Is there evidence... for treating in the prodromal phase

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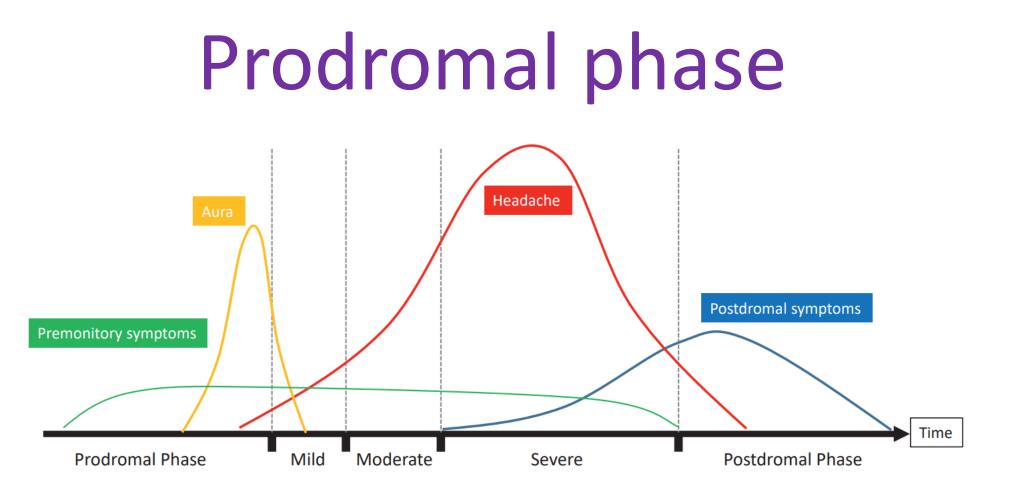


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Disclosure

Company Name	Honoraria/ Expenses	Consulting/ Advisory Board	Funded Research	Royalties/ Patent	Stock Options	Ownership/ Equity Position	Employee
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Almirall	×						
Amgen/Novartis	×	×					
Autonomic Technologies Inc.	×		×				
Coherex		×					
Janssen-Cilag	×						
Eli-Lilly	×	×					
Lundbeck	×						
Man&Science		×					
Medtronic	×						
Pfizer		×					
Sandoz	×						
Sanofi	×						
St Jude Medical	×						
Teva	×	×					



'Based on available clinical/electrophysiological/neuroimaging data:

- preictal phase up to 48 hours before the headache attack
- postictal phase up to 24 hours following the ictal phase'

Handb Clin Neurol 2023;198:151-167 Cephalalgia 2020;40: 866–870

Premonitory symptoms

- neck stiffness
- tiredness
- cognitive dysfunction
- sensory sensitivities
- mood change
- homeostatic symptoms: yawning, thirst, food cravings

CNS Drugs 2024;38:533-546 Neurology 2003;60:935–40



- dopaminergic system domperidon

serotonergic system
 naratriptan
 dihydroergotamine

- CGRP system

ubrogepant

CNS Drugs 2024;38:533-546

Targeting the dopaminergic system

Domperidone (Tmax 30-60 min, t¹/₂ 7-9 hours)

D2/3 rec. antagonist (peripheral, CTZ) prokinetic, antiemetic placebo-controlled crossover trial 19 patients MA

4 attacks

domperidone 30 mg (2) placebo (2) Number of patients with complete classical migraine experiencing attacks after prophylactic treatment with domperidone 30 mg and placebo (n=19)

No of attacks af	er admini]		
Placebo	0	1	2
0 1 2	1 0 10	0 0 3	0 0 5

Statistically significant difference between drug and placebo, p < 0.001 (Wilcoxon's matched-pairs signed ranks test).

