, Echaniz A, Wickham SJ. [A midmorning snack of almonds generates satiety and appropriate adjustment of subsequent food intake in healthy women](#). *European Journal of Nutrition*; August 2014;54(5):803-10.
- ¹¹ Tan SY, Mattes RD. [Appetitive, dietary and health effects of almonds consumed with meals or as snacks: a randomized, controlled trial](#). *European Journal of Clinical Nutrition*. 2013;67(11): 1205-1214.
- ¹² Bodnaruc, A M et a. [Nutritional modulation of endogenous glucagon-like peptide-1 secretion: a review](#). *Nutr Metab (Lond)* 2016;13, 92.