

GLP-1 and Cancer Research

A Wellness Education Guide

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What the Research Is Saying

At the ASCO 2026 meetings, I was struck by how often GLP-1 and cancer came up as a research theme across more than one cancer type. This was not a single study. It was a pattern showing up across the conference. The work that started the conversation, from Penn Medicine, reported an observed association between GLP-1 use and lower breast cancer incidence in one study population. Related observational research presented across the meetings pointed in a similar direction for other cancer types.

I want to be clear about what this research is and what it is not. All of it is observational, which means it identifies patterns, not causes. None of it is a randomized controlled trial. It describes associations seen in groups of people, and it does not tell any individual what will happen for them.

Nothing in this guide is intended to diagnose, treat, or prevent cancer or any other disease. The research described here is early and observational, and no product mentioned in this guide has been shown to reduce cancer risk or affect cancer outcomes. This guide is wellness education only.

The Biology Behind the Headline

What makes researchers interested in this, and what makes me interested in sharing it with you, is the biology underneath the pattern. The field has been building toward this for years: the relationship between chronic low-grade inflammation, insulin resistance, and long-term health.

There is a concept called inflammaging, the slow burn of systemic inflammation that tends to rise with metabolic stress, excess visceral fat, elevated blood sugar, and age. It has been studied in connection with several categories of chronic disease.

GLP-1 receptors are not only in the pancreas. They are found in the brain, the gut, the cardiovascular system, and immune cells, which is why GLP-1 activity is being studied for effects that reach beyond blood sugar. That breadth is the thread connecting the research I covered to a broader conversation about metabolic wellness.

What the Research Shows

In 2026, researchers presented findings at the American Society of Clinical Oncology Annual Meeting that caught the attention of women's health providers across the country.

A retrospective analysis of more than 110,000 women between the ages of 45 and 80 found that those using GLP-1 receptor agonists were approximately 30 percent less likely to develop breast cancer compared to those who did not use them. That finding was published simultaneously in JCO Oncology Practice.

Separate real-world data from the same conference suggested that GLP-1 receptor agonists may be associated with slower metastatic progression in certain obesity-related cancers, including breast, lung, colorectal, and liver cancers. Researchers proposed several possible mechanisms, including reductions in chronic inflammation, changes in how cancer cells access fuel, and effects on immune function.

Earlier research published in JAMA Oncology, drawing on 10 years of electronic health records, found associations between GLP-1 use and reduced risk for endometrial, ovarian, and meningioma cancers.

What this research does not say:

These are observational and retrospective studies. They identify associations, not causes. No study to date has proven that GLP-1 medications prevent or treat cancer. What the research does suggest is that the metabolic and inflammatory pathways these medications influence may be relevant to long-term health outcomes, and that conversation is worth having with your provider.

The Inflammation Connection

Chronic low-grade inflammation is a thread that runs through many of the health challenges women over 40 face: weight resistance, fatigue, hormonal shifts, and emerging research on cancer risk.

GLP-1 receptor agonists appear to influence inflammatory pathways in the body. When inflammation is reduced and metabolic function improves, the downstream effects can be wide-ranging. That is why researchers are looking at these medications not just for weight and blood sugar management, but for their broader impact on how the body ages.

This is not a treatment claim. It is a reason to pay attention to your metabolic health as a whole. According to emerging research, the choices you make to support it today may matter in ways that go beyond the scale.

Questions to Bring to Your Provider

Here are three questions worth bringing to your healthcare provider:

1. What does the 2026 ASCO research on GLP-1 and breast cancer risk mean for someone with my health history?

This opens the conversation without putting your provider on the spot. It invites them to apply the research to your specific situation.

2. How does metabolic inflammation factor into my long-term wellness picture?

This shifts the conversation from weight specifically to overall metabolic health, which is where the most meaningful discussion usually happens.

3. What would you want to know about my family history before discussing GLP-1 support options?

This gives your provider the opening to ask the right questions and positions you as an informed, engaged patient.

If your provider is not familiar with the ASCO 2026 findings, that is not unusual. The JCO Oncology Practice publication is publicly available if they would like to review the findings.

What This Means for Your Wellness Options

This is education, not medical advice. Every EllieMD protocol requires physician review and approval before anything is prescribed or shipped. What I can do is give you a plain-language look at the two product categories that relate to these metabolic pathways.

Two Categories to Know About

Weight Management GLP-1 (semaglutide) and GLP-1/GIP (tirzepatide) injections for meaningful weight reduction with metabolic support: healthy body composition, blood sugar balance, and cardiovascular health markers.	Longevity Microdose Lower-dose GLP-1 (semaglutide) and GLP-1/GIP (tirzepatide) protocols for metabolic optimization and healthy aging: metabolic balance, insulin sensitivity, and steady energy.
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Optional Add-Ons

Both categories can include one or more of the following, available as options when you select your compound on the EllieMD site.

Vitamin B12 Supports energy metabolism, red blood cell production, and nerve function.	L-Carnitine Supports fat metabolism by transporting fatty acids into cells for energy.	Glycine Supports cellular repair, metabolic balance, and restful sleep.
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An Important Note

Which category, which product, which add-ons if any, and whether any product is appropriate at all is a medical decision made only by your EllieMD physician after a full review of your health history. No two protocols are the same.

Have Questions?

Reach out to me directly before you purchase and I will help you think through which option fits your situation. Once you have purchased, your EllieMD physician handles all medical decisions. I also encourage you to share these options with your primary care physician especially if you have existing health conditions or take prescription medications.

How to Get Started with EllieMD

Step 1: Register

Type elliemd.com/lermalongevity into your browser, click GET STARTED, and create your free account in about 2 minutes.

Step 2: Complete Your Health Questionnaire

After registering, complete a medical questionnaire about your health history and goals.

Step 3: Purchase Your Compound

Browse to PRODUCTS and select the compound you want to start with.

Step 4: Physician Protocol Design

A licensed EllieMD physician reviews your health history, approves your protocol, and designs your complete treatment plan, with medical consultation included.

Step 5: Your Protocol Ships to You

Once approved, your compounds ship directly to your door and your physician is available via messaging for any questions.

TO GET STARTED, TYPE THIS INTO YOUR BROWSER:

elliemd.com/lermalongevity

Questions? Email me directly at dana@lermalongevity.com

The research referenced is observational and does not establish cause and effect. Nothing here diagnoses, treats, or prevents any disease, including cancer, and nothing here concerns cancer treatment. All products referenced require physician review and approval through EllieMD. Please discuss any wellness protocol with your physician, especially if you have existing health conditions or take prescription medications.

Warmly,

Dana Lerma, Nurse Practitioner

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References

1. McDonald ES, et al. GLP-1 agonists are associated with a significant reduction in breast cancer incidence in women. JCO Oncol Pract. Published online June 2, 2026. ASCO 2026 Abstract 10506. ascopubs.org/doi/10.1200/OP-26-00485
2. ASCO 2026 Abstract 3143. Real-world data on GLP-1 receptor agonists and metastatic progression in obesity-related cancers (lung, breast, colorectal, liver). Presented at the 2026 ASCO Annual Meeting, Chicago. asco.org/about-asco/press-center/glp-may-reduce-metastatic-progression
3. Dai H, et al. GLP-1 receptor agonist use and cancer risk in adults with overweight or obesity. JAMA Oncol. Published online August 21, 2025. jamanetwork.com/journals/jamaoncology