



ANALYSIS OF THE EFFECTIVENESS OF GEPANTS IN NAIVE PATIENTS VERSUS PATIENTS PREVIOUSLY TREATED WITH ANTI-CGRP MONOCLONAL ANTIBODIES

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BACKGROUND AND IMPORTANCE

Gepants have expanded the therapeutic arsenal for chronic migraine (CM) and high-frequency episodic migraine (HFEM)

Is their effectiveness the same in naïve vs. previously treated with anti-CGRP monoclonal antibodies? The answer remains unclear

AIM AND OBJECTIVES

To compare gepants' effectiveness and safety in CM and HFEM patients, naïve vs. pre-treated

MATERIAL AND METHODS

Retrospective observational study

Effectiveness Outcomes After ≥ 12 weeks

Change in mean monthly migraine days (MMD)

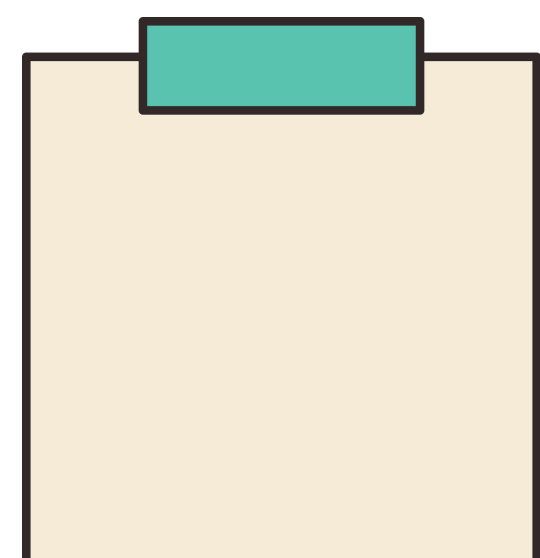
Percentage of patients with $\geq 50\%$ MMD reduction
30-50% MMD reduction

Safety Outcomes

Treatment discontinuation rates

Main adverse events

RESULTS



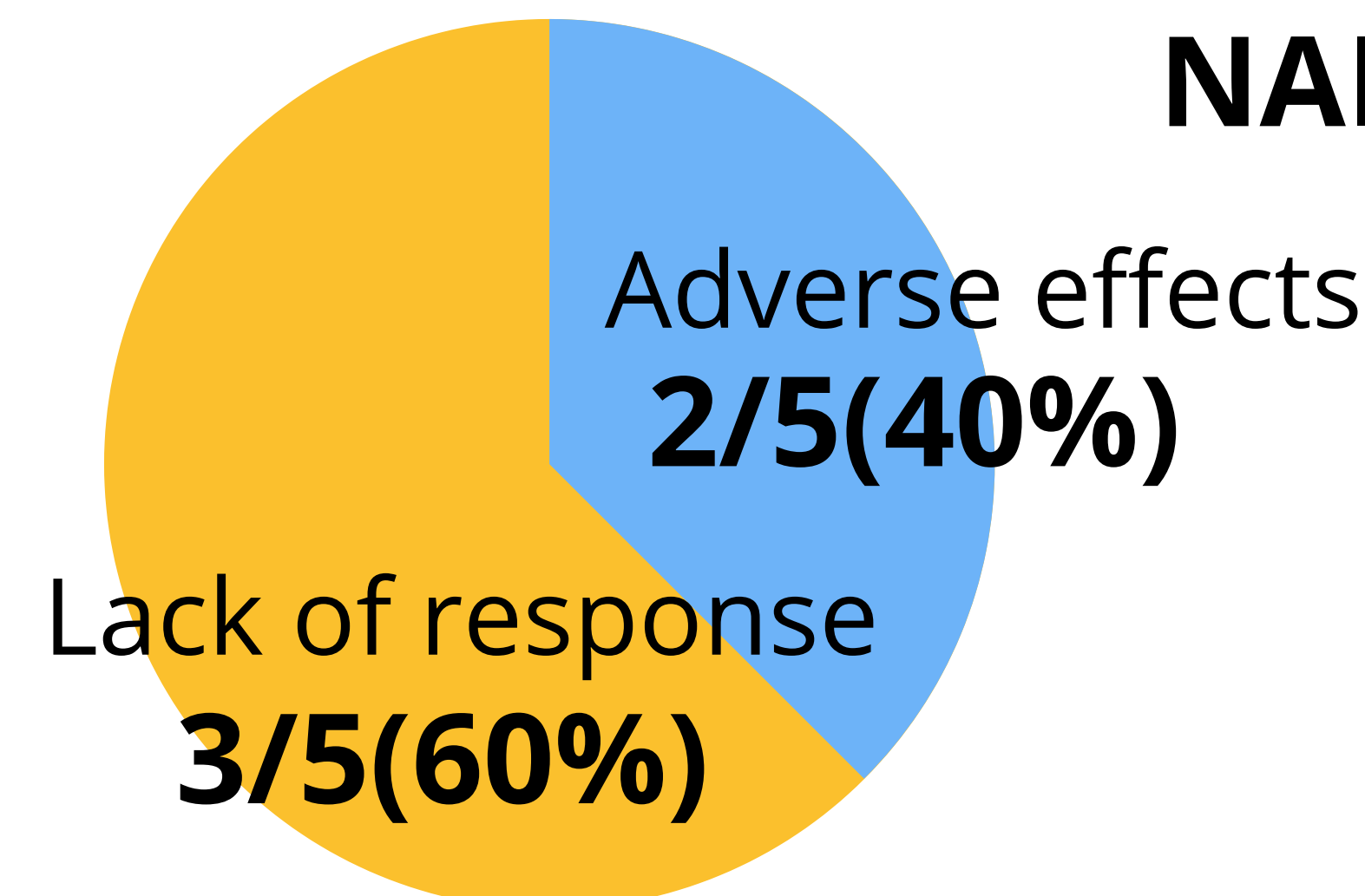
N 192 patients
92.7% women (178/192)
Mean age 47 (SD=12.6)

