PAINMEDICINE NEWS

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Patients Report Long-Term Reduction in Episodic Migraine Frequency With Erenumab

Sustained reductions in migraine frequency over more than four years were found with use of erenumab (Aimovig, Amgen and Novartis), according to pre-publication results of a five-year, open-label trial in patients with episodic migraines.

The study results were presented at the American Headache Society's 61st Annual Scientific Meeting, in Philadelphia (abstract IOR10).

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In previous studies with shorter durations, both chronic and episodic migraine patients treated with 70 or 140 mg of erenumab—a monoclonal antibody targeting the calcitonin gene–related peptide (CGRP) receptor—also reported clinically relevant improvements in outcomes, including decreased headache frequency and migraine-related disability, and better quality of life (*Neurology* 2019;92[19]:e2250-e2260; *N Engl J Med* 2017;377[22]:2123-2132).

These benefits can be maintained over longer periods, according to these new data. Over the study period, more than three-fourths of the study participants (77%) experienced a reduction of 50% or greater in monthly migraine days, while more than half (56%) had a 75% or greater reduction. Just over one-third of participants (33%) saw a 100% reduction.

Patients initially received 70 mg of erenumab monthly, and after approximately two years were switched to 140 mg, due to a protocol amendment to assess long-term safety of the higher dose, said Denise Chou, MD, the global medical director of neuroscience at Amgen, in an email. Of the 250 patients who received the increased dose of erenumab, 221 completed the study period or continued 140 mg of the medication past four years. Participants also reduced their use of acute migraine–specific medications: From a baseline of 6.1 days (SD, 2.7 days), treatment days fell by 4.6 days (SD, 3.3 days).

The three most common adverse effects were nasopharyngitis, upper respiratory tract infection and influenza. Despite this, discontinuation of the medication related to these effects was infrequent (5%).

The preventive migraine medication was well tolerated and safe, and no new safety signals were detected over the extended treatment period—the first extended study period of a CGRP inhibitor, according to the researchers. “The outcome of this trial provides patients and physicians with the first data on how patients may respond to CGRP monoclonal antibody therapy with treatment greater than three years,” Dr. Chou told *Pain Medicine News*. “It also builds on the long-term efficacy story for Aimovig, showing that many patients respond to the therapy over the long term, and the safety profile appears to remain consistent over that time.”

—Anna DeNelsky