Early Impact of Eptinezumab on the Health-Related Quality of Life (HRQoL) of Patients with Episodic or Chronic Migraine: SF-36 Analysis Across the Spectrum of Migraine

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BACKGROUND

Eptinezumab is a humanized monoclonal antibody developed to block the activity of calcitonin gene-related peptide (CGRP) released during migraine attack. The primary objective of this study was to evaluate the effects of eptinezumab on HRQoL compared to placebo in patients with episodic and chronic migraine as measured by the SF-36 Health Survey (SF-36).

METHODS

The PROMISE-1 study was conducted across four sites in the United States. Patients were randomized to receive placebo or eptinezumab (300 mg or 100 mg) and administered on Day 0 and at weeks 12, 24, and 36. An end-of-study visit was conducted at week 56. HRQoL was evaluated descriptively using the SF-36, a robust measure of general health.

RESULTS

Participants with a summary score at 50 or above were maintained at the normative level, and those below this score were considered to have impaired HRQoL. The most noticeable impairments were observed in all patients for Bodily Pain and in patients with ≥7 MMDs in Physical Role Functioning. Numerical increases observed in MCS domains were indicative of patients approaching the normative levels.

CONCLUSIONS

- Higher migraine frequency at baseline was indicative of greater impairments in HRQoL, as measured by domain and component scores of the SF-36.
- In EM and CM patients with diminished HRQoL, eptinezumab treatment demonstrated clinically meaningful improvements in SF-36 scores.
- Greater improvements in HRQoL were observed among patients with higher MMD frequency at baseline.
- Eptinezumab generally demonstrated greater improvements in SF-36 scores than placebo.
- Patients with a summary score at 50 or above were maintained at the normative line for HRQOL.
- In the component summary scores, in general, improvements observed after the first month of treatment were sustained through the end of the infusional period (Month 3).