Preventative Gepant Migraine Treatment: Indications, Dosages, Routes of Administration, and Contraindications

Medication	Indication	Dosage for preventative treatment	Maximum dosage	Routes of administration	Contraindications
Rimegepant[1]	Acute treatment and preventative treatment of episodic migraine	75 mg QOD	75 mg QOD	Orally disintegrating tablet	History of hypersensitivity reactions
Atogepant[2]	Preventative treatment of episodic and chronic migraine	10 mg, 30 mg, or 60 mg QD	60 mg QD	Oral tablet	History of hypersensitivity reactions

QD, once daily; QOD, every other day.

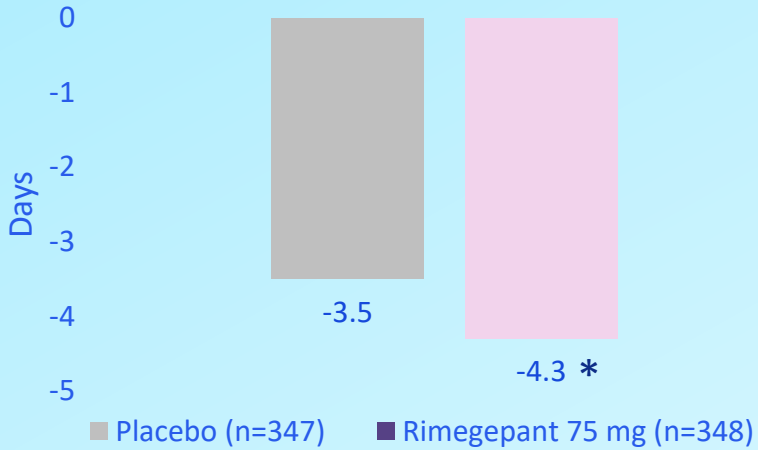
1. Nurtec ODT. Package insert. Pfizer Inc.; 2023; 2. Qulipta. Package insert. AbbVie; 2023.

Rimegepant For Migraine Prevention: Efficacy and Safety Data

Study design

Multicenter, phase 2/3, randomized, double-masked, placebo-controlled trial at 92 sites in the USA; 741 participants; took EOD rimegepant 75 mg; 4-week observation period followed by a 12-week study

Change in mean number of migraine days per month during weeks 9-12 (primary endpoint)



Secondary endpoints

≥50% reduction in mean number of moderate or severe migraine days per month during weeks 9-12		Rescue medication days per month during weeks 9-12, days	
Placebo (n = 347)	Rimegepant (n = 348)	Placebo (n = 347)	Rimegepant (n = 348)
41%	49%†	4.0	3.7

Study group	Adverse events reported in ≥2%	Discontinuations due to adverse events
Treatment	Nasopharyngitis (4%), nausea (3%), UTI (2%), URI (2%)	2%
Placebo	Nasopharyngitis (2%), UTI (2%), URI (3%)	1%

*$P < 0.01$; †$P < 0.05$ vs placebo

EOD, every other day; URI, upper respiratory tract infection; UTI, urinary tract infection.

Croop R et al. *Lancet.* 2021;397(10268):51-60.

Rimegepant: Combination Preventative and Acute Treatment Results

Open-label extension phase of a 12-week, phase 2/3, randomized, double-masked, placebo-controlled study in which adults with a history of 4-18 moderate-to-severe monthly migraine attacks completed 12 weeks of treatment with rimegepant or placebo every other day and could continue with rimegepant every other day for 52 weeks. On nonscheduled days they could take rimegepant 75 mg up to once daily as needed for acute migraine attacks.[1]

- 603 participants
- Mean monthly headache attacks: 7.9
- Mean number of rimegepant doses: 14.6 (SD 2.45)
- 81.4% using 16 or fewer rimegepant doses

Conclusion:
Long-term rimegepant use was safe and well tolerated; more than 80% of patients took 16 or fewer rimegepant doses per month

Safety: adverse events and discontinuations[2]

Most common adverse events (≥2%, within 48 hours):	Upper respiratory infection (7.1%), nasopharyngitis (6.3%), back pain (4.3%)
Discontinuations due to adverse events:	2.8%

