If thyroid cancer runs in your family, it is sensible to ask whether Wegovy is safe for you. The answer depends partly on the *type* of thyroid cancer involved. In the United States, Wegovy (semaglutide) is contraindicated for people with a personal or family history of medullary thyroid carcinoma (MTC), or with multiple endocrine neoplasia syndrome type 2 (MEN 2). Other types of thyroid cancer do not appear in this specific contraindication, but your history still deserves a conversation with your prescriber.

This distinction matters: "thyroid cancer" is not one diagnosis. Before starting treatment, find out what type of cancer your relative had if you can. Do not start, stop, or change a prescribed medication based only on an online post or this article. A clinician can review your family history, other health conditions, and treatment options with you.

The short answer

- **Family history of MTC or MEN 2:** Wegovy is contraindicated under US prescribing information. Tell your prescriber and do not start it unless a qualified clinician has clarified that the history was recorded incorrectly.
- **Family history of another thyroid cancer:** This is not the same as the labeled MTC/MEN 2 contraindication. Your prescriber should still assess the specific diagnosis and your overall risk.
- **Uncertain cancer type:** Ask your relative, family doctor, or medical records service for the diagnosis. If the type cannot be confirmed, tell your prescriber before treatment.

Why does Wegovy carry a thyroid cancer warning?

Wegovy contains semaglutide, a glucagon-like peptide-1 receptor agonist, or GLP-1 receptor agonist. In studies in rodents, medicines in this class caused thyroid C-cell tumors, including MTC. It is not known whether this finding predicts a risk of thyroid cancer in humans. Because of that uncertainty, US labeling includes a boxed warning and says Wegovy should not be used by anyone with a personal or family history of MTC, or by anyone with MEN 2.

MTC begins in C cells, which produce the hormone calcitonin. It is different from the more common papillary and follicular thyroid cancers, which arise from other thyroid cells. Anaplastic thyroid cancer is another, rarer type. A relative's medical record or pathology report may use a specific name that is more useful than the general phrase "thyroid cancer."



The warning is precautionary: it reflects an animal finding and uncertainty about its relevance to people, rather than proof that Wegovy causes MTC in humans. However, the contraindication is still important. A possible benefit for weight management does not override it.

How do GLP-1 medicines work?

Semaglutide acts like the natural gut hormone GLP-1. It helps regulate appetite and blood sugar, and it slows stomach emptying. People taking it may feel full sooner, stay full longer, and experience less hunger. The combined effect can help reduce calorie intake and support weight loss alongside nutrition, physical activity, and ongoing care.

Semaglutide is sold under different brand names for different approved uses. Wegovy is the brand used for chronic weight management in eligible patients and, in certain circumstances, for reducing cardiovascular risk. Ozempic is a semaglutide brand prescribed for type 2 diabetes and related risk reduction. A brand or dose prescribed for one purpose should not be substituted for another without a clinician's direction.

What do trials tell us about thyroid cancer risk?

The STEP clinical-trial program studied semaglutide for weight management. In STEP 1, adults with overweight or obesity, without diabetes, received semaglutide 2.4 mg or placebo alongside lifestyle support. The trial found substantially greater average weight loss with semaglutide over 68 weeks. Other STEP studies examined different populations, treatment settings, or longer-term outcomes.

Randomized controlled trials (RCTs) are useful for evaluating both benefits and harms, but they have limits when an outcome is rare and may take years to appear. The STEP trials were not designed or large enough to establish whether semaglutide causes MTC. Thyroid cancers were uncommon, and the studies cannot rule out a small or long-term risk. RCT evidence should therefore be considered alongside the product warning, post-marketing information, and each person's medical history—not treated as proof of zero risk.

Research on GLP-1 medicines and thyroid cancer has continued, and findings from observational studies can differ. These studies may be affected by factors such as differences in who receives treatment, how long they are followed, and how cancer cases are identified. The human evidence does not remove the labeled contraindication for a family history of MTC or MEN 2. If a close relative had thyroid cancer of another type, your prescriber can explain what the available evidence does—and does not—show for your situation.

NICE guidance and eligibility: what applies where?

NICE is the UK's National Institute for Health and Care Excellence. Its recommendations are not the same as US prescribing rules, https://xcelerategyms.com/glp-1-medications-and-weight-loss-what-the-science-shows-and-why-your-provider-matters/ and they do not replace the US product label. NICE guidance and NHS access criteria for semaglutide can also depend on the indication, the current guideline, local commissioning arrangements, and whether treatment is delivered through a specialist weight-management service.

