USE OF MONOCLONAL ANTIBODIES AGAINST THE CALCITONIN GENE-RELATED PEPTIDE PATHWAY IN CHRONIC MIGRAINE IN CLINICAL PRACTICE

M.D.P. BRICEÑO CASADO1, M.D. GIL-SIERRA2, B. DE LA CALLE-RIAGUAS1, F.J. JULIA-LUNA1, C. PIQUERAS-ROMERO1.
1HOSPITAL NUESTRA SEÑORA DEL PRADO, HOSPITAL PHARMACY, TALAVERA DE LA REINA, SPAIN. 2HOSPITAL UNIVERSITARIO PUERTO REAL, HOSPITAL PHARMACY, CADIZ, SPAIN.

AIM AND OBJECTIVES
To assess effectiveness and safety of CGRP-mAbs in CM in clinical practice.

BACKGROUND AND IMPORTANCE
Migraine → neurological disorder with a high prevalence.
Monoclonal antibodies against the calcitonin gene-related peptide pathway (CGRP-mAbs) → indicated for the prevention of chronic migraine (CM).

MATERIAL AND METHODS
➢ Descriptive retrospective study.
➢ Patients with CM receiving CGRP-mAbs between May 2018 and September 2021 were included.
➢ Electronic clinical history and prescription software Farmatools® were used to record data: gender, age, previous preventive treatment, CGRP-mAb prescribed, dosage, duration of therapy and monthly migraine days.
➢ Effectiveness → measured by the reduction in pain intensity (any subjective clinical improvement) and the reduction ≥50% of monthly migraine days from baseline. Failure to meet both criteria was considered as non-response. Effectiveness endpoints were measured at 3 and 9 months.
➢ Safety → evaluated according to adverse events (AE) and discontinuations of treatment.

RESULTS
➢ 39 patients: 33 (85%) women and 6 (15%) men. Mean age = 48 (23-74) years.
➢ Baseline monthly migraine days ≥8 in all patients.
➢ Mean duration therapy = 11 (4-22) months.

PREVIOUS TREATMENT:
Mean of prior preventive drugs → 6 (3-14):
• botulinum toxin A (n=39)
• topiramate (n=30)
• flunarizine (n=28)
• amitriptyline (n=27)
• zonisamide (n=26)
• propranolol (n=24)

CGRP-mAbs:
➢ 19 (49%) patients galcanezumab 120 mg monthly (with 240 mg induction dose),
➢ 13 (33%) patients erenumab 70 mg monthly
➢ 7 (18%) patients fremanezumab 225 mg monthly.

EFFECTIVENESS
▪ At 3 months: 66% of patients presented both reduction in pain intensity and reduction ≥50% of monthly migraine days, 5% presented only reduction in pain intensity and 29% no response.
▪ At 9 months: 48% patients presented both reduction in pain intensity and reduction ≥50% of monthly migraine days, 10% presented only reduction in pain intensity and 42% no response.

SAFETY PROFILE → 8% patients presented injection site reaction as AE. No discontinuations of treatment.

CONCLUSION AND RELEVANCE
CGRP-mAbs presented an adequate effectiveness in more than half of patients at 3 months, although this effectiveness was slightly reduced at 9 months. CGRP-mAbs were well tolerated, with few AEs.