ANALYSIS OF MEDICATION PERSISTANCE IN MIGRAINE PATIENTS TREATED WITH ANTI-CGRP MONOCLONAL ANTIBODIES

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BACKGROUND AND IMPORTANCE

Monoclonal antibodies targeting the calcitonin gene-related peptide (anti-CGRP) are recently available for migraine treatment. Real-world data on the utilization of these drugs in clinical practice is scarce, but this information could help hospital pharmacists afford a better selection of the available drugs.

AIM AND OBJECTIVES

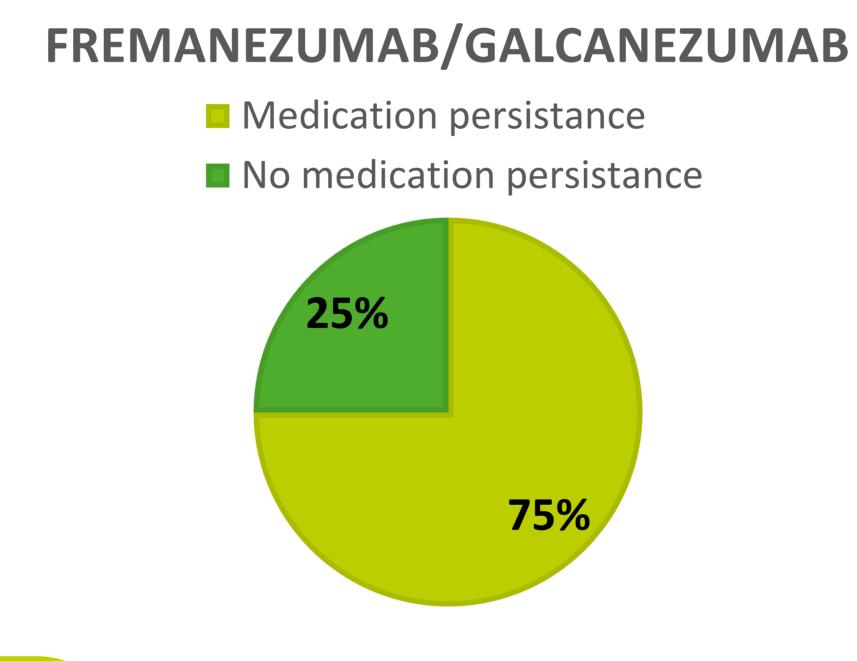
The study aimed to explore differences in medication persistence in patients with migraine treated with erenenumab, a human monoclonal antibody that binds to the receptor for CGRP, or fremanezumab and galcanezumab, humanized monoclonal antibodies that bind CGRP.

