



LMC Communication – October 2026

The Prescribing of TA1152 Semaglutide in General Practice – BMA Guidance

To all Practice Clinical Staff:

The BMA has published its official position on semaglutide (Wegovy) for cardiovascular risk reduction in general practice, attached. It is similar to what we have raised with the ICB and supports our position. We have asked the ICB for a standalone LES for this cohort and will update you when we hear back.

The BMA advises that:

- This is not automatically core GMS/PMS work and is not part of the CVD QOF indicators.
- Responsibility for funding lies with NHS commissioners, not individual practices.
- If prescribing or monitoring is expected in general practice, it should be through a commissioned service (LES or LCS) with funding that reflects the full scope of work, including identification and eligibility assessment, initiation and dose titration, ongoing monitoring and review, lifestyle support, and administrative workload.
- Practices should not take on routine prescribing without appropriate funding arrangements in place.
- Any prescribing should align strictly with NICE criteria.
- Practices should highlight the scale of demand to commissioners and monitor the impact on workload and patient care.

Please let us know if you are seeing significant demand, as it helps our discussions with the ICB.

To read the full guidance published by the BMA, please use the following link:

[Prescribing of Semaglutide \(Wegovy\) in General Practice](#)

“Calderdale LMC are here to support you in whatever professional role you undertake, whether in general practice, out of hours services, for the ICB, the Primary Care Network or any other setting. We are the first port of call if you have any concerns or queries related to work”