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Migraine treatment outcomes with rimegepant in rimegepant-naive patients: a real-world, multi-center, prospective, observational study

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INTRODUCTION

- Rimegepant is an orally administered small-molecule calcitonin gene-related peptide receptor antagonist that has been approved for the acute treatment of migraine in China in January 2024.
- Pivotal studies have demonstrated rimegepant's efficacy and safety[1-3].

OBJECTIVE

- This analysis aimed to explore the real-world effectiveness and tolerability of rimegepant for acute migraine therapy among rimegepant-naive patients.

METHODS

STUDY DESIGN

- A single arm, multicenter, prospective, observational registry (NCT06439628) aimed to recruit 3,000 adults who were prescribed rimegepant for acute treatment of migraine across 70 sites in China.
- Treatment history was collected at baseline. Rimegepant-naïve was defined as those who had never used rimegepant before joining the study.
- Patient-reported outcomes, including 1. Most severe pain after taking rimegepant, 2. Time to onset time of meaningful pain relief (MPR), 3. Time to onset for meaningful relief from associated symptoms (MRA), and 4. Patient satisfaction with pain relief and return to normal function (RNF), were collected via a remote digital platform (encouraged within 48 hours of treatment).
- Follow-up is planned for 12 months. This report focused on outcomes in rimegepant-naive subgroup at 3 months.

STATISTICAL ANALYSES

- Data were summarized descriptively. Means and standard deviations (SDs) were calculated for continuous data with normal distributions, medians and interquartile ranges (IQR) were calculated for continuous data with skewed distributions. Counts and percentages were used for categorical data. No comparisons were performed.

RESULTS

- A total of 2,141 participants were included in this subgroup analysis.
- The majority (81.4%) were female, with a mean (SD) age of 38.5 (10.7) years, and the mean (SD) monthly migraine days in the past three months was 7.0 (7.5) **(Table 1)**.
- After taking rimegepant, the median (Q1, Q3) visual analog scale (VAS) score of most severe pain was 3.0 (2.0, 5.0). The median (Q1, Q3) times to MPR and MRA were 60 (30, 120) minutes and 30 (0, 60) minutes, respectively.
- Additionally, 85.8% of participants reported satisfaction (extremely/very/somewhat) with pain relief, and 86.1% reported satisfaction with RNF **(Figure1)**.
- A total of 6 (0.28%) adverse events (AEs) were reported during rimegepant treatment, with no serious AEs.

CONCLUSION

- Subgroup analysis demonstrated that rimegepant is effective and well-tolerated for acute migraine therapy in rimegepant-naive patients.

DISCLOSURES

- All the authors declare no competing interests.

ACKNOWLEDGEMENTS

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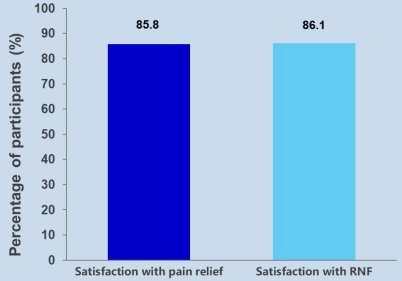
Table 1. Demographic and baseline characteristics (n = 2,141)

Demographic	Value
Age, mean (SD), y	38.5 (10.7)
Female, n (%)	1,742 (81.4)
BMI, mean (SD), kg/m^2	22.7(3.5)
Migraine history, n(%)*	
Migraine without aura	1,662 (77.6)
Migraine with aura	293 (13.7)
Chronic migraine	282 (13.2)
Migraine with MOH	141 (6.6)
Probable migraine	59 (2.8)
[a]MMDs, mean (SD), d	7.0 (7.5)
[b]Participants with depression, n (%)	1,284 (60.0)
[c]Participants with anxiety, n (%)	905 (40.3)

Abbreviations: n, number; SD, standard deviation; y, years; BMI, body mass index; MMDs, monthly migraine days; d, days
a The average MMDs in the past three months
b Depression was evaluated by PHQ-9
c Anxiety was evaluated by GAD-7
* Categories are not mutually exclusive; sum exceeds 100%

Figure 1. Patient satisfaction with pain relief or return to normal function



Abbreviations: RNF, return to normal function

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