

# EVALUATION OF THE EXCHANGE OF ANTICGRP MONOCLONAL ANTIBODIES FOR THE TREATMENT OF CHRONIC REFRACTORY MIGRAINE

4CPS-202  
N02- ANALGESICS



Mayo López, C<sup>1</sup>; Henares López, A<sup>1</sup>; Collados Arroyo, V<sup>1</sup>; Fernández Caballero, R<sup>1</sup>  
<sup>1</sup>Hospital Infanta Elena. Hospital Pharmacy. Madrid (Valdemoro) SPAIN

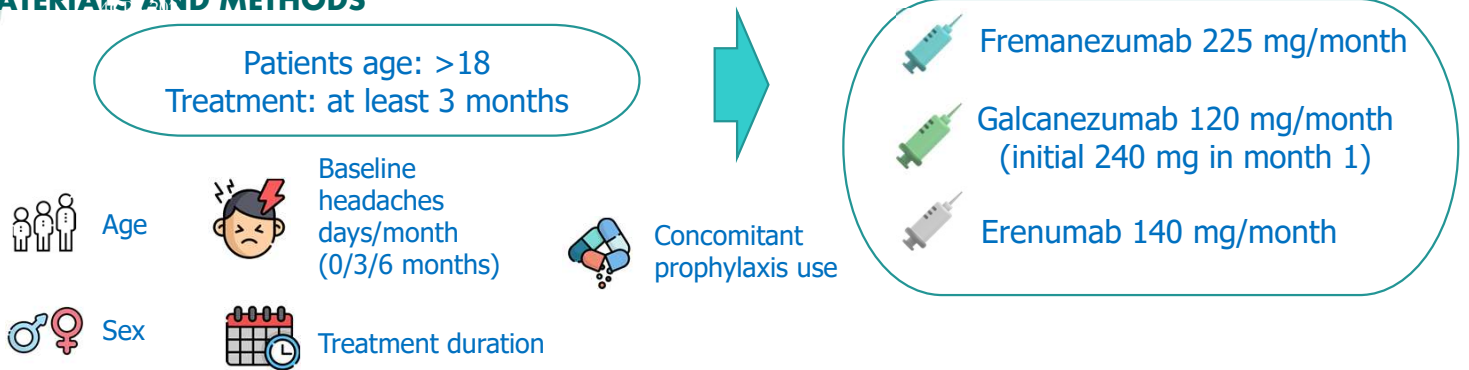
## BACKGROUND AND IMPORTANCE

In clinical practice of chronic migraine treatment, changes between the different antiCGRP monoclonal antibodies (mABs) on the market are made, but there are still no clinical trials to support the effectiveness of such a switch.

## AIM AND OBJECTIVES

To determine the characteristics of the switches made between mABs (fremanezumab, galcanezumab and erenumab) in our hospital, and to evaluate the effectiveness of these changes.

## MATERIALS AND METHODS

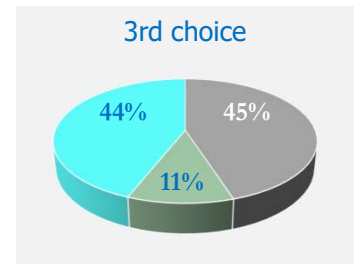
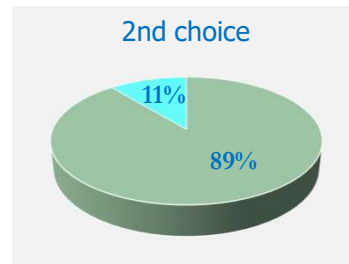
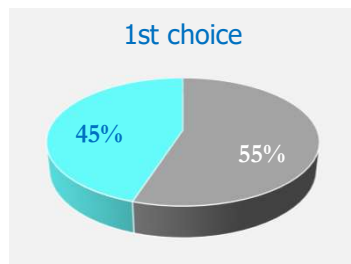


## RESULTS

**N=18**

FREMANEZUMAB GALCANEZUMAB ERENUMAB

- 71 %
- 44.6 years old Median (IQR:42.6-58.4)
- 20.6 headaches/month (SD 7.8)
- 81% concomitant prophylaxis
- 6.7 months (SD 4.5)
- 10.1 months (SD 7)
- 7 months (SD 5)



Number of treatment reviewed: **55**

### 1st switch

11 % n=2 ← At least 50% reduction → 0 % n=0

16 % n=3 ← At least 30% reduction → 0 % n=0

FREMANEZUMAB

### 2nd switch

## CONCLUSIONS AND RELEVANCE

- Following the active treatment protocols for chronic migraine with mABs in our centre at any given time, our patient sample shows that only a maximum of 16% of patients could be rescued, taking a 30% decrease in the number of headache days per month as efficacy.
- Fremanezumab appears to be more effective than galcanezumab and erenumab when it comes to treatment changes.