

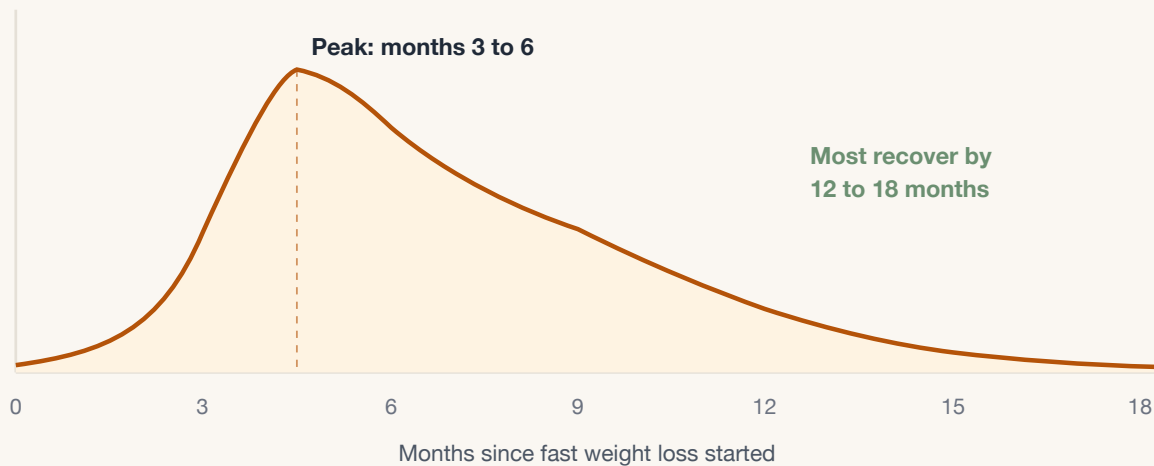
GLP-1 shedding

# GLP-1 Shedding Recovery Timeline

A calm, honest map of what to expect month by month, what to check, and what actually helps. Most of this is temporary. The waiting is the hard part.

## The typical arc

Hair shedding after fast weight loss on a GLP-1 is usually telogen effluvium: a temporary shift in the hair cycle, not the drug harming your hair. It tends to start around month three, peak, and settle by 12 to 18 months.




Illustrative pattern; individual timelines vary. Sources: Cleveland Clinic, CNN.

**If you are at month five and still shedding**, that does not mean it failed. It means you are in the part of the curve where old hairs let go before new ones are visible.

## Month by month

When	What is normal	What to do
Months 0 to 2	Little to no shedding yet. Weight is dropping.	Lock in protein now. Get a ferritin and basic panel.
Month 3	Shedding often begins, sometimes suddenly.	Do not panic-buy. This is expected and usually temporary.
Months 3 to 6	The peak. This is the hardest stretch.	Keep protein up. Gentle handling. Recheck bloodwork if not done.
Months 6 to 12	Shedding eases as weight stabilizes.	If still heavy at 6 months, see a dermatologist.
Months 12 to 18	Most people are back toward normal density.	Watch for new hairs coming in at the hairline and part.

 **A note on products.** No supplement reliably beats protein, time, and treating low iron. Be skeptical of anything promising to fix this fast.

# What actually helps

## 1. Protein, even when your appetite is gone

GLP-1 medications kill your appetite, which is exactly why protein slips. Aim for roughly 100g a day. Easy wins that go down when nothing else does:

- A protein shake or high-protein milk (often 20 to 30g per serving)
- Greek yogurt or cottage cheese
- Eggs, tofu, or a few bites of chicken or fish

## 2. Get your bloodwork (this is the one thing worth spending on)

Ask your doctor for these and bring the numbers to any follow-up:

- Ferritin** (iron stores). Low ferritin is a common, fixable driver of shedding.
- Thyroid** (TSH). Thyroid shifts can thin hair.
- Vitamin D**. Often low and simple to correct.
- A basic metabolic and blood count panel** for the wider picture.

## 3. Ease the pace, with your prescriber

Faster weight loss means more shedding. If the rate is aggressive, that is a conversation to have with the person who prescribed it.

## When to see a dermatologist

Telogen effluvium is the common case, but it is not the only one. See a board-certified dermatologist if:

- Shedding is still heavy beyond about six months.
- You can see your scalp through your hair, or your part is visibly widening.
- There is a family history of female or male pattern hair loss.

Those can point to pattern hair loss, which is treated differently and does not simply resolve on its own.

**HairBack Club** No affiliate links

We keep an honest, cause-first database of hair-shedding products, with the complaints shown next to the praise and no affiliate links. When something is not worth it, we say so.

[hairbackclub.com/glp-1-hair-loss/](https://hairbackclub.com/glp-1-hair-loss/)

For information only. Not medical advice. Talk to a board-certified dermatologist about diagnosis and treatment. Last verified 2026-07.