

Biologic Migraine Prevention Pathway in Adults

The following treatments are recommended as options for preventing migraine in adults, only if:

The patient tried at least 3 preventative drugs and has failed or these are contraindicated or not tolerated?

- Beta blockers
- Antidepressants
- Anticonvulsant drugs

See [BSW Chronic Migraine Pathway](#) for further information on primary care and pre-biologic management options.

Chronic migraine

Does the patient have chronic migraine which lasts for 15 or more headache days a month for more than 3 months with at least 8 of those having features of migraine?

Episodic migraine

Does the patient have episodic migraines which last for 4 or more migraine days a month?

Botulinum Type A NICE TA260

Dose: 155-195 units IM given as 0.1ml (5 units) to 31-39 sites every 12 weeks.

Erenumab anti-CGRP

Prefilled syringe 140mg NICE [TA 682](#) PAS discount
For treatment of both episodic and chronic migraine

Dose: 140mg once monthly HOMECARE

Blueteq required at initiation after 3 months & 1 year review

Galcanezumab anti-CGRP

Prefilled syringe 120mg NICE [TA 659](#) PAS discount
For treatment of both episodic and chronic migraine

Dose: 240mg s/c loading then 120mg s/c once monthly HOMECARE

Blueteq required at initiation after 3 months & 1 year review

Fremanezumab anti-CGRP

Prefilled syringe 225mg NICE [TA 764](#) PAS discount
For treatment of both episodic and chronic migraine

Dose: 225mg s/c once monthly or 675mg s/c every 3 months HOMECARE

Blueteq required at initiation after 3 months & 1 year review

Eptinezumab anti-CGRP

Vial 100mg/ml NICE [TA 871](#) PAS discount
For treatment of both episodic and chronic migraine

Dose: 100mg IV every 12 weeks. Dose may be escalated to 300mg IV every 12 weeks.

a capitis **Blueteq required at initiation after 3 months & 1 year review**

PREVENTION OF Episodic migraine ONLY

NICE TA 906 Rimegapant (75mg oral lyophilisate) is recommended as an option for preventing **episodic** migraine in adults who have at least 4 and fewer than 15 migraine attacks per month. (BSW formulary **RED** traffic light for this indication) This allows an alternative route of administration to injectables listed below for **episodic** migraine.

No Blueteq required.

STOP rimegapant after 12 weeks of treatment if frequency of migraine attacks does NOT reduce by at least 50%.

N.B. Please note [gammaCore](#) is not routinely commissioned for treatment of migraine. IFR is required.

GammaCore is commissioned for cluster headache [NICE MTG46](#)

12 week review

Assess response and stop treatment if there has not been an adequate response at 12 weeks, defined as a reduction of at least:

Chronic migraine (15 headache days a month or more with at least 8 of those having features of migraine) the patients monthly migraine frequency has been reduced by at least 30%

Episodic migraine (less than 15 headache days a month) the patients monthly migraine frequency has been reduced by at least 50%