

CGRP medication

CGRP mAbs – short for calcitonin gene-related peptide monoclonal antibodies – is the first preventive medicine specifically developed to treat migraine.

Previously the only preventive treatments for migraine were medicines developed for other conditions but found to be useful in treating migraine as well.

What are they and how do they work?

During a migraine attack the cerebral nerves and blood vessels release substances including CGRP, a protein that transmits pain through your brain. CGRP treatments aim to block the CGRP protein and can help to reduce the headache associated with migraine.

There are four types of CGRP preventive medicines available on NHS prescription in the UK. They are Fremanezumab (brand name Ajovy), Galcanezumab (Emgality), Erenumab (Aimovig) and Eptinezumab (Vypti). Fremanezumab, Galcanezumab and Erenumab All of which are administered by an injection under the skin (subcutaneous injection), either monthly or every three months. A doctor or nurse will show you how to do this yourself at home with a self-injector pen. Eptinezumab however is given intravenously (into a vein by infusion) once every three months at a headache clinic.

Research has found that CGRP medicines are safe and effective in reducing the frequency and severity of migraine attacks. They have fewer side effects than other preventive migraine medication.



Who can take them?

CGRP medicines are prescribed by headache specialists or consultant neurologists only if you've already tried at least three other preventive treatments that haven't helped your migraine attacks.

If you're struggling to manage your migraine and think you may benefit from CGRP treatment, you should see your GP for a review and possible referral to a headache specialist or consultant neurologist. If CGRP medication is not an option, a specialist may be able to suggest other treatments.

Who can be prescribed CGRP treatment varies, so you'll need to check the referral criteria with your GP. For instance, in Scotland you may need to try Botox first. Our factsheet on Botox provides further details of this treatment.

Other criteria might be how often you have migraine attacks and how long they last. You'll have to meet the criteria and



your specialist will need to agree that CGRP treatment is a good one for you to try. Extra caution is advised on their use in pregnancy and breastfeeding to minimise possible safety risks, such as toxicity, spontaneous abortions, and prematurity.

Not all headache clinics offer CGRP treatment. Your GP can check what headache clinics are prescribing it. You may be able to ask for a referral to a different headache clinic but that can be a slow process as some of them have quite long waiting lists. Again, your GP should be able to advise and refer you to the clinic with the shortest waiting times.

Gepants

There are currently four gepants – Ubrogепant, Atogepant, Rimegepant and Zavegepant. They are CGRP receptor antagonists.



The gepants come as tablets and can be compared to triptans in their role as an acute treatment to treat a migraine attack. They should be taken as early as possible at the start of an attack, to treat pain and associated migraine symptoms (e.g. nausea, light/noise/smell sensitivity). Some gepants can also be used as a preventive treatment for migraine, if prescribed for this use. These are taken as an oral tablet every other day.

Please refer to our website and licensing table for the current availability of gepant medications.
<https://migrainetrust.org/live-with-migraine/healthcare/treatments/gepant/>

Things to consider

CGRP treatments are still relatively new, and we are learning more about them all the time. They are considered to be well tolerated. The most common side effects reported are mild injection-site reactions (such as pain, swelling and skin reactions), constipation, itching and cramps/muscle spasms.

If you're concerned about side effects, you should speak to your specialist or headache nurse.

All new treatments need to be continuously monitored to ensure their safety and effectiveness in the long term. Staying in touch with your prescribing clinic or specialist and reporting any adverse effects is important.

Keeping a headache diary to record any side effects or reactions to CGRP medication also helps monitor how you do on the treatment and means any changes can be made more quickly.



The Migraine Trust can be contacted on **0808 802 0066** (Monday to Friday, 10am to 4pm) or through our contact form and Live chat service found on our website at migrainetrust.org or by emailing info@migrainetrust.org.



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