

**Sustained benefit of monthly erenumab versus daily oral preventives in episodic migraine patients from APPRAISE study (120/120 characters)**

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## Abstract (250/250 words)

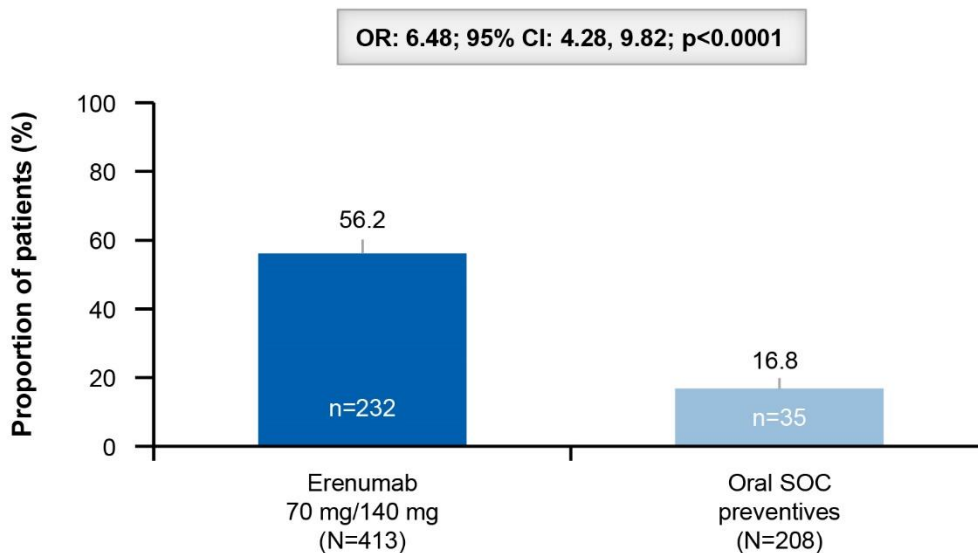
**Introduction:** APPRAISE is a global, prospective, randomised, open-label study comparing the sustained benefit of monthly subcutaneous erenumab with the standard of care daily oral preventives in episodic migraine (EM) patients.

**Methods:** Adults aged  $\geq 18$  years (N=621) with EM who had failed 1 or 2 previous migraine preventives due to lack of efficacy and/or tolerability were randomised (2:1) to monthly erenumab (70 mg or 140 mg) or a daily oral preventive. Switching within each arm was allowed (erenumab dose change or switch oral preventives approved locally). The primary, composite, endpoint was proportion of patients who completed the assigned treatment and achieved  $\geq 50\%$  reduction from baseline in monthly migraine days (MMD) at Month 12. Secondary endpoints were change in cumulative mean MMD from baseline for patients on the initially assigned treatment, proportion of patients completing the study on the initially assigned treatment and patient assessment of the change in clinical status from baseline measured by Patient Global Impression of Change (PGIC) scale at Month 12 on initially assigned treatment.

**Results:** A significantly higher proportion of patients stayed on the initially assigned treatment and achieved  $\geq 50\%$  MMD reduction from baseline with erenumab than oral preventives (56.2% vs 16.8%;  $p < 0.0001$ ) (**Figure 1**). Compared to oral preventives, erenumab treatment significantly reduced the mean MMD at each time point through Month 12 ( $p < 0.001$ ; **Figure 2**), which was also reflected in patient retention and PGIC results (**Table 1**)

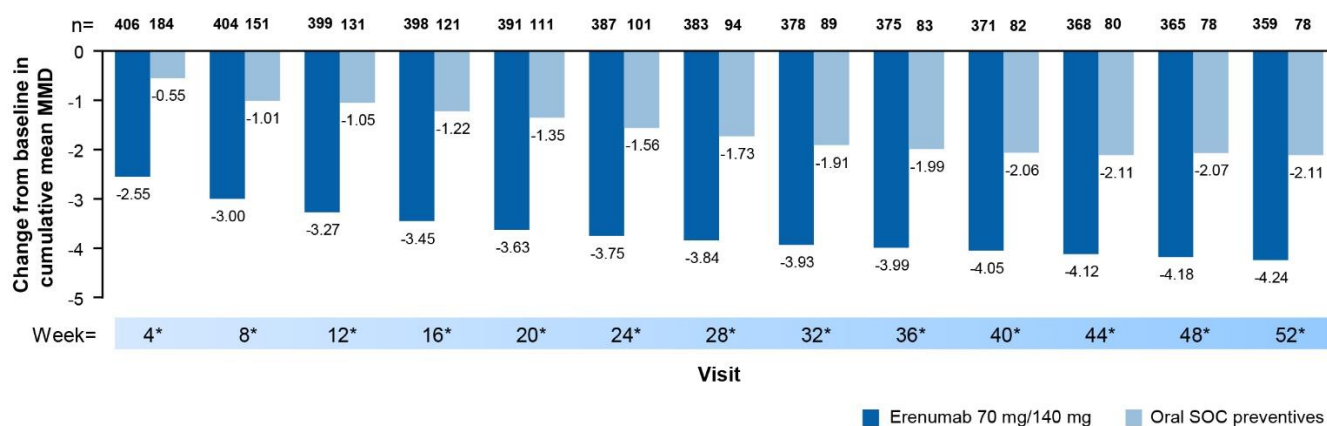
**Conclusions:** Erenumab showed sustained superior efficacy compared with oral preventives in patients with EM who had previously failed 1 or 2 migraine preventives.

**Figure 1. Proportion of patients who completed assigned treatment and achieved  $\geq 50\%$  reduction in MMD at Month 12**



CI, confidence interval; MMD, monthly migraine days, n, number of patients in respective arm; N, total number of patients in the study; OR, odds ratio; SOC, standard of care.

**Figure 2. Change in cumulative mean MMD from baseline through Month 12 on initially assigned treatment**



\*statistically significant at p<0.001. MMD, monthly migraine days; SOC, standard of care

**Table 1. Secondary endpoints: Proportion of patients completing the study and patient assessment of change in clinical status at Month 12**

Treatment group	n/N (%)	Comparison (erenumab 70 mg/140 mg versus oral SOC preventives) OR (95% CI); p-value
Patient retention*		
Erenumab 70 mg or 140 mg	359/413 (86.9)	11.27 (7.53, 16.87); <0.0001
Oral SOC preventives	78/208 (37.5)	-
Proportion of patients achieving relevant clinical improvement† (PGIC)		
Erenumab 70 mg or 140 mg	314/413 (76.0)	13.75 (9.08, 20.83); <0.001
Oral SOC preventives	39/208 (18.8)	-

\*Proportion of patients completing the study at Month 12 on the randomised treatment. †Patient is considered as responder if PGIC score is ≥5 at Month 12 on initially assigned treatment where score 5=moderately better, 6=better, 7=a great deal better.  
CI, confidence interval; n, the number of patients who responded; N, total number of patients in the treatment group; OR, odds ratio; PGIC, Patients' Global Impression of Change; SOC, standard of care

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**Topic:** Headache

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