Targeting the serotonergic system

Dihydroergotamine (Tmax 30-60 min, t¹/₂ 9 hours)

¹placebo-controlled crossover trial, 91 patients MO/MA, DHE 2 mg NS 4 prodromes/aura (2 X 2 design) NS in prodrome or with aura superior to placebo in preventing headache occurrence (36% vs 26%) ²open label study (abstract), 904 patients MO/MA, DHE 2 mg NS NS in 'prodromal phase' (premonitory or aura) in 143 patients 'good efficacy' could be obtained by 63% of patients

> ¹Cephalalgia 1987;7 (suppl): 440–41 ²Schweiz Rundsch Med Prax 1990;79:914–7

Targeting the serotonergic system

Naratriptan (Tmax 2-3 hours, t¹/₂ 5-6 hours)

open label study, 20 patients MO/MA, 3 prodromes instructed to use naratriptan 2.5 mg during premonitory symptoms reliably occurring 4–24 h preceding headache onset when they felt headache was inevitable to study effect on preventing headache/limiting headache severity: - 60% headaches prevented (within 24 hours post-dosing) more effective if taken early - residual headaches reduced in severity

Targeting the CGRP system

Ubrogepant (Tmax 90 min, t¹/₂ 5-7 hours)

small molecule CGRP receptor antagonist, acute treatment of migraine Ph3 RCT PRODROME (USA)

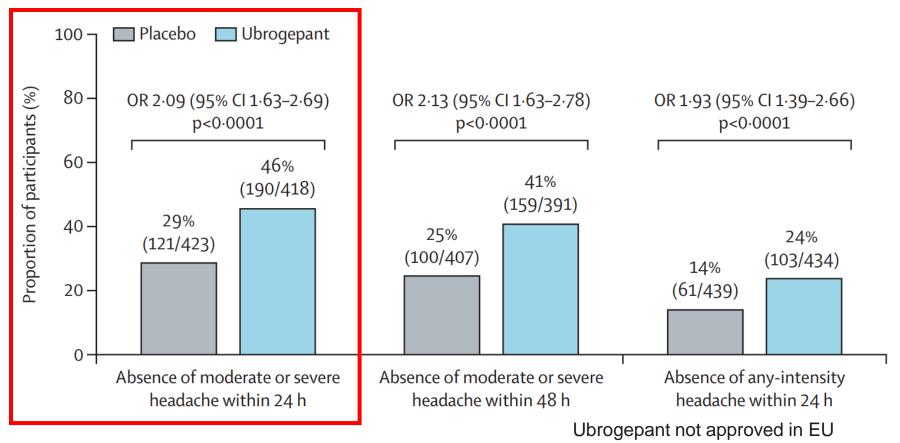
MO/MA, 2-8 attacks/month, moderate-severe headache crossover design: ubrogepant 100 mg (1) \leftrightarrow placebo (1) during prodrome, reliable (\geq 75%) prodomal symptoms l^{ary} endpoint: abscence of moderate or severe headache \leq 24 h after study drug during prodrome event

Targeting the CGRP system

Lancet 2023; 402: 2307–16

Randomized: 518

mITT population (at least 1 headache assessment \leq 24 h): 477



Targeting the CGRP system

Safety population (at least 1 administration of study drug): 480

	Placebo (n=462)	Ubrogepant 100 mg (n=456)
Any adverse event	<mark>55 (12%)</mark>	77 (17%)
Adverse event leading to discontinuation	0	0
Treatment-related adverse event	<mark>42 (9%</mark>)	60 (13%)
Serious adverse event	0	0
Serious treatment-related adverse event	0	0
Death	0	0
Most common adverse events (ie, occurred	d in ≥2% of pa	rticipants)
Nausea	15 (3%)	23 (5%)
Dizziness	12 (3%)	11 (2%)
Fatigue	7 (2%)	12 (3%)
Somnolence	5 (1%)	11 (2%)
Data are n (%).		

safety population

Ubrogepant not approved in EU

Lancet 2023; 402: 2307–16

Conclusion

- premonitory symptoms are common
 allow to reliably predict headache phase
 provide an opportunity for early treatment
- 3 placebo-controlled trials evaluating the efficacy of an acute treatment administered during the prodrome
- trials with domperidone and DHE nasal spray

more than 30 years ago small sample sizes

- recent large trial showed that ubrogepant is effective and well tolerated for the treatment of migraine attacks when taken during prodrome