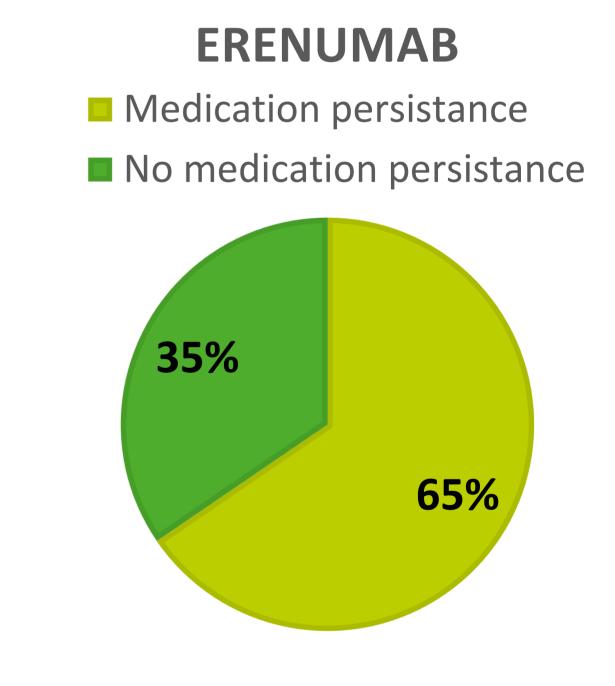
MATHERIAL AND METHODS

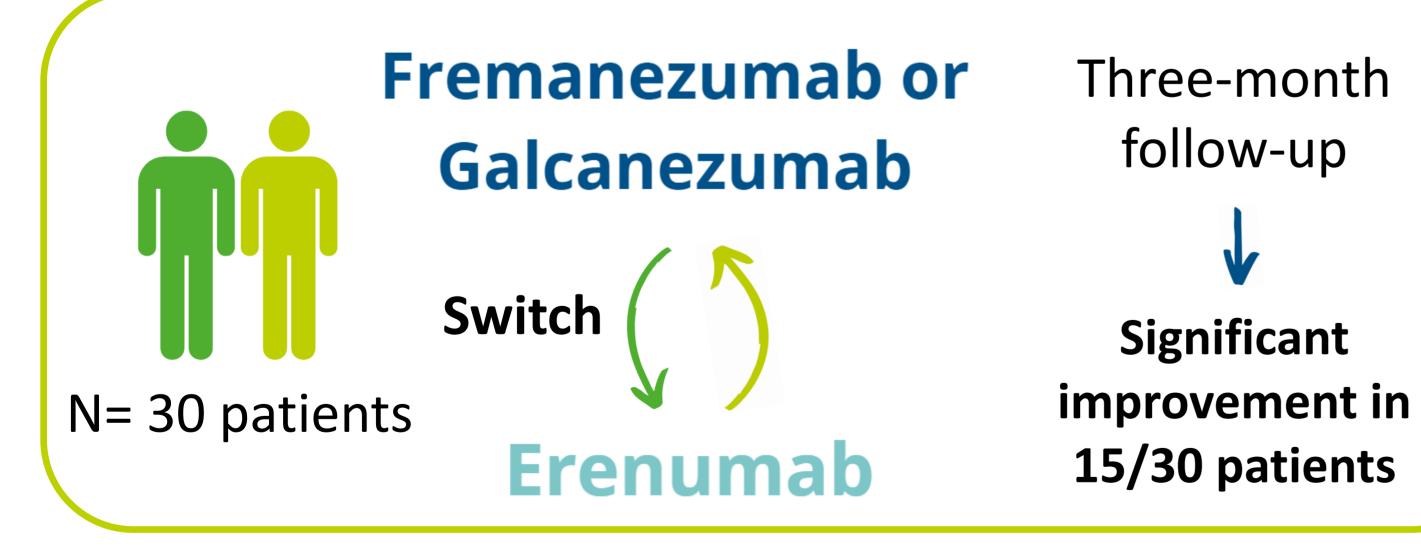
- ❖ For this study, we retrieve from the registry data of patients initiating treatment after 01/02/2020 with erenumab, fremanezumab or galcanezumab.
- The primary outcomes analysed were: gender, age, discontinuation rate, time to discontinuation, and the causes of it.
- ❖ We also collected data to measure the treatment response, such as migraine days per month and the validated quality of life scales (Migraine Disability Assessment Scale and Headache Impact Test-6).
- * Retrieved data was dissociated before any analysis. Chi-square was used to compare proportions and t-Student for continuous variables.

RESULTS

Patients (N)	131	
Erenumab	55/131	
Galcanezumab/ Fremanezumab	76/131	
Mean age	51	
Proportion of women	111/131	







	Erenumab	Galcanezumab/ Fremanezumab
Time to discontinuation (months)	8,9	6,8
Discontinuation due to toxicity	2/19	3/19

CONCLUSION AND RELEVANCE

- ❖ Medication persistence in migraine treatment with anti-CGRP monoclonal antibodies seems similar for both mechanisms of action.
- More extensive studies are needed to clarify the difference in response to different anti-CGRP monoclonal antibodies.

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