Safety (N 192):

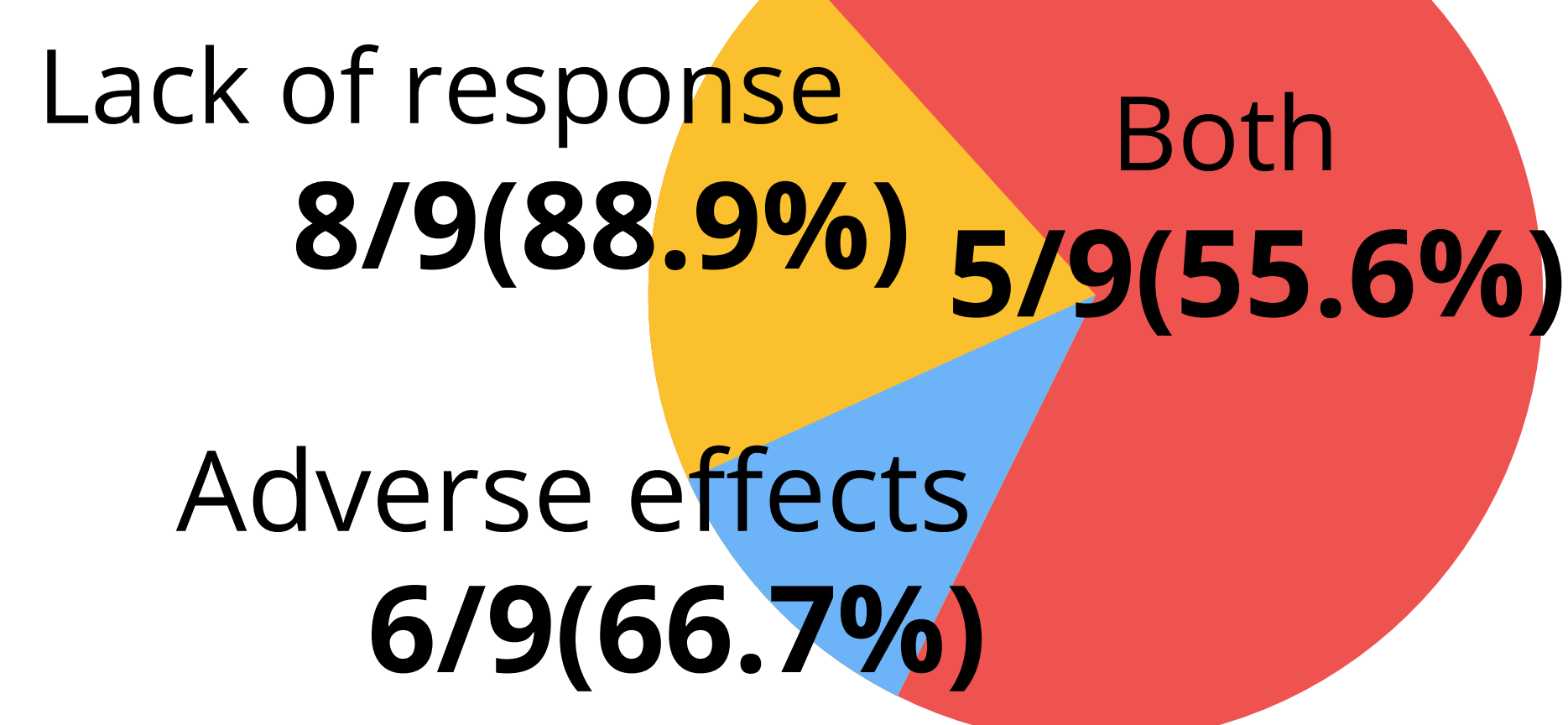
Most common adverse effects: constipation, nausea and weight loss

TREATMENT DISCONTINUATIONS

NAIVE



PRE-TREATED



Effectiveness (N 181):

Group	Patients	Baseline MMD	MMD after 12 weeks	MMD $\geq 50\%$ Reduction	MMD30-50% Reduction
Naive	131 (72.4%)	13	7	77 (58.8%)	19 (14.5%)
Pre-treated	50 (27.6%)	17	8	32 (64%)	5 (10%)

Differences in MMD: 1 (p=0.42)

CONCLUSIONS AND RELEVANCE

- ✓ Gepants reduce migraine days similarly in naïve and pre-treated patients
- ✓ Both groups show an adequate safety profile
- ✓ Higher treatment discontinuation rate observed in pre-treated patients