



# ASSESSING CARDIOVASCULAR SAFETY OF ANTI-CGRP TREATMENTS: INSIGHTS FROM REAL-WORLD DATA IN ELDERLY AND CARDIOVASCULAR PATIENTS

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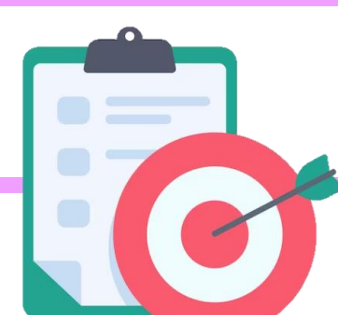
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## BACKGROUND AND IMPORTANCE



Phase 2 and 3 clinical trials evaluating anti-CGRP monoclonal antibody therapies have not demonstrated an increased incidence of vascular events or vascular complications in patients undergoing treatment. However, it is important to note that patients over 65 years of age and those with pre-existing cardiovascular conditions were excluded from these trials.

## AIM AND OBJECTIVES

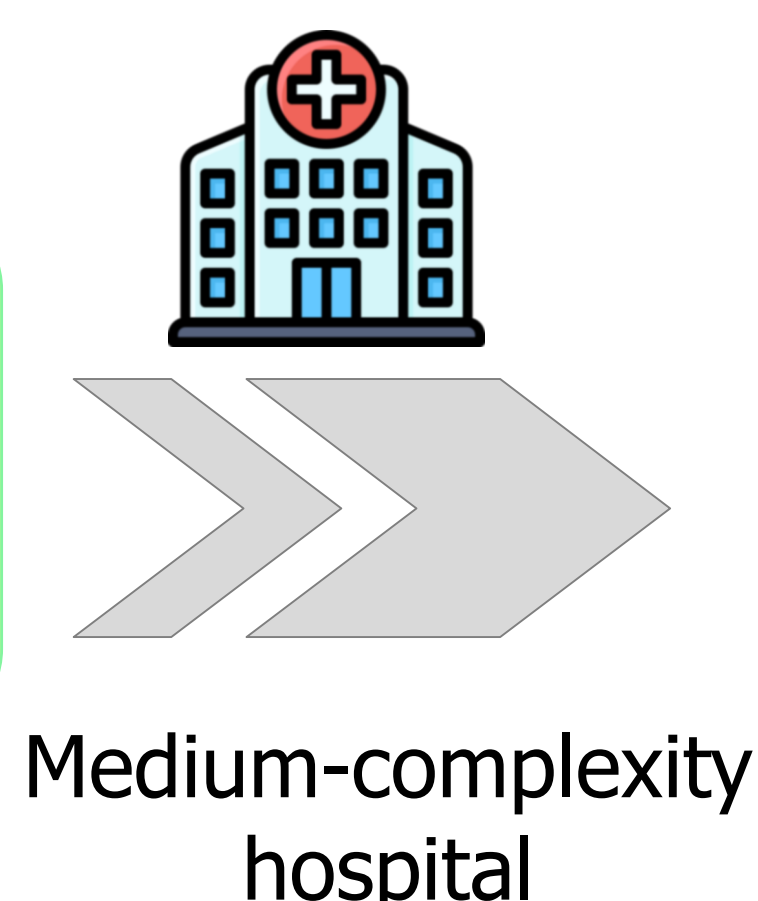


To analyse the cardiovascular safety profile of anti-CGRP monoclonal antibodies in elderly patients and in those with a history of cardiovascular disease.

