

SWITCHING CALCITONINE GENE-RELATED PEPTIDE MONOCLONAL ANTIBODIES (CGRP-mAb) IN PATIENTS WITH REFRACTORY MIGRAINE: REAL WORLD DATA

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Background and importance

There is growing evidence about the benefit of using a second CGRP-mAb in patients with no response to one of them. We have clinical experience with patients who have used two or more CGRP-mAb.

Aim and objectives

To assess the effectiveness of using other CGRP-mAbs for the treatment of chronic migraine in patients who have already been treated with one of them.

Materials and methods

- ❖ A retrospective, observational study
- ❖ January 2020 - September 2024

Response to treatment

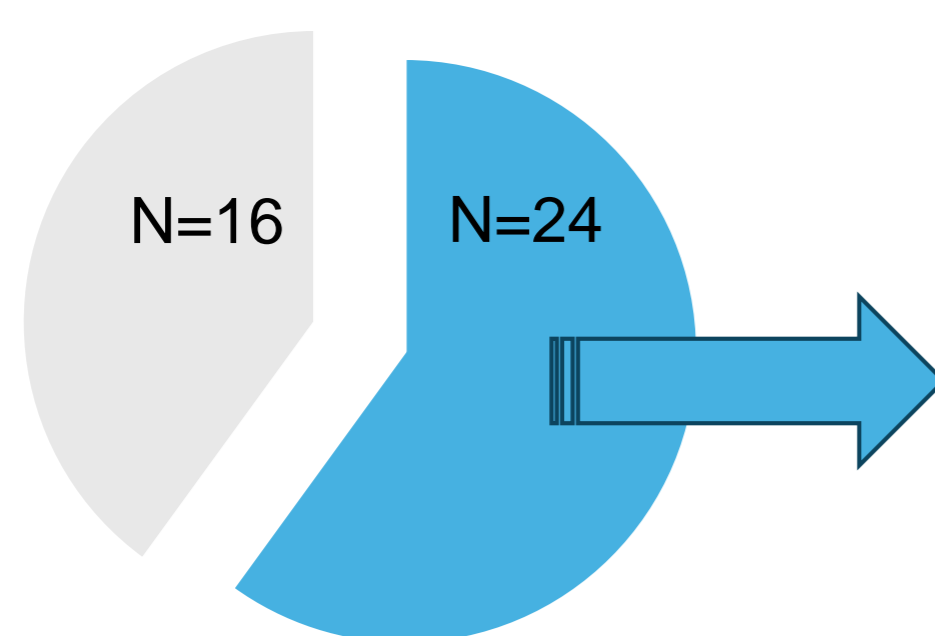


- ❖ 50% reduction in the baseline monthly migraine days.
- ❖ Quarterly visits to evaluate response

Results

40 patients, 75% female, 45 years [IQR 37-54], Migraine days: 23 [IQR 16-30]

Response to CGRP mAb



Consecutive CGRP mAbs (n)	N	Migraine days reduction	Duration of treatment (months)
4	2	87% and 85%	18 and 37
3	2	78% and 73%	50 and 27
2	9	67% [IQR 63%-87%]	19 [IQR 12-24] and 11 [IQR 7-12]
1	11	75% [IQR 65%-83%]	15 [IQR 9-21]

- Yes
- No, after 2 (n=5), 3 (n=8) or 4 (n=3) drugs

Conclusions

- Switching CGRP-mAbs might be an option for patients with many monthly migraine days when loss of optimal response is detected.
- Patients with no response to one CGRP-mAb may not respond to other ones.

