



## INTRODUCTION

- Chronic migraine (CM) affects 2% of the general population<sup>1</sup> and is the most disabling form of the disorder with substantial impact on quality of life<sup>2</sup>.
- Calcitonin Gene-Related Peptide (CGRP) monoclonal antibodies (mabs) have proven to be effective and well tolerated in migraine prevention<sup>3</sup>.
- Erenumab (CGRP-receptor mab) was found to be efficacious in CM prevention<sup>4</sup>, post-marketing real-life data have started to emerge confirming the results of published trials.

## CONCLUSION

- Erenumab is a valuable, effective and well tolerated therapeutic option for patients with chronic migraine who previously failed multiple preventive therapies.
- The migraine days responder rate is comparable to previously reported results<sup>6</sup>.

## AIM

To report outcome data for erenumab in treating CM patients in a tertiary headache clinic, using the UK Free-of-Charge (FoC) scheme.

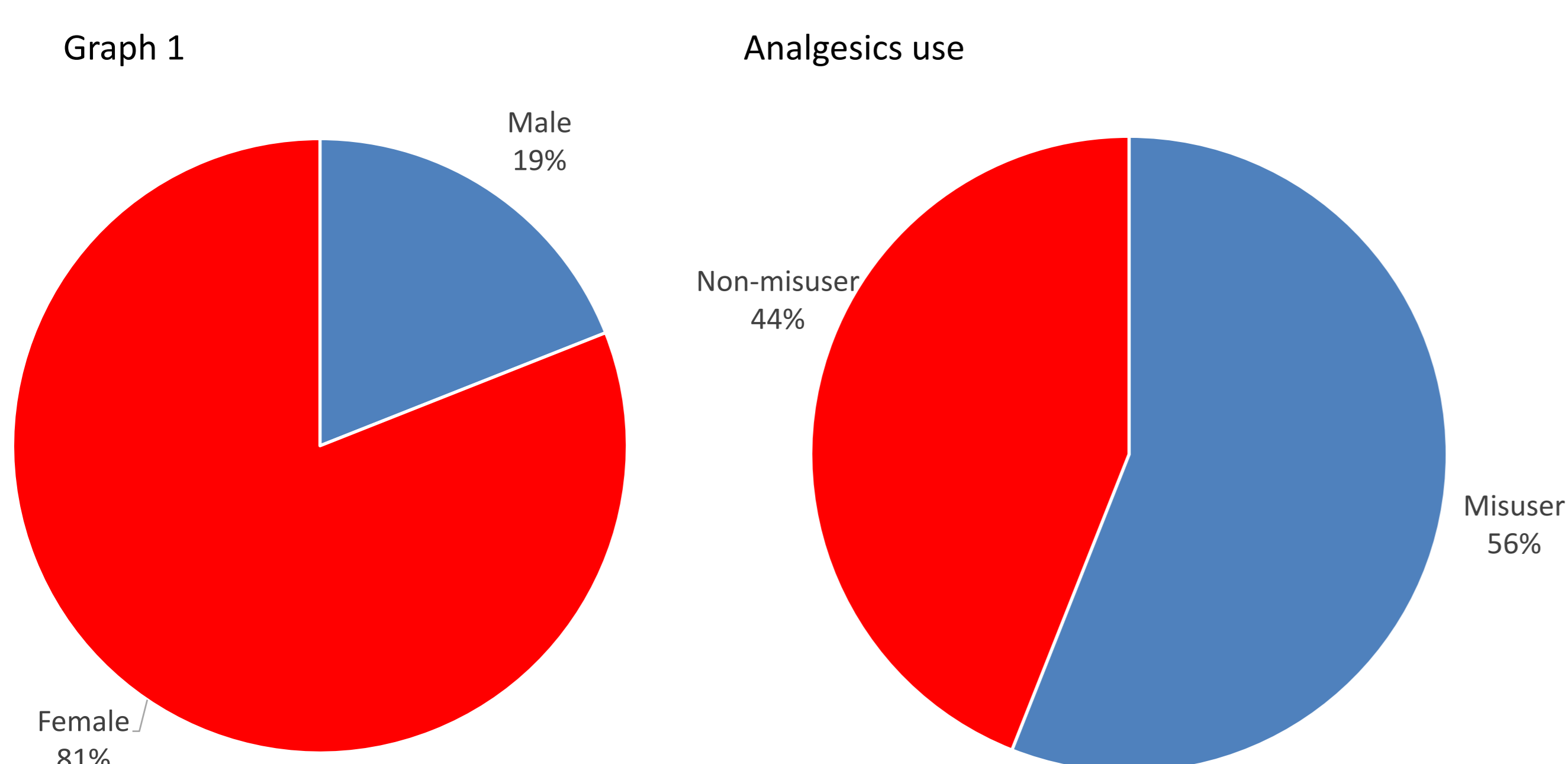
## METHODS

- Patients with CM by the International Classification of the Headache Disorders (ICHD-3)<sup>5</sup> who failed at least three preventive classes received erenumab 70mg subcutaneously monthly initially for 3 months.
- Patients were asked to keep headache diaries and were reviewed monthly to check their progress.
- We collected as part of our routine practice: headache days, migraine days, analgesics days and HIT-6 score at baseline and one month after the third injection; We examined for differences using Wilcoxon matched pairs test setting  $P < 0.05$  as significant (table 1); We calculated the 50% responder rate for migraine days; We tabulated reported side effects.

