

REAL-WORLD PERSISTENCE WITH FREMANEZUMAB VERSUS ERENUMAB AMONG MIGRAINE PATIENTS


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Background and Importance

Migraine therapy is a major challenge. Monoclonal antibodies against calcitonin gene-related peptide (anti-CGRP mAb), as fremanezumab (FR) and erenumab (ER), are indicated for migraine prophylaxis in adults.

Little is known about the comparative persistence of FR and ER, two anti-CGRP mAbs commonly used in our clinical practice.

Aim and Objectives


 To compare the persistence of FR and ER in naïve patients with migraine and to identify factors associated with it.

Materials and Methods

Retrospective
 Non-interventional
 Longitudinal

Chronic or episodic naïve migraine patients over 18 years treated with FR and ER

Start of treatment – end observation period (August 2023)

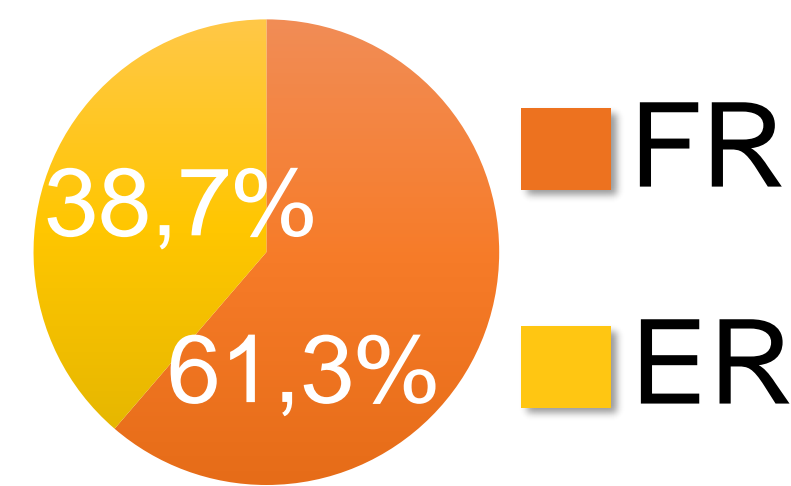
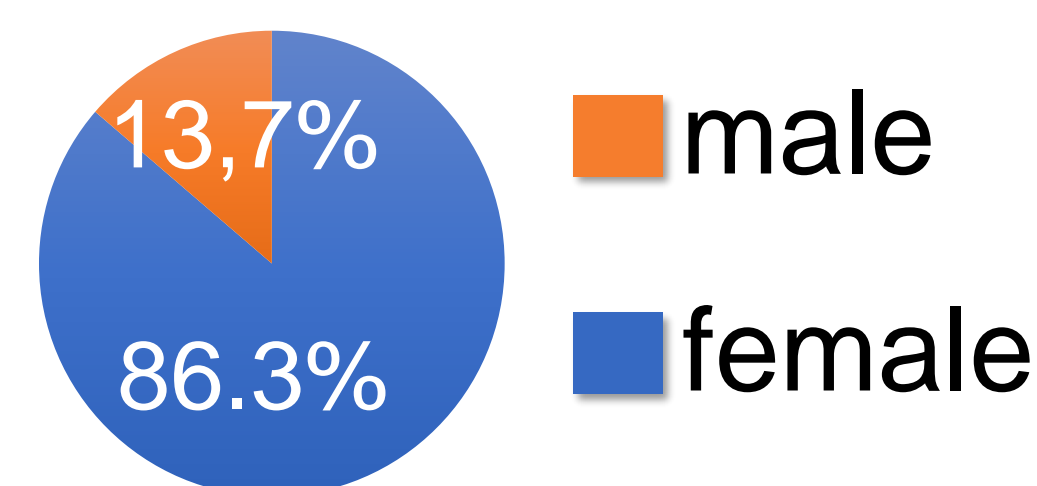
Covariates collected from medical record were: age, gender, baseline migraine days per month (MDM) and Medication Possession Ratio (MPR).


 Permissible gap was 60 days

- ✓ Qualitative variables was compared using the χ^2 test, quantitative variables with Mann-Whitney U test or the Student's t-distribution
- ✓ **Kaplan-Meier survival analysis** was performed and differences were evaluated using the log-rank test
- ✓ Adjusted risk of discontinuation was assessed with **Cox Proportional Hazard models**
- ✓ **Significance level was 0.05**

Results


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Baseline MPR: 98.4±4.1
 Baseline MDM: 17 days (IQ 12-28)

Mean persistence duration was 482 days (CI 95% 404-559)

Persistence with **FR** was **743 days** (CI 95% 638-848)

Persistence with **ER** was **548 days** (CI 95% 368-729)

p= 0.001

Cox-model adjusted HR was by MDM

- ✓ **3.5** for **anti-CGRP mAb** (CI 95% 1.7-6.9)
- ✓ **1.1** for **baseline MDM** (CI 95%, 1.04-1.15)

Conclusion and Relevance

In our study, naïve patients treated with **FR** had **higher persistence** rates than those treated with ER. **Baseline MDM** was also found to influence persistence.

