Title: Cost-effectiveness of CGRP Inhibitors for Migraine Prophylaxis

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INTRO:

- CGRP inhibitors are more expensive than traditional migraine prevention drugs.
- Prior research has demonstrated the efficacy of CGRP inhibitors for migraine patients unresponsive to conventional treatments.
- However, the cost-effectiveness of CGRP inhibitors at their current price point is in question.
- This study aims to assess the cost-effectiveness of CGRP inhibitors.

METHODS:

- Conducted a retrospective chart review.
- Included adult patients from our institution's Health Plan prescribed CGRP inhibitors for migraine prevention for ≥ 4 months as of November 2022 (n=190).
- Primary outcome: Calculated cost-effectiveness ratio (CER) for CGRP inhibitors as monotherapy or add-on therapy, measured as cost per migraine prevented per month (MPPM).
- Calculated CER by dividing the cost of the migraine medication by the average difference between baseline migraines per month and postmedication migraines per month.
- Determined the cost of the migraine medication using common medication price tracking websites.
- Primary CGRP inhibitor medications included Ajovy, Emgality, and Aimovig.
- Secondary outcomes included assessing differences in migraine intensity before and after initiation of migraine therapy.
- Determined statistical significance using a twotailed paired t-test.







prophylaxis.

CGRP inhibitors prove to be costly despite their effectiveness for migraine



RESULTS:

- The study included 190 participants aged 16 to 66, with an average age of 42 years.
- Predominantly female population (n=162).
- Average baseline migraines per month (MPM) for the study population: 15.82.
- Average MPM reduced to 13.3 while on non-CGRP medications (p<0.05).
- Average MPM further decreased to 7.11 after CGRP initiation (p < 0.05).
- Patients on CGRP inhibitors as monotherapy had an average decrease of 9.33 MPM from baseline (p<0.05).
- Patients on CGRP inhibitors as add-on therapy had an average decrease of 7.27 MPM from baseline (p<0.05). Cost-effectiveness ratios (CER):
 - Ajovy monotherapy: \$68.60/MPPM
 - EmgalityAjovy polytherapy: \$88.03/MPPM
 - monotherapy: \$72.77/MPPM
 - Emgality polytherapy: \$93.40/MPPM
 - Aimovig monotherapy: \$78.99/MPPM
 - Aimovig polytherapy: \$101.38/MPPM
- Average decrease in migraine intensity after CGRP inhibitor therapy: 2.17 out of 10.

Conclusion:

- CGRP inhibitors exhibit a high Cost-Effectiveness Ratio (CER), which may pose financial challenges for both patients and the healthcare system.
- Nonetheless, CGRP inhibitors demonstrate efficacy both as a standalone treatment and when added to a patient's existing migraine prophylaxis regimen.
- The elevated cost of CGRP inhibitors can be justified in cases where patients suffer from refractory migraines or cannot tolerate more cost-effective first-line medications. CGRP inhibitors used as an add-on therapy tend to have higher CERs, likely due to the fewer migraines per month (MPM) to improve upon from the patient's existing regimen.