## RESULTS

- Seventy five patients (16 male) fulfilled the FoC scheme criteria for starting erenumab (graph 1), and a total of 395 cycles were given between December 2018 and August 2019.
- Full 3 months cycles data were available for 57 patients.
- Patients had chronic migraine for an average of 13 years and had tried a median of 6 classes of migraine preventives.
- The 50% responder rate for migraine days after 3 months was 40% (23 patients).

Graph 1



- Headache, migraine and analgesic days as well as HIT-6 scores were significantly reduced after 3 months (Graphs 2).
- Twenty eight patients (37%) reported side effects (table 1).

Graphs 2

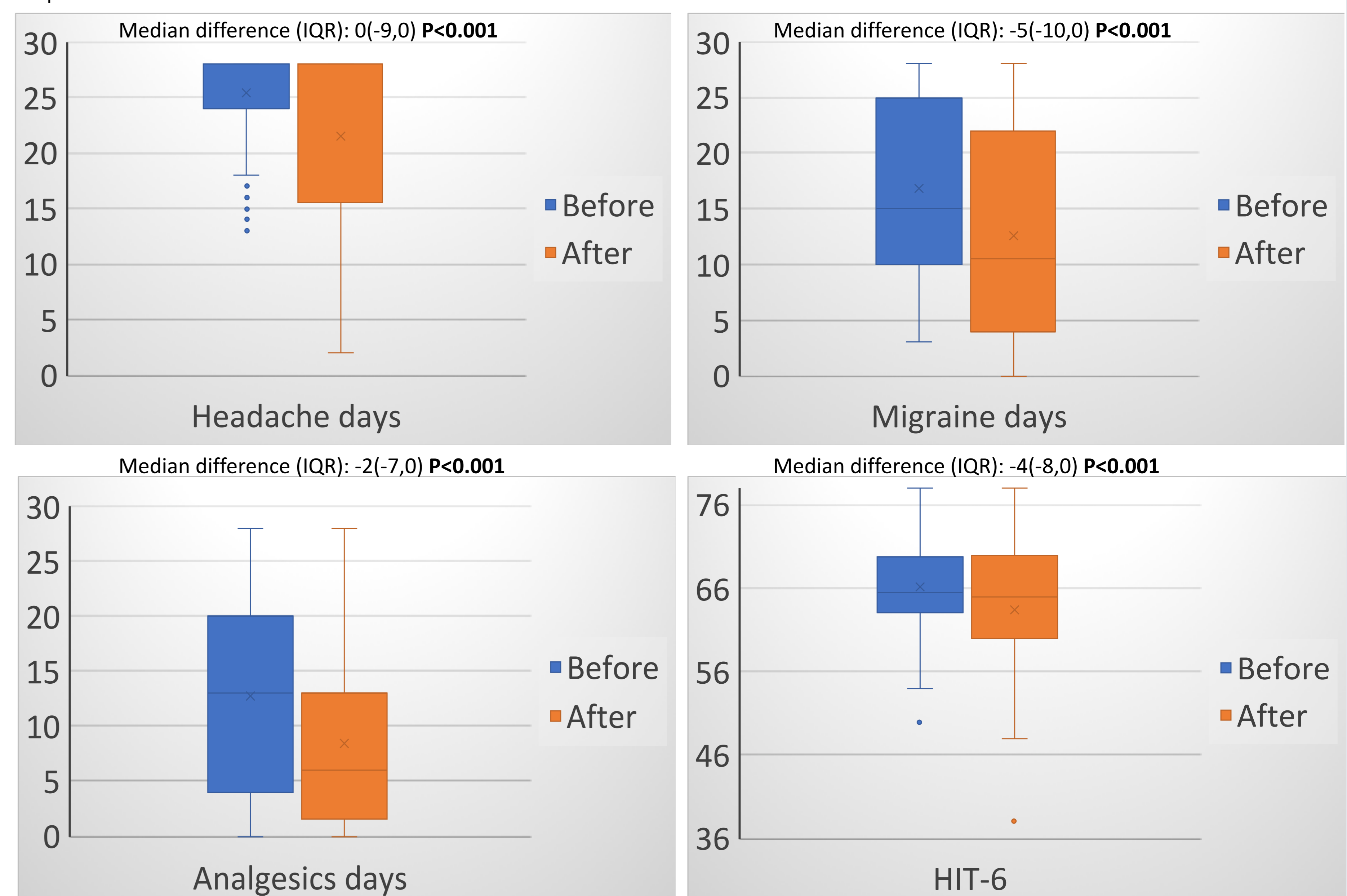


Table 1

Side effects	Prevalence (%)
Constipation	50 (21)*
Worsened headache	19
Skin reaction	14
Dizziness	14
Cramps	10
Bloating	7
Nausea	7
Fatigue	7
Others	19

\*Patients who already had constipation prior to treatment with erenumab.

## REFERENCES

- Natoli JL, et al. Cephalalgia. 2010;30:599-6093
- Bigal ME, et al. Neurology 2008;71:559-661
- Dodick DW. Cephalalgia. 2019;39:445-458

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