5PSQ-071

REAL-WORLD RESULTS OF EFFECTIVENESS AND SECURITY OF ERENUMAB AND GALCANEZUMAB IN MIGRAINE PATIENTS

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Background and importance:

Migraine is a very disabling and prevalent disease that needs new therapies to reduce episodes and improve patient's quality of life. Erenumab and galcanezumab are subcutaneous monoclonal antibodies recently approved for migraine prophylaxis in patients with previous treatment failures.

Aim and objectives:

To assess the effectiveness and security in real-world conditions.

Materials and methods:

- Observational retrospective study
- Includes patients with the funded indication to start erenumab and galcanezumab in Spain

➢ Patients with 8 or more migraine days/month and
➢ Three or more previous treatment failures

Study period: October-2020 - September-2021

We established **effectiveness (responsive patients)**

→ **In episodic migraine (EM)→** when there is a minimal reduction in the average NMDM of 50%

→ **In chronic migraine (CM)→** when NMDM are reduced at least 30% with a decrease of minimum 5 points on HIT-6 score from the baseline value.

To **evaluate the effectiveness**, we recorded for each patient at the beginning and at the end of the study period two variables:

- The average number of migraine days per month (NMDM)
- The score of Headache Impact Test (HIT-6)

Results

339 patients (80.27% women; mean age of 46.7±11.4 years) were included.

The previous 3 months before starting these prophylaxis →

Average NMDM	Average HIT-6 score
21 ±7.4 days	66.20 ±5.82 points

After a mean follow-up period of 6.7±4.6 months per patient

	Erenumab (n=182)		Galcanezumab (n=157)	
	EM (n=39)	CM (n=143)	EM (n=31)	CM (n=126)
Number of patients with response (%)	14 (35.89%)	48 (33.56%)	16 (51.61%)	40 (31.75%)

Only 12 (3.54%) patients discontinued treatment because of **adverse effects (AE**)

→ **Erenumab group:** 10 (83,33%) patients

→ **Galcanezumab group:** 2 (16.67%) patients

Conclusion and relevance:

We found in our study a higher proportion of responsive patients for each drug and type of migraine than in most clinical assays did. In general they are well tolerated, but it seems that erenumab has more limiting AE than galcanezumab in our population study. More real-world studies are needed to confirm these findings.