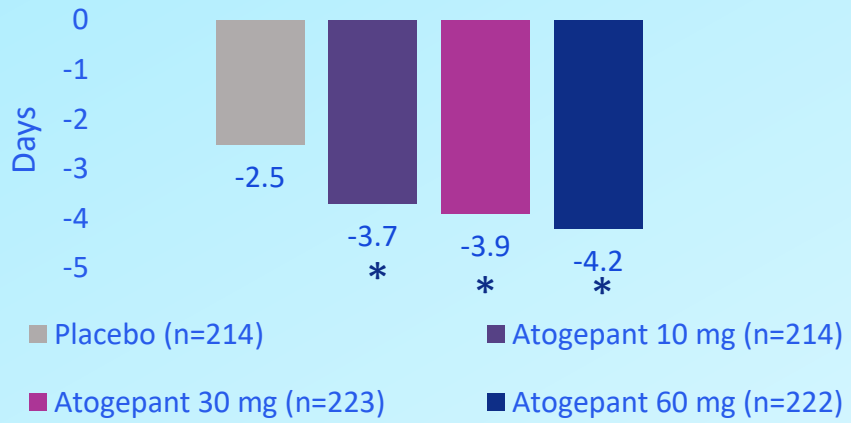
1. Lipton RB, et al. American Headache Society 64th Annual Scientific Meeting. *Headache*. 2022;62(S1):1-170. Abstract IOR-09; 2. Lipton RB, et al. *Neurology*. 2023;100(17_supplement_2):10-12.003.

Atogepant For Episodic Migraine Prevention: Efficacy and Safety Data

Study design
ADVANCE

Phase 3, double-mask trial, adults with 4 to 14 migraine days per month were randomly assigned to take atogepant or placebo once daily for 12 weeks

Change in mean number of migraine days per month (primary endpoint)



Secondary endpoints

≥50% reduction in mean number of moderate or severe migraine days per month				Acute medication use days per month			
Placebo	Atogepant			Placebo	Atogepant		
	10 mg	30 mg	60 mg		10 mg	30 mg	60 mg
29%	55.6%*	58.7%*	60.8%*	–2.4	–3.7*	–3.7*	–3.9*

Study group	Adverse events reported in ≥2%	Discontinuations due to adverse events
Treatment (any group)	Constipation (7.2%), nausea, URI, UTI, nasopharyngitis, fatigue, somnolence, gastroenteritis, influenza, anxiety	2.8%
Placebo	URI, UTI, nasopharyngitis, sinusitis	2.7%

*$P < 0.001$ vs placebo.

URI, upper respiratory tract infection; UTI, urinary tract infection.

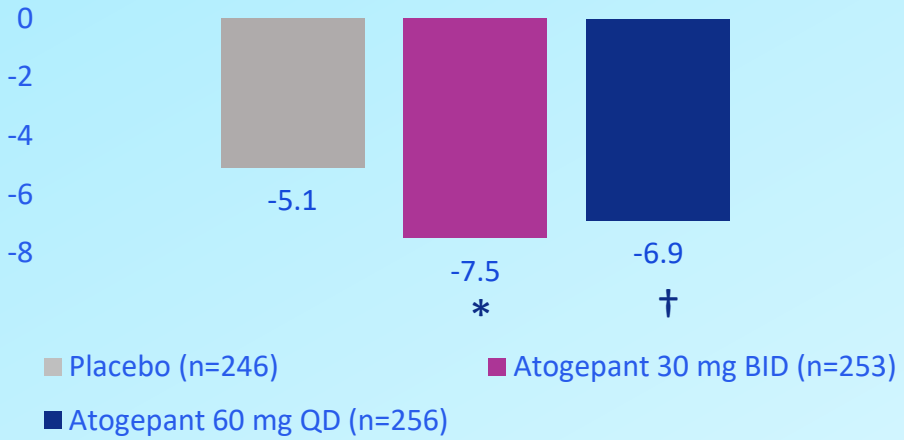
Ailani J et al. *N Engl J Med.* 2021;385(8):695-706.

Atogepant For Chronic Migraine Prevention: Efficacy and Safety Data

Study design
PROGRESS

Phase 3, double-blind trial; adults with ≥1 year of chronic migraine randomly assigned to take atogepant or placebo for 12 weeks

Change in mean number of migraine days per month (primary endpoint)



Secondary endpoints

≥50% reduction in 3-month average migraine days per month			Acute medication use days per month		
Placebo	Atogepant		Placebo	Atogepant	
	30 mg BID	60 mg QD		30 mg BID	60 mg QD
26%	43%†	41%†	−4.1	−6.7*	−6.2†

Study group	Adverse events reported in ≥2%	Discontinuations due to adverse events
Treatment (any group)	Constipation (10.4%), nausea, dizziness, nasopharyngitis, decreased appetite, fatigue, pyrexia, UTI, abdominal pain, diarrhea, insomnia, COVID-19, migraine, arthralgia, back pain, URI	4%
Placebo	Constipation (3%), nausea, dizziness, nasopharyngitis, fatigue, upper abdominal pain, diarrhea, insomnia, COVID-19, migraine, arthralgia, back pain, URI	4%

*$P < 0.0001$; †$P < 0.001$ vs placebo.

URI, upper respiratory tract infection; UTI, urinary tract infection.

Pozo-Rosich P, et al. *Lancet.* 2023;402(10404):775-85.