Petrelintide

Investigational · not FDA-approved.



Guide prepared November 13, 2026 · profile review dates retained

KEEP IN MIND Evidence applies to the studied formulation, route, population and outcome—not every product sharing a name.

01 What is it?

Petrelintide (formerly ZP8396) is an investigational, long-acting amylin analogue being studied for weight management. It acts through amylin signaling, which helps regulate fullness. It is not a GLP-1 medicine and is not FDA-approved. [1]

02 Potential benefits

The sponsor's 28-week ZUPREME-2 report described weight reduction in adults with overweight or obesity and type 2 diabetes. The efficacy estimand depends on treatment-adherence assumptions. Sponsor-reported averages are not predictions for an individual patient; full published data remain important. [1]

03 Evidence & its limits

The latest ZUPREME-2 figures are sponsor-reported topline results; full results are expected at a scientific conference. They do not establish long-term safety, superiority to another medicine, or regulatory approval. [1]

04 Risks & unknowns

Gastrointestinal events were the most frequently reported adverse events. Stopping treatment because of these events is not the same as experiencing any side effect. Percentages from separate trials are not directly comparable. Full published results and longer follow-up are needed. [1]

05 Status & scope

It is not a GLP-1 medicine and is not FDA-approved. [1]

06 The question to ask

Does the evidence match the exact product, route, condition and outcome being discussed? Check the full record and its review dates. This summary is selective; the product label and clinical assessment contain additional warnings and contraindications.

SOURCES / Tap a reference to open

[1] Full evidence record, references and review dates
[2] Zealand Pharma: petrelintide identity and development background
[3] Zealand Pharma: ZUPREME-2 topline results and phase 3 program — October 7, 2026
[4] ClinicalTrials.gov: ZUPREME-2, NCT06926842

Selective educational summary, not treatment or dosing advice. Existing profile review dates retained; no independent clinical review.