

ERENUMAB VERSUS GALCANEZUMAB, EFFECTIVENESS IN REAL-LIFE EXPERIENCE

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Background and importance

Erenumab and galcanezumab have been the first prophylaxis option in migraine since the arrival of calcitonine gene related peptide inhibitors (CGRPi). In clinical trials, its effectivity has been set after 12 weeks of treatment.

Aim and objectives

Evaluate the efficacy difference between both treatments in real world data.

Material and methods

A retrospective, observational study was performed from January 2020 to July 2021. Patients with more than 12 weeks of treatment were analysed. Evaluation of response upon patients interviews with neurologists and pharmacists, extracting data from clinical history. Comparison with the other drug and with clinical trial results.

Results

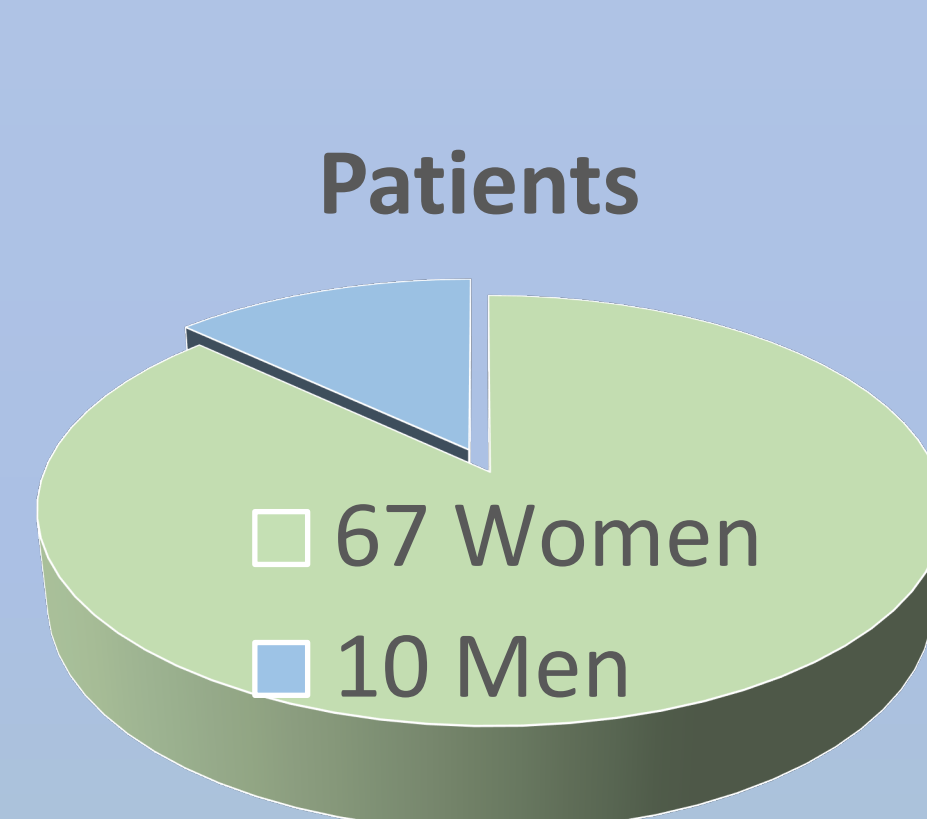


ERENUMAB

48 Patients

GALCANEZUMAB

29 Patients



$\bar{x} = 50.6$ years

Reduction of MMD	Clinical Trials Patients	Real Life Patients
≥50%	39.9%	58.3%
≥75%	17.0%	20.8%

Reduction of MMD	Clinical Trials Patients	Real Life Patients
≥50%	62.3%	72.4%
≥75%	38.8%	37.8%



All patients mentioned a softer migraine pain.

Conclusion and relevance

Erenumab and galcanezumab seem to get better results in real patients, but galcanezumab seems to be better than erenumab, although both treatments are better than their clinical trials. Facing them, galcanezumab seems to achieve better response, so further studies are required to check this out.

These new treatments can improve patient's quality of life, so its use should be reviewed and follow up should be collaborative between neurologists and pharmacists to see the real effect of this medication..