

Real-world clinical practice outcomes of atogepant in patients with migraine previously treated with anti-CGRP

M. Fuentes Herrero¹, D. Medina-Catalán¹, M. Masip¹, P. Riera¹, A. de Dios¹, R. Belvís², N. Morollón², N. Pagès-Puigdemont¹

1. Hospital de la Santa Creu i Sant Pau, Pharmacy Department, Barcelona, Spain.
2. Hospital de la Santa Creu i Sant Pau, Neurology Department, Barcelona, Spain.

Background and importance

Atogepant is an oral calcitonin gene-related peptide (CGRP) receptor antagonist indicated for the preventive treatment of migraine. In our healthcare setting, it is funded for patients who have failed ≥ 3 prior prophylactic treatments and who experience ≥ 8 monthly migraine days (MMD).

Aim and objectives

The aim of this study was to evaluate the effectiveness and tolerability of atogepant in real-world clinical practice in CM patients who had previously received another anti-CGRP drug, a cohort not represented in clinical trials.

Material and methods

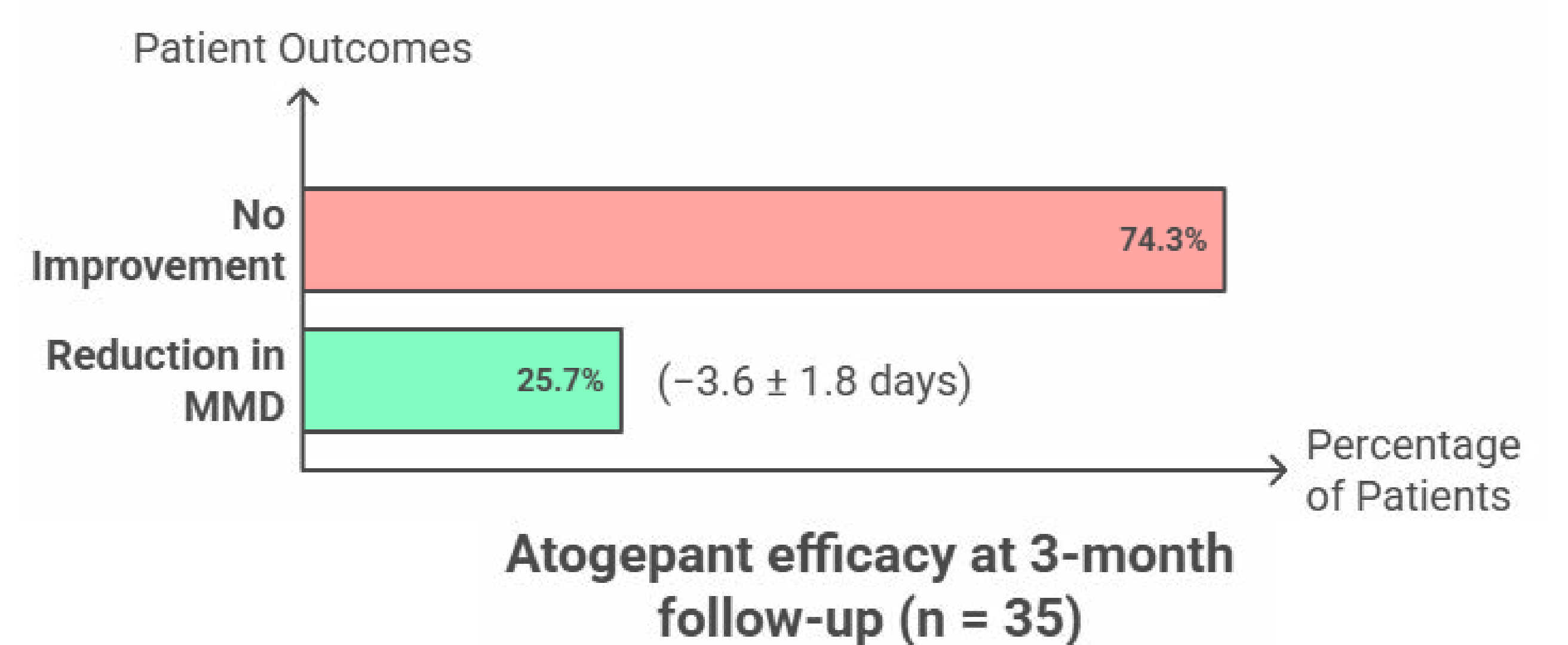
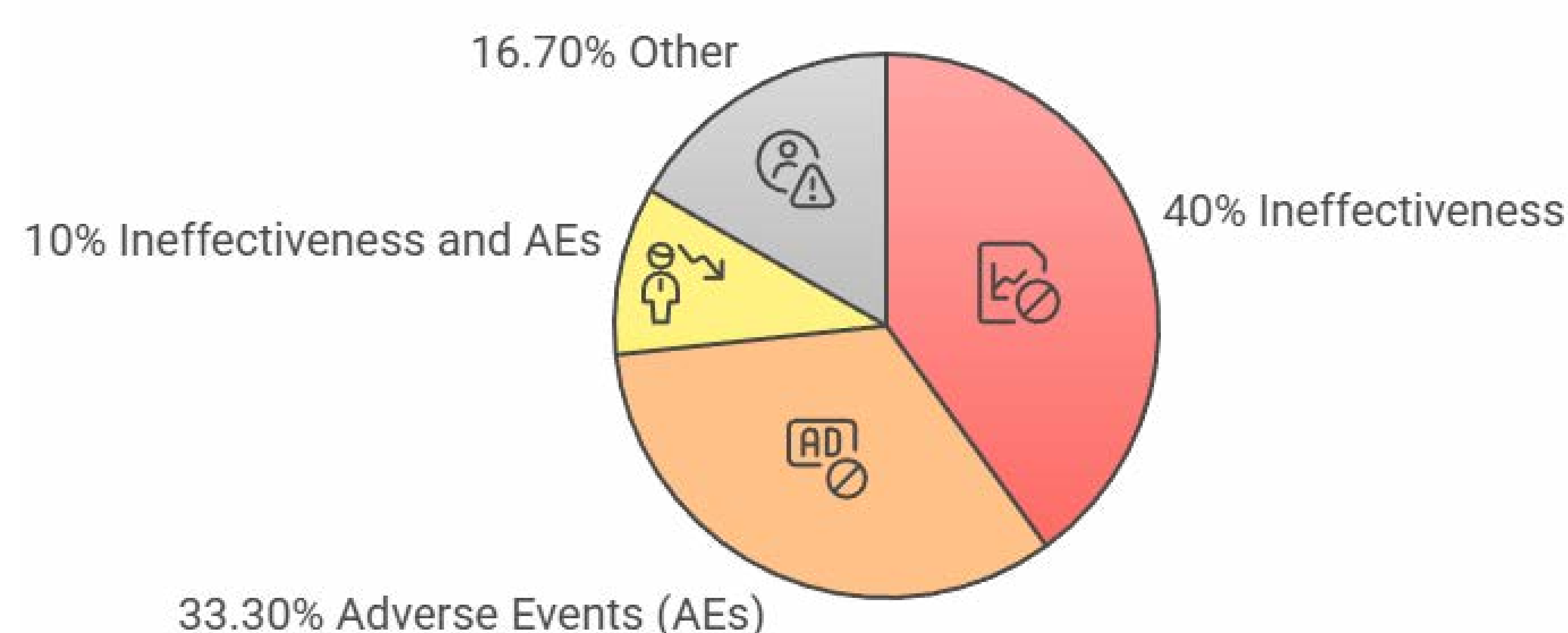
Retrospective and observational study conducted at a tertiary hospital (CM patients who started treatment between 04/2024–06/2025). Variables: demographic, baseline MMD and at 3 months, prior treatments, discontinuation, and adverse events (Aes).

