Characterisation of patient and treatment profiles of migraine patients treated with erenumab in routine clinical practice: Interim results from the SPECTRE study

ePoster #154

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BACKGROUND

- Erenumab is a fully human monoclonal antibody against the canonical calcitonin gene-related peptide (CGRP) receptor[1]
- Erenumab demonstrated efficacy and safety in randomised controlled trials[2-5]
- However, there is still a need to better understand treatment with erenumab in routine clinical practice of headache specialists outside this controlled setting.

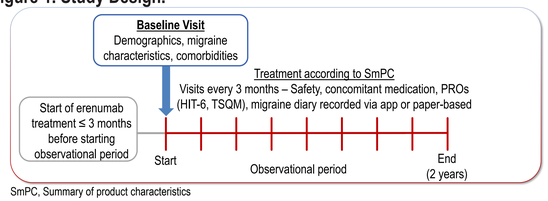
OBJECTIVE

- The SPECTRE study aims to better understand patient profiles and treatment patterns for erenumab in Germany based on migraine characteristics and comorbidities.

METHODS

- SPECTRE is an observational, non-interventional, multi-centre, open label, single-arm study in patients being treated with erenumab in Germany as per local label and local clinical practice (**Figure 1**)
- Patients can be either new on treatment with erenumab or have started treatment recently, but not more than 3 months before entering the study
- At 3-month intervals the patient-reported-outcome (PRO) questionnaires Headache Impact Test-6 (HIT-6) and Treatment Satisfaction Questionnaire for Medication (TSQM) are used to assess the impact of headaches on normal daily life and satisfaction of patients with the treatment paradigm

Figure 1. Study Design.



SmPC, Summary of product characteristics

RESULTS

- As of Dec 31, 2020, 572 patients were enrolled in SPECTRE; 454 patients with either documentation of the 6-months visit or migraine diary data from 6 months after treatment initiation were included in this analysis.

(MLR ID: 150385)

Patient characteristics at baseline

Table 1. Patient characteristics (n=454)

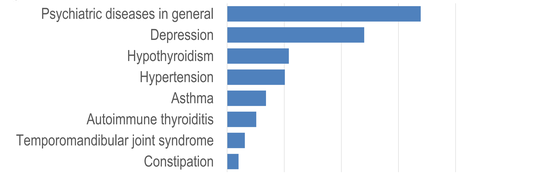
Female, n (%)	89
Age (years), mean ± SD	45 ± 12.3
Years of migraine history, mean ± SD	25.2 ± 14.2
MHDs[a], mean ± SD	14.6 ± 6.8
MMDs[a], mean ± SD	10.9 ± 5.5
Days with acute medication[a], mean ± SD	10.2 ± 5.4
Chronic migraine, n (%)	64.5
Medication overuse, n (%)	26.9

[a]during the last 3 months before initiation of erenumab treatment
n, number of patients; SD, standard deviation; MHD, monthly headache days; MMD, monthly migraine days

Comorbidities

- The majority of patients (72.9 %) suffers from one or more comorbidities. The main comorbidities are psychiatric diseases (33.9 %) (**Figure 2**).

Figure 2. Most common comorbidities[b].



[b]Comorbidities documented at baseline before start of erenumab treatment.

Starting dose erenumab and dose switches

- Most physicians used 70 mg as the starting dose. On average doses were switched approximately 3 months after treatment initiation (**Figure 3**).

Figure 3. Starting dose and dose switches within the first 6 months of treatment.

Prior prophylactics

- Nearly all migraine patients (96.9 %) have received prophylactic treatment in the past. Most commonly used were topiramate and amitriptyline (**Table 2**)

Table 2. Top most commonly used prior prophylactics.

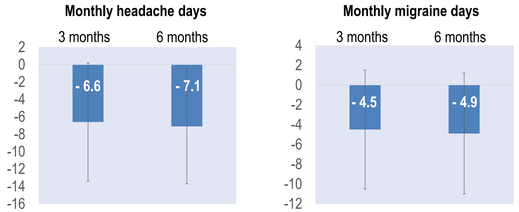
Prophylaxis	n	%
Total	454	100
Any prophylaxis specified	440	96.9
Topiramate	357	78.6
Amitriptyline	314	69.2
Flunarizine	233	51.3
Metroprolol	228	50.2
Onabotulinumtoxin A	138	30.4
Valproate/ divalproex	72	15.9
Propranolol	66	14.5
Bisoprolol	41	9.0
Candesartan	36	7.9
Venlafaxine	24	5.3

Previous treatments are treatments that were discontinued before the baseline visit. Multiple entries possible.

Reduction in monthly headache and migraine days after 3 month erenumab treatment

- After 3 months of erenumab treatment monthly headache days were reduced on average by 6.6 days and monthly migraine days were reduced on average by 4.5 days (**Figure 4**).

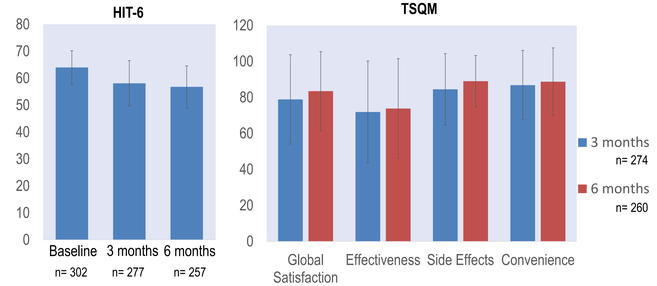
Figure 4. Changes in monthly headache and migraine days within the first 6 months of treatment.



Improvement in headache impact and treatment satisfaction

- HIT-6 scores dropped from 64.0 to 56.8 over the course of 6 months erenumab treatment.
- Treatment satisfaction as measured by TSQM questionnaire is high and increased slightly between month 3 and 6. (**Figure 5**)

Figure 5. Improvement in HIT-6 and TSQM within 6 months of treatment.



N, number of patients; HIT-6, Headache Impact Test-6; TSQM, Treatment Satisfaction Questionnaire for Medication

CONCLUSIONS

- Patients enrolled in SPECTRE have a long history of migraine, many with chronic migraine.
- Psychiatric diseases in general and depression specifically are among the most common comorbidities.
- Most physicians use 70 mg as the starting dose, but about 1/3 of patients are switched to 140 mg after the first 3 months.
- HIT-6 score was reduced after 3 months of treatment with erenumab.
- Treatment satisfaction scores were maintained throughout the 6 month treatment period.
- The SPECTRE study will give valuable insights into the clinical practice of erenumab in Germany.

REFERENCES

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DISCLOSURES

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Dr. Mirja Koch and Dr. Caroline Baufeld are employee of Novartis Pharma.

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