The Risk of GLP-1 on Chick-Fil-A

The fast-food industry is undergoing significant changes as consumer preferences shift due to emerging health trends. One of the most notable influences is the rising use of GLP-1 weight loss drugs, which suppresses appetite and encourages smaller portion sizes. The use of weight loss drugs like GLP-1 is slowly increasing, significantly altering consumer eating habits and impacting the food industry. As more people turn to these medications, fast-food restaurants like Chick-Fil-A must consider how these shifts impact their menu offerings and overall sales. However, while GLP-1 drugs pose some challenges to fast food businesses, they also create new opportunities for them to adapt to evolving dietary preferences. Chick-Fil-A, known for its high-quality chicken offerings and customer loyalty, is uniquely positioned to respond to these changes while maintaining its core identity. As GLP-1 use grows, its long-term influence on consumer behavior and fast-food dining remains uncertain.

GLP-1 drugs are prescribed to reduce overall food consumption by suppressing appetite and slowing gastric emptying, leading to reduced calorie intake 1. It mimics the hormone GLP-1 made in the small intestine and helps slow digestion and increase satiety 2. People taking it typically shift towards healthier food like lean proteins, fruits, and vegetables and shift away from processed, high-calorie, or high-fat foods. These changes can lead to significant changes in eating behavior, supporting long-term weight loss and healthier dietary habits.

However, how prevalent are these drugs, and how consistently do people take them? While GLP-1 drugs have gained popularity with about 12% of US adults having used them 3, adherence remains low. Only 27% of users take the medication at least 80% of the time 4, which means only about 3% of the population are consistent users. Furthermore, research shows that 30% of people stopped taking them within four weeks 5, 54% within 1 year, and 72% within 2 years 6. Even those who continue taking the drug sometimes pause usage, with one in six users planning to skip doses during the holidays, primarily to enjoy food without side effects 7. While high costs are a barrier for some, most users discontinue due to adverse side effects like nausea and vomiting 7. These statistics suggest that while GLP-1 drugs are influencing food choices, their long-term impact may be less significant due to low retention rates.

As GLP-1 medications reshape consumer eating habits, Chick-Fil-A faces both challenges and opportunities in adapting to these dietary shifts. One advantage is that GLP-1 users are more likely to prefer chicken over red meat, given its lower saturated fat content, which benefits Chick-Fil-A over beef-heavy competitors. Additionally, data shows that Chick-Fil-A leads with the highest percentage of GLP-1 users, with 68% of users favoring the chain over others, compared to only 60% of the general population 8. This preference could stem from Chick-Fil-A's reputation for offering healthier options, such as grilled chicken, wraps, and salads, along with its well-regarded customer service and cleanliness. Even though dining out is generally declining among GLP-1 users, fast food remains their top choice for eating out likely due to its conveniency, with 59% of GLP-1 users still interested in value menu items, compared to only 44% of the general population 8. Chick-Fil-A's customer base — young adults, middle-class families, health-conscious consumers, and urban/suburban residents 9 — closely aligns with GLP-1 trends, as these groups tend to have lower obesity rates and are thus less likely to go on the drug. However, Chick-Fil-A may see declining sales in combo meals, fried foods, desserts, and sugary drinks, as GLP-1 users tend to avoid high-calorie, high-fat items. At the same time, demand for lighter, high-protein menu options such as grilled chicken, wraps, and salads may increase. While GLP-1 drugs do not currently pose a major threat to Chick-Fil-A, the broader decline in fast-food sales suggests that the company should monitor these trends closely.

Although GLP-1 isn’t a major risk for Chick-fil-A now, the brand can still adapt to changing consumer preferences. Highlighting existing healthy items like grilled chicken and fiber-rich meals can reassure customers while keeping fan favorites like the classic sandwich and waffle fries. Customizable portion sizes—such as “Make It Mini” sandwiches or half-sized salads—along with snack packs can appeal to both GLP-1 users and light eaters. Adding smart options like a grilled chicken and avocado bowl, sugar-free sauces, and protein or veggie swaps can enhance flexibility. To keep messaging broad, Chick-fil-A should avoid terms like “GLP-1 friendly” and use inclusive language like “Smart Choices.” These enhancements will help the brand evolve while satisfying a diverse customer base.

While GLP-1 drugs are influencing food consumption habits, their long-term impact on fast food remains uncertain due to low retention rates. Chick-Fil-A is well positioned to adapt, given its strong consumer base, specialty in chicken, which is a lean protein, existing healthier menu options, and its large menu variety. By maintaining core offerings while introducing strategic adjustments, they can appeal to both traditional and health-focused customers. Chick-Fil-A’s success will depend on how well it tracks and responds to these emerging trends.

Citations

1. Aldawsari M, Almadani FA, Almuhammadi N, Algabsani S, Alamro Y, Aldhwayan M. The efficacy of GLP-1 analogues on appetite parameters, gastric emptying, food preference and taste among adults with obesity: Systematic review of Randomized Controlled Trials. *Diabetes, Metabolic Syndrome and Obesity*. 2023;Volume 16:575-595. doi:10.2147/dmso.s387116

2. Cleveland Clinic. GLP-1 agonists. Cleveland Clinic. March 19, 2025. Accessed April 4, 2025. https://my.clevelandclinic.org/health/treatments/13901-glp-1-agonists.

3. Montero A, Sparks G, Presiado M, Hamel L. KFF Health Tracking Poll May 2024: The public’s use and views of GLP-1 Drugs. KFF. May 10, 2024. Accessed April 2, 2025. https://www.kff.org/health-costs/poll-finding/kff-health-tracking-poll-may-2024-the-publics-use-and-views-of-glp-1-drugs/.

4. Starr M. Report: GLP-1 adherence rates lower than expected. Pharmacy Practice News. May 23, 2024. Accessed April 2, 2025. https://www.pharmacypracticenews.com/Online-First/Cardiology/Article/05-24/Report-GLP-1-Adherence-Rates-Lower-Than-Expected/73868?utm\_source=chatgpt.com.

5. Cassata C. Many patients stop weight management drugs too soon-here’s why that concerns doctors. Health. August 26, 2024. Accessed April 3, 2025. https://www.health.com/weight-management-glp1-short-term-use-8653655.

6. Bose P. High discontinuation rates of GLP-1 agonists found among patients with obesity. News. February 4, 2025. Accessed April 2, 2025. https://www.news-medical.net/news/20250204/High-discontinuation-rates-of-GLP-1-agonists-found-among-patients-with obesity.aspx#:~:text=It%20was%20noted%20that%20about,similar%20discontinuation%20rates%20were%20recorded.

7. Swartz T. 1 in 6 people plan to skip their weight-loss drugs over the holidays so they can eat more. New York Post. December 12, 2024. Accessed April 3, 2025. https://nypost.com/2024/12/12/health/1-in-6-plan-to-skip-their-weight-loss-drugs-over-the-holidays/?utm\_source=chatgpt.com.

8. Shriber S. Top trends that qsrs should know about GLP-1 customers. CivicScience. September 16, 2024. Accessed April 2, 2025. https://civicscience.com/top-trends-that-qsrs-should-know-about-glp-1-customers/?utm\_source=chatgpt.com.

9. Pereira D. Chick-fil-A target market analysis (2025). Business Model Analyst. December 17, 2024. Accessed April 3, 2025. https://businessmodelanalyst.com/chick-fil-a-target-market/?utm\_source=chatgpt.com.