1. PURPOSE

Evaluating galcanezumab effectiveness and tolerability in difficult-to-treat chronic migraineurs (CM) +/- medication overuse headache (MOH).

2. METHODS

Baseline total population: n 26 (F 22 – M 4)
- Mean Age (yrs±SD): 53±11
- Headache history (yrs±SD): 38.5±12.1
- Chronicity duration (yrs±SD): 13.3±8.9
- Diagnosis: CM/CM+MOH (n,%): 4(15%)/22(85%)
- Failure of: >3 preventive therapies Onabotulinum Toxin A 100%/81%
- Previous Detox 73%
- Ongoing prophylaxis 62%
- Relevant comorbidities:
  - Psychiatric disorders 42%
  - Hypertension 15%

Administration:
- Galcanezumab administered every 30 days
- Real-life experience of one year treatment with galcanezumab in chronic migraine with and without medication overuse headache

Population:
- Drop out: N 2/26 (8%) due to lack of response (after T7, T9)

Data:
- Collection of:
  - Headache features (diaries)
  - Disability and allodynia at baseline and quarterly (questionnaires)

Statistics:
- ANOVA and post hoc tests

3. RESULTS

Fig 1. Percentage of patients who experienced migraine pattern reversal from chronic to episodic

Fig 2. Responder rate in monthly migraine days by percentage of response

Fig 3. Reduction in monthly headache days, acute medication doses and days of drug intake (p<0.01, p<0.02 and p<0.001 vs T0 at all time points, respectively)

Fig 4. Changes in disability (MIDAs and HIT-6) and allodynia. *p<0.05, **p<0.01, ***p<0.001

Fig 5. Percentage of Adverse events (AE)

4. CONCLUSIONS

Real-life data shows a high percentage of pattern reversal in difficult-to-treat chronic migraine patients, relevant improvement in clinical features and in headache-related disability. Efficacy is maintained over the long-term showing a positive tolerability profile.