



IMPROVING SAFETY IN THE USE OF MONOCLONAL ANTIBODIES IN PATIENTS WITH MIGRAINE: AN INTERDISCIPLINARY STUDY

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Carvajal-Sanchez MA¹, Machado-Leon A², Leon-Villar J¹, Pacheco-Lopez P¹, Ibañez-Caturla J¹, Fructuoso-Gonzalez L¹, Torrano-Belmonte P¹, Hernandez-Sanchez M¹, Gutierrez-Sanchez JA¹, Plaza-Aniorte J¹.

¹Hospital Morales Meseguer, Hospital Pharmacy, Murcia, Spain.

²Hospital Rafael Mendez, Endocrinology Service, Lorca, Spain.

Background and importance

Erenumab and galcanezumab are two subcutaneously administered monoclonal antibodies (MA) indicated for migraine prophylaxis in adults.

These MAs are newly marketed drugs. The integration of the hospital pharmacist (HP) in interdisciplinary teams (IT) has been shown to reduce the complications of these treatments. In addition, it improves monitoring of health outcomes, reduces unnecessary medication, treatment costs and minimises hospital admissions.

Aim and objectives

To analyse the outcomes after the creation of an MA dispensing circuit and an IT composed of neurologists, nutritionists and HP.

This team focuses on the treatment of migraine and the early detection, treatment and prevention of adverse reactions (AR).

Materials and methods

Retrospective observational study conducted from January 2020 to September 2021.

Patients diagnosed with chronic or episodic migraine under treatment with MA were included.

- These treatments are exclusively prescribed by the neurologist and are dispensed in the outpatient consultation services by an HP.
- The HP conducts the clinical interview, records effectiveness data, AR and other clinical data of interest and generates the corresponding report in the patient's medical record. In addition, the HP provides pharmaceutical advice and all necessary information to the patient.
- The nutritionist prepared the nutritional recommendations for the treatment and prevention of constipation.

Results

During the study period 77 patients (85.7% female) were attended, with a median age of 51 years (22-79).

- ❖ The occurrence of constipation was detected in 30 patients (38.96%), substantially higher tan that described in the pivotal trials (PT) of reference: erenumab 70mg: 1.3%; 140mg: 3.2%. Galcanezumab 120mg: 1%; 240mg: 1.5% and in the erenumab therapeutic positioning report (TPR): 3.3%.
- The occurrence of hypertension was also detected in 7 patients (9.09%), not described in the PT or TPR.

	Our study	Erenumab 70 PT	Erenumab 140 PT	Galcanezumab 120 PT	Galcanezumab 240 PT	Erenumab TPR
Constipation	38.96%	1.3%	3.2%	1%	1,5%	3,3%
Hypertension	9,09%	_	-			

All AR were reported. Oral and written information was provided to the patient.

Conclusion and relevance:

The creation of the IT brings value in the quality of healthcare and fosters cooperation between physician, nutritionist and HP. Furthermore, it favours early detection, prevention and treatment of AR.