



LONG-TERM OUTCOMES AND RETREATMENT PATTERNS IN ANTI-CGRP THERAPY

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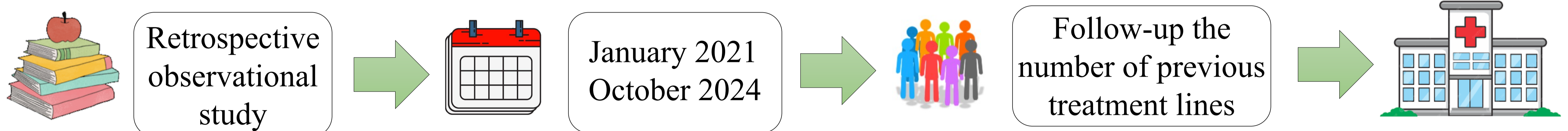
BACKGROUND AND IMPORTANCE

Anti-CGRP antibodies are a recent treatment used for migraine prophylaxis in patients with frequent migraines, prescribed after failure of other therapies. There is ongoing debate regarding the optimal duration of therapy, with some guidelines recommending reassessment after one year. However, the lack of long-term data and potential risk of relapse raises uncertainty about the appropriateness of treatment discontinuation.

AIM AND OBJECTIVES

To evaluate the number of retreatments required in migraine patients who discontinued anti-CGRP antibody therapy after one year of adequate response, with a detailed descriptive analysis of those who discontinued the therapy. To assess whether there are significant differences in retreatment rates between patients with 6 or fewer prior migraine prophylaxis treatments and those with 7 or more.