For weight management in England, NICE has recommended semaglutide alongside a reduced-calorie diet and increased physical activity for certain adults with obesity, generally within specialist weight-management care. The relevant recommendation includes eligibility conditions such as a BMI of at least 35 kg/m^2 plus at least one weight-related health condition, with lower BMI thresholds in some circumstances for people from certain ethnic backgrounds. NICE recommendations can specify limits on treatment duration or review criteria. Check the current NICE guidance and local NHS pathway, because criteria and access arrangements may change.

In the United States, Wegovy eligibility is based on its FDA-approved indication and individual clinical assessment, rather than NICE criteria. It is generally prescribed for adults with obesity, or adults with overweight and at least one weight-related condition, in addition to reduced-calorie eating and increased physical activity. It is also approved for some adolescents with obesity. Exact eligibility, coverage, and clinical suitability vary. Neither NICE nor an insurance approval makes Wegovy appropriate when a contraindication such as personal or family MTC is present.

Situation What it generally means Next step Known family history of MTC Wegovy is contraindicated under US labeling. Tell your prescriber; discuss another approach to weight management. Known family history of MEN 2 Wegovy is contraindicated under US labeling. Tell your prescriber and share any relevant genetic or specialist records. Family history of papillary or follicular thyroid cancer Not the specific MTC/MEN 2 contraindication, but the history should be assessed. Confirm the cancer type and discuss your personal risk and treatment options. Thyroid cancer type is unknown The risk cannot be interpreted reliably from “thyroid cancer” alone. Try to obtain the diagnosis before making a treatment decision.

Other contraindications and precautions

Thyroid history is not the only safety consideration. US prescribing information also contraindicates Wegovy in people with a personal or family history of MTC or MEN 2 and in people with a serious allergic reaction to semaglutide or its ingredients. A clinician should review pregnancy plans, current medicines, previous pancreatitis or gallbladder problems, diabetes treatment, and other relevant health conditions. The full list of warnings and precautions is in the current prescribing information.

Do not assume that a normal thyroid blood test or ultrasound clears you to use Wegovy if you have a family history of MTC or MEN 2. Routine calcitonin testing or thyroid ultrasound solely because someone is taking Wegovy has uncertain value, and false-positive results can lead to unnecessary follow-up. Your clinician may investigate a lump, symptoms, or a specific family-history concern, but testing should be guided by the clinical situation.



Side effects and monitoring

The most common side effects are gastrointestinal, especially during dose increases. Nausea, diarrhea, vomiting, constipation, abdominal discomfort, and reduced appetite are frequently reported. These effects may improve over time, but persistent symptoms should be discussed with your prescriber. Eating smaller meals, drinking fluids, and following the prescribed dose-escalation schedule may help; do not increase the dose faster than directed.

More serious problems are less common but require prompt attention. Contact a clinician urgently for severe or persistent abdominal pain, especially if it radiates to the back; signs of a severe allergic reaction; or symptoms of dehydration such as fainting or very little urine. Seek medical advice for gallbladder symptoms such as persistent upper-right abdominal pain, fever, or yellowing of the skin. People with diabetes may need monitoring for low blood sugar, particularly if they also use insulin or a sulfonylurea.

Before treatment, a prescriber should review your medical history, medicines, weight-related health conditions, and treatment goals. Follow-up commonly covers side effects, dose tolerance, weight and health changes, and whether the medicine remains suitable. If you develop a neck lump, persistent hoarseness, trouble swallowing, or shortness of breath, seek medical assessment. These symptoms can have many causes, but should not be ignored.

Buying semaglutide safely

Use a licensed pharmacy and a prescription from an authorized clinician. Be cautious about online marketplaces and social media channels offering “research” semaglutide, unusually cheap injections, or products that bypass a medical assessment. Counterfeit, improperly stored, or incorrectly dosed products can cause serious harm. Do not buy semaglutide from an unverified seller or share injection pens with anyone.

Questions to ask your clinician

1. What type of thyroid cancer did my relative have—MTC, papillary, follicular, or another type?
2. Does anyone in my family have MEN 2 or a known inherited RET gene change?
3. Is Wegovy appropriate for my health history, medicines, and weight-management goals?
4. What side effects should prompt a call, and what monitoring or follow-up will I need?
5. If Wegovy is not suitable, what other evidence-based options are available?

The bottom line

A family history of thyroid cancer does not automatically mean the same thing for every person. In the United States, a personal or family history of medullary thyroid carcinoma or MEN 2 is a labeled contraindication to Wegovy. A family history of another thyroid cancer is not that specific contraindication, but it should be clearly discussed with a prescriber. Confirm the cancer type, review the current prescribing information, and make the decision with a qualified clinician rather than relying on claims from online marketplaces or social media channels.