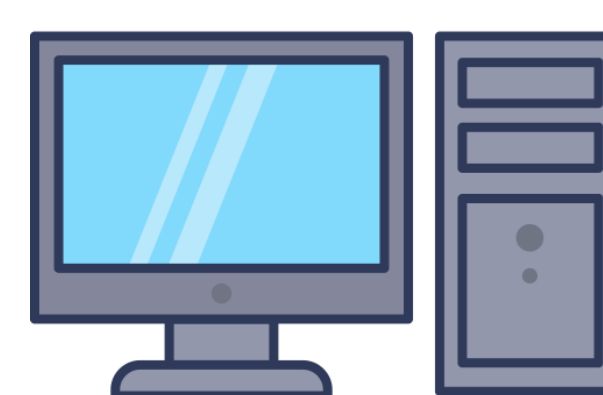


## MATERIAL AND METHODS

Observational, retrospective study



Electronical medical records



All patients treated with anti-CGRP therapy

Adverse effects detected in pharmaceutical care consultations



Arterial hypertension was included as a cardiovascular-related condition



Chi-Square

Used to compare the total proportions of cardiovascular events

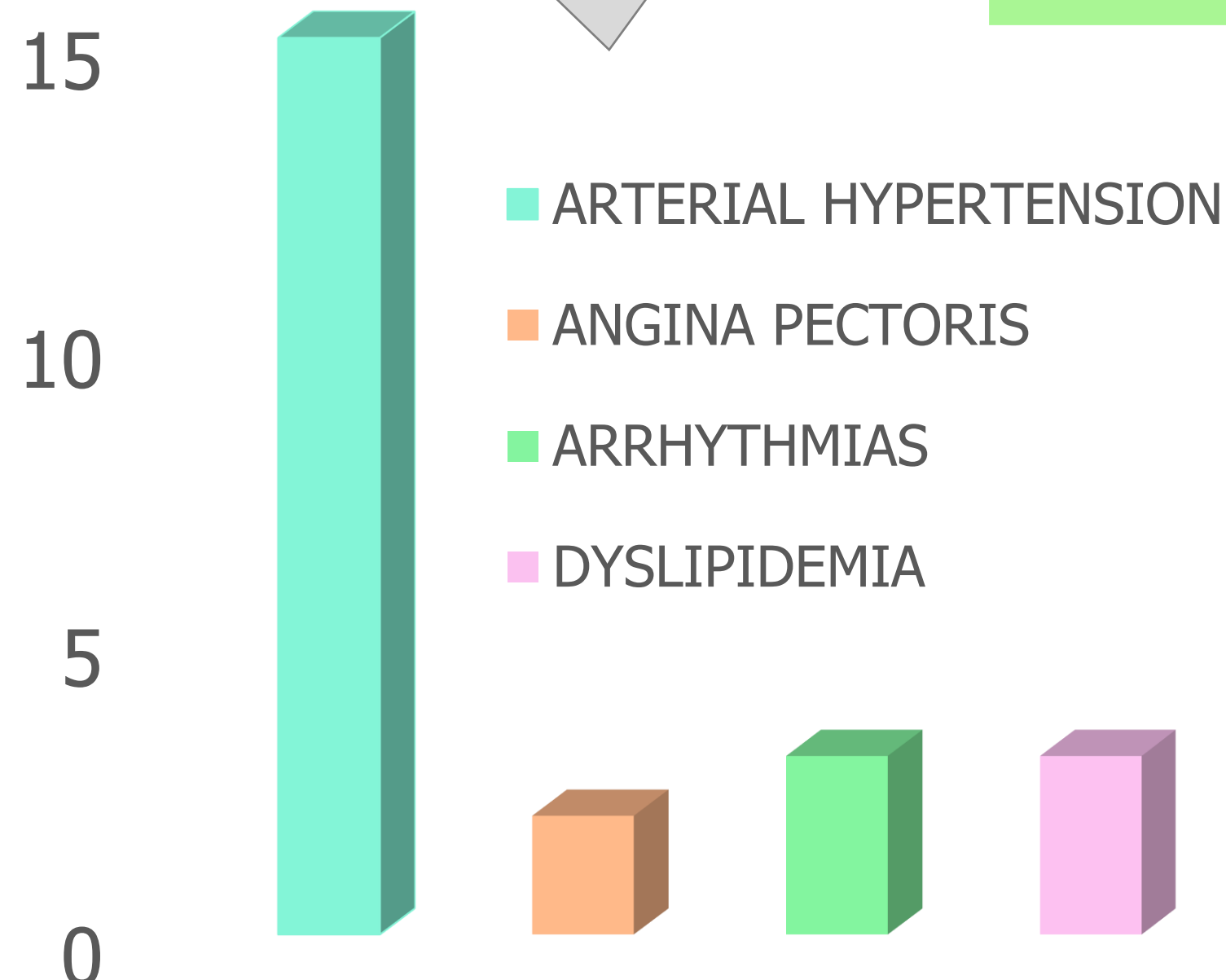
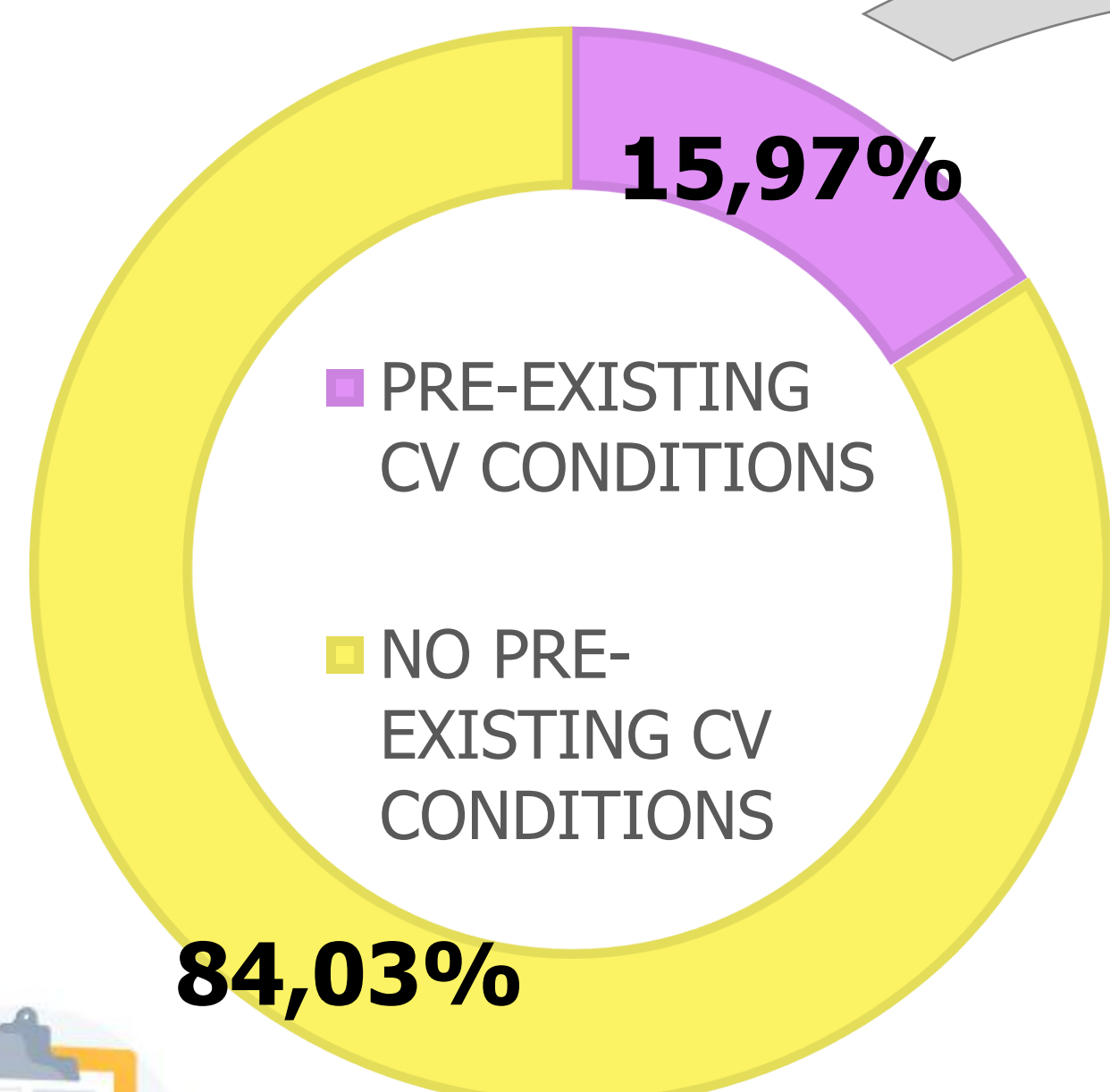
## RESULTS