Results

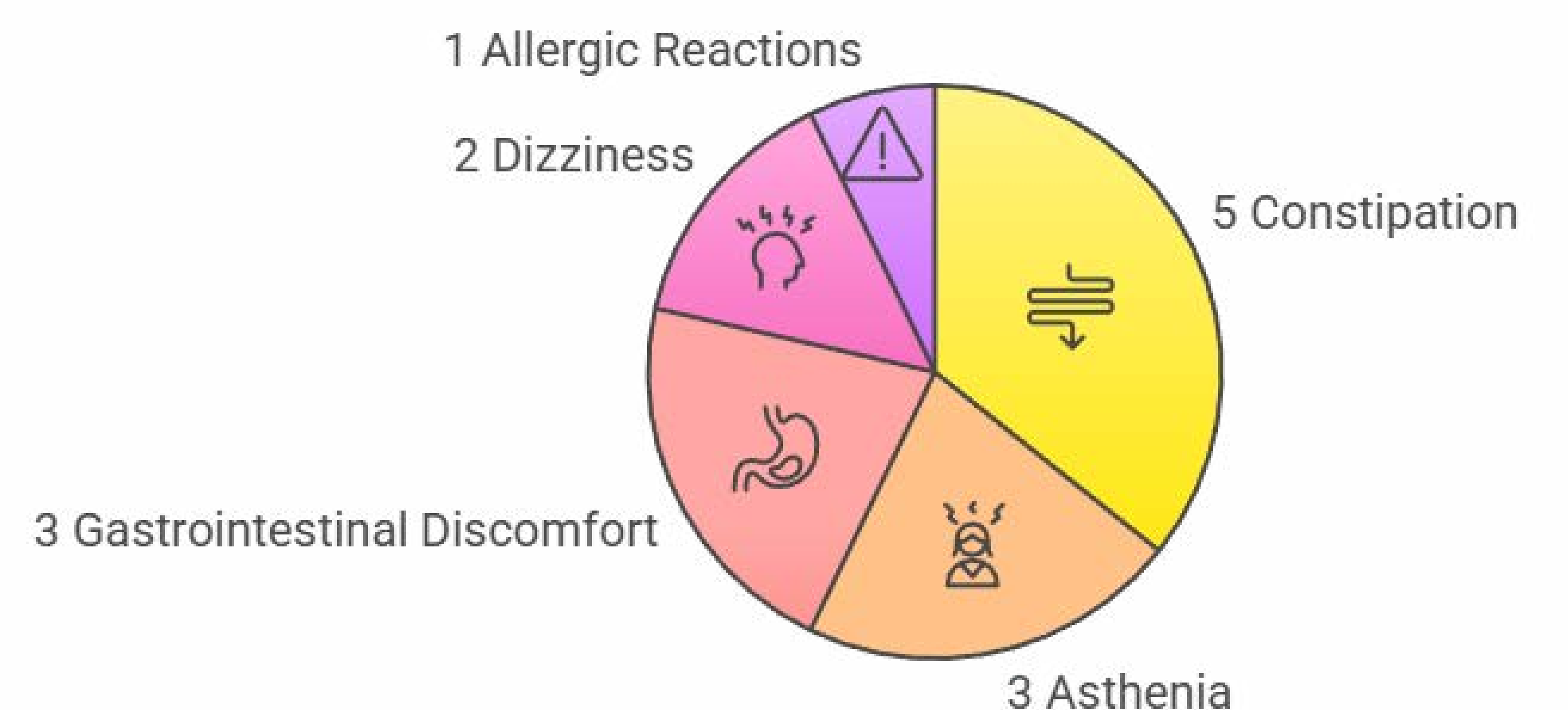
n = 54 patients. 87% (n=47) women, mean age: 50 years.
Most frequent comorbidities: anxiety (52%) and insomnia (35%).
Previous preventive treatments: 6.6 ± 2.9 .
 ≥ 3 prior anti-CGRP therapies: 51.8%.

- ✗ **Discontinuation:** 55.6%
- ✗ **Mean time to discontinuation:** 2.7 months

Reasons for Atogepant Discontinuation



Adverse Events



Conclusion and relevance

Limited effectiveness of atogepant in patients previously treated with anti-CGRP therapies. Tolerability issues lead to treatment discontinuation in a relevant proportion of patients. Further evidence is needed to clarify the clinical benefit in anti-CGRP-refractory patients.