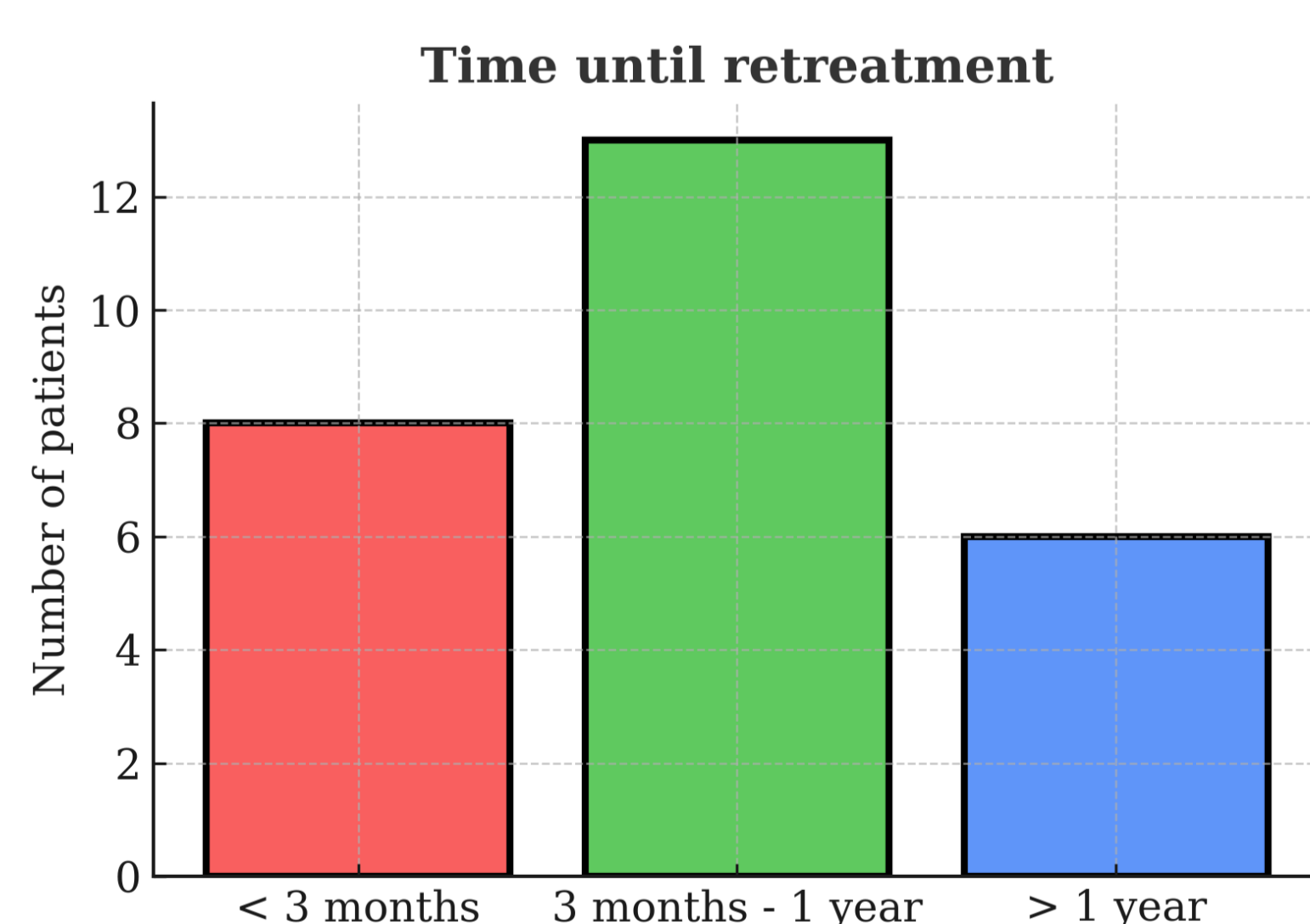
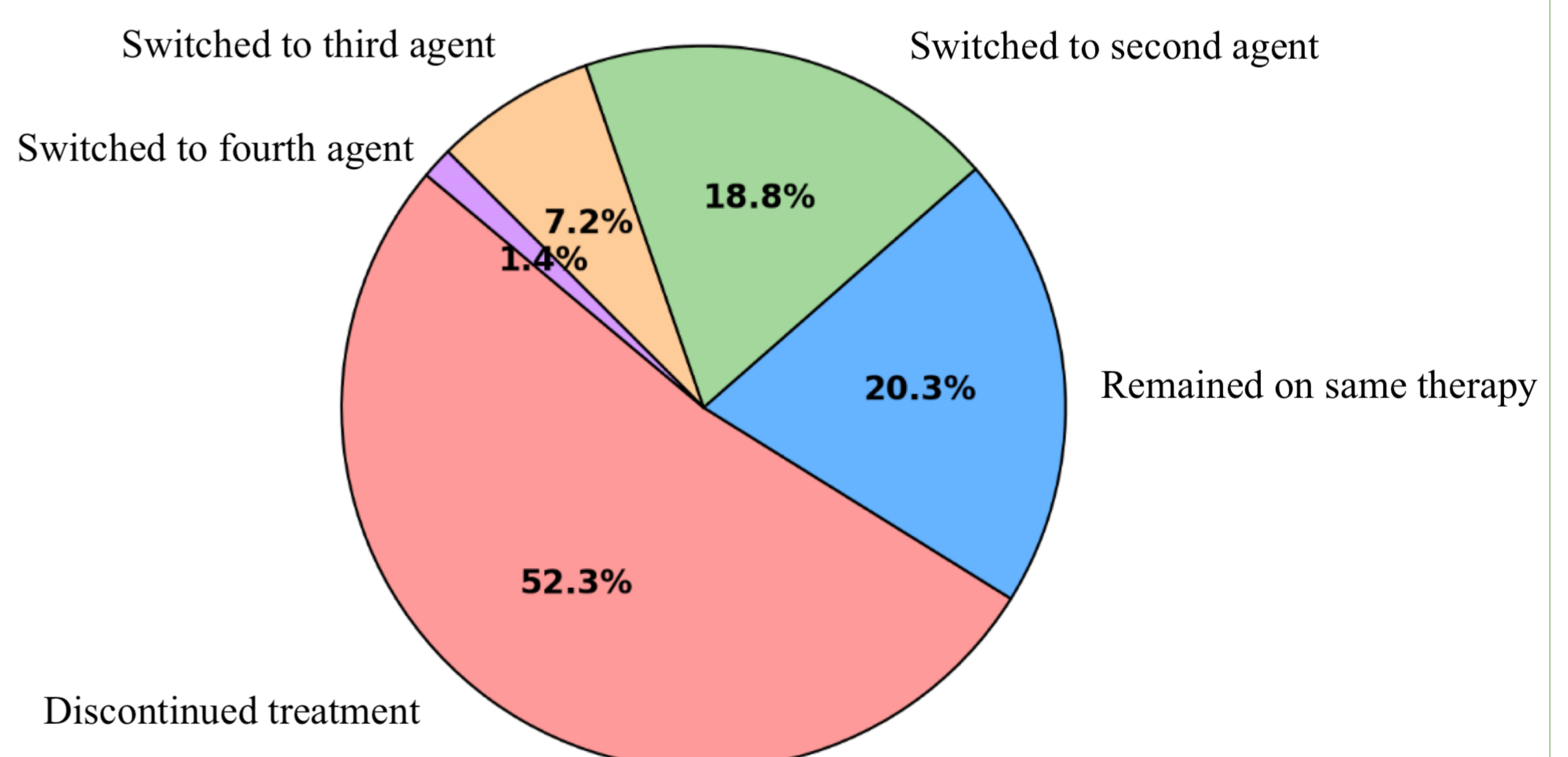
MATERIAL AND METHODS



RESULTS

Among 119 patients, with a median of 6 prior treatment lines (IQR 5–8), 70 had been receiving anti-CGRP therapy for more than one year. Of these, 36 patients (51.5%) discontinued the treatment after one year.

Patient outcomes after one year of Anti-CGRP therapy



CONCLUSION AND RELEVANCE

More than half of the patients stopped treatment within a year, with 75% needing retreatment. This underscores the challenges in sustaining symptom control and emphasizes the need for personalized approaches, as treatment responses and retreatment timelines varied significantly across patients.