119 Patients

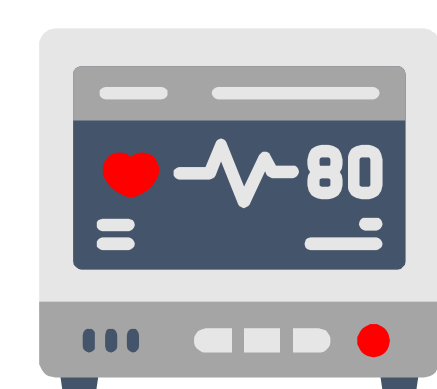
Median follow-up

587 days

13 patients over 65 years



No cardiovascular events were reported following de initiation of anti-CGRP therapy



Post-treatment CV events	Number of patients
Arrhythmia	1
Cerebrovascular Disease	2
Arterial Hypertension	1

There were no statistically significant differences in post-treatment cardiovascular events between elderly patients and those without pre-existing cardiovascular conditions (p = 0.918).

There were no statistically significant differences in post-treatment cardiovascular events between patients with and without pre-existing cardiovascular conditions (p = 0.847).

Chi-Square Test

1 patient was over 65 years

None of them had pre-existing CV conditions

## CONCLUSION AND RELEVANCE

These findings suggests that anti-CGRP treatments may be similarly safe across these groups. Real World Data studies provides valuable insights that may not be captured in controlled trial environments.

