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Clinical characteristics of patients and healthcare resource utilisation in European centres with and without dedicated headache clinic: Real-world evidence from the multinational BECOME study

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QUESTION

There is limited European data on migraine burden in patients with prior prophylactic treatment failures (PPTF). Here we report the impact of migraine on healthcare resource utilisation (HRU) among patients visiting centres with (DHC) and without dedicated headache clinics (WHC) from the BECOME study.

METHODS

BECOME was a prospective, non-interventional study conducted in two parts; part 2 examined the burden of migraine and HRU in DHC and WHC in patients with ≥ 1 PPTF and ≥ 4 monthly migraine days (MMD) through analysis of patient reported outcome questionnaires.

RESULTS

Overall, 2402 patients in Part 2 were grouped according to centre (DHC and WHC) and patient status (new-to-centre/follow-up) (**Table 1**). DHC had a slightly larger new-to-centre patient pool vs WHC. Here we present data for follow-up patients. DHC had higher proportion of patients with ≥ 4 PPTF vs WHC (19.7% vs 9.6%). Similarly, proportion of patients with ≥ 8 and ≥ 15 MMD was higher in DHC vs WHC. A high proportion of patients from both types of centres reported neurologist visits followed by general practitioners, in the past 3 months. More emergency room (ER) visits, medication-overuse headache (MOH) and hospitalisations due to migraine in the past year were reported by patients in DHC vs WHC. In contrast, MRI scans for exclusion of secondary causes were more common in WHC vs DHC (23.3% vs 19.3%), possibly reflecting that less headache-experienced doctors may request more scans.

CONCLUSION

While data suggest generally similar patient pools at DHC and WHC, some differences were observed. DHC had more new-to-centre patients than WHC, possibly owing to referrals, and a higher proportion of refractory patients and patients with ≥ 8 MMDs. In addition, DHC had more patients with MOH and hospitalisations, probably due to a larger chronic migraine population.

Figure 1

Table 1. Patient characteristics, healthcare visits and healthcare resource utilisation in centres with and without dedicated headache clinic in the BECOME study Part 2

Patients treated in centres with and without dedicated headache clinic (N=2402)				
	Centres with dedicated headache clinic (N=1970)		Centres without dedicated headache clinic (N=432)	
	n (%)		n (%)	
New patient	464 (23.6)		88 (20.4)	
Follow-up patient	1506 (76.4)		343 (79.4)	
Number of follow-up patients with prior prophylactic treatment failures				
	Centres with dedicated headache clinic (N=1506)		Centres without dedicated headache clinic (N=343)	
	n (%)		n (%)	
Treatment failures*				
1	530 (35.2)		181 (52.8)	
2	441 (29.3)		98 (28.6)	
3	239 (15.9)		31 (9.0)	
≥ 4	296 (19.7)		33 (9.6)	
Number of follow-up patients with various monthly migraine days				
	Centres with dedicated headache clinic (N=1506)		Centres without dedicated headache clinic (N=343)	
	n (%)		n (%)	
Monthly migraine days				
4–7	464 (30.8)		155 (45.2)	
8–14	393 (26.1)		81 (23.6)	
≥ 15	649 (43.1)		107 (31.2)	
Number of follow-up patients with acute medication overuse and medication-overuse headache				
	Centres with dedicated headache clinic (N=1506)		Centres without dedicated headache clinic (N=343)	
	n (%)		n (%)	
Medication overuse/overuse headache†				
Medication overuse	386 (25.6)		82 (23.9)	
Medication-overuse headache	349 (23.2)		68 (19.8)	
Any	426 (28.3)		92 (26.8)	
Healthcare visits by follow-up patients				
	Centres with dedicated headache clinic (N=1506)		Centres without dedicated headache clinic (N=343)	
	n (%)	Mean number of visits	n (%)	Mean number of visits
Type of practitioner				
General practitioner	421 (28.0)	2.6	105 (30.6)	2.3
Neurologist	918 (61.0)	1.4	186 (54.2)	1.5
Alternative office-based practitioner‡	419 (27.8)	–	104 (30.3)	–
Healthcare resource utilisation by follow-up patients				
	Centres with dedicated headache clinic (N=1506)		Centres without dedicated headache clinic (N=343)	
	n (%)	Mean number of visits	n (%)	Mean number of visits
Resource used				
Emergency room visit	311 (20.7)	3.0	64 (18.7)	2.2
CT scan	164 (10.9)	1.1	37 (10.8)	1.1
MRI scan	290 (19.3)	1.1	80 (23.3)	1.2
Inpatient for migraine	136 (9.0)	1.6	23 (6.7)	1.7
Inpatient for other reasons	172 (11.4)	1.4	30 (8.7)	1.5

*The antimigraine preparations erenumab and galcanezumab were excluded from determination of the treatment failure frequency (1, 2, 3, ≥ 4).
†Medication overuse = patients with any antimigraine treatment with medication overuse during the last 3 months collected in Patient's Migraine Treatment page in eCRF; Medication overuse headache = patients in accordance with data collected in About the Patient's Migraine questionnaire.
‡Any = patients with medication overuse and/or medication overuse headache as defined above.
§Mean number of visits were not available
N = total number of patients; n = number of patients in a subgroup