

2SPD-011: COMPARATIVE EFFICACY OF EPTINEZUMAB, GALCANEZUMAB, FREMANEZUMAB AND ERENUMAB IN THE PREVENTIVE TREATMENT OF CHRONIC MIGRAINE

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Background

Several monoclonal antibodies for preventive treatment of chronic migraine have been approved in recent years. However, there are no studies that directly compare these treatments.

Aim and objectives

To establish, through an indirect comparison (IC) against placebo, whether eptinezumab (Ep), galcanezumab (Ga), fremanezumab (Fre) and erenumab (Ere) could be considered equivalent alternatives in efficacy for the preventive treatment of chronic migraine.

Materials and methods

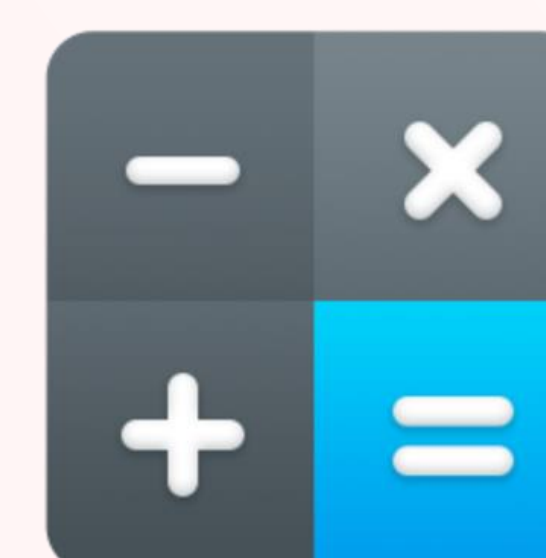


Pubmed search for pivotal clinical trials (CT):

- Ep (300mg/12 weeks)
- Ga (240mg/4 weeks)
- Fre(675mg/12 weeks)
- Ere (140mg/4 weeks)



Main variable for comparison: percentage of patients with $\geq 75\%$ response at week 12



RR compared to placebo was calculated. With these values, an IC of these drugs was performed using the Bucher method



The results were analyzed, seeing if there were statistically significant differences

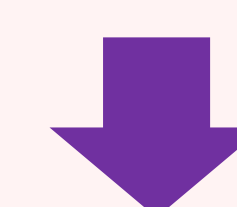
Results

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Clinical Trials

- one with each drug
- All of them compared to placebo.
- All the studies presented a similar methodology



However, CT of Ere was a phase 2 CT, while the others were phase 3. Moreover, in the Ere CT the sample size (667 patients) was smaller than in the other CTs (between 1072 and 1130 patients).



These limitations for IC were eventually accepted.

DRUGS	OR (IC95)	P
Ep vs Gal	0.89 (0.48-1.65)	0.70
Ep vs Fre	0.95 (0.56-1.61)	0.85
Ep vs Ere	1.21 (0.69-2.13)	0.50
Fre vs Gal	0.93 (0.46-1.89)	0.85
Ere vs Gal	0.73 (0.35-1.52)	0.40
Fre vs Ere	1.28 (0.66-2.46)	0.47

Conclusions

According to the results obtained, given that no statistically significant differences have been established between the different drugs in terms of efficacy, the choice of one or the other should be based on safety and efficiency criteria