

## Clinical evidence

### Clinical evidence to support BOTOX® as an effective treatment for chronic migraine

The PREEMPT (Phase III REsearch Evaluating Migraine Prophylaxis Therapy) clinical programme consisted of two phase III studies both of which were randomised, double-blind and placebo controlled enrolling over 1,300 patients diagnosed with chronic migraine.

In these studies, patients were given either BOTOX® injections or placebo injections for 24 weeks, then all patients received BOTOX® until the end of the 56 week study.

The results of these studies are consistent across multiple headache symptom measures, including headache days and quality of life. These studies show that BOTOX® is significantly better than placebo in reducing the number of headache days, migraine days and improving functioning, vitality and overall health related quality of life.

Key Facts about BOTOX® for chronic migraine from the PREEMPT programme:

At baseline, patients in the BOTOX® treatment group had an average of 19.1 days with migraine. Patients in the placebo group had an average of 18.9 migraine days. Following treatment with BOTOX® patients had an average of 8.2 fewer migraine days at week 24, which was significantly greater than the change from baseline observed in placebo treated patients (6.2 days);

Patients treated with BOTOX® had significantly fewer headache days compared to those patients treated with placebo (47.1% of BOTOX® treated patients compared to 35.1% of placebo treated patients achieved >50% reduction from baseline in the number of headache days at the week 24 primary timepoint);

At the end of the second phase of the trial (week 56), nearly 70% of patients treated with BOTOX® experienced >50% reduction from baseline in migraine days;

Patients treated with BOTOX® experienced improvements in their ability to complete normal everyday activities as well as a reduction in their sense of frustration and helplessness.

The conclusion from the PREEMPT programme is that BOTOX® is a generally well-tolerated and effective prophylactic (preventative) treatment for adults with chronic migraine:

Following the open label phase of the trial (week 56), nearly 70% of BOTOX® treated patients experienced ≥50% reduction from baseline in migraine days;

Patients treated with BOTOX® had significant improvement from baseline in their quality of life scores (MSQ scores) and in the amount of headache related disability (HIT6 scores) compared with those on placebo, indicating significant improvement in patients functioning, vitality, psychological distress, and overall quality of life.

Throughout the PREEMPT trials including the open label phase, patients received up to 5 courses of treatment with BOTOX® every 12 weeks. Most adverse events reported in the trials were mild to moderate and resolved without further problems. The discontinuation rate was low in both treatment arms; 3.8% in the BOTOX® treated arm and 1.2% in the placebo arm.

Chairman of Migraine Action's Medical Advisory Board, Dr Andy Dowson comments: "The licence for Botox in chronic migraine is welcome. For headache there have been very few new options made available in the last 5 years despite the huge effort from scientists and the Pharmaceutical industry to make breakthroughs in the field.

Botox has been used 'off licence' in private practice for quite some time (nearly 10 years in my case) but it is important that we now have the PREEMPT study results to confirm the impression from this clinical practice experience. Until PREEMPT the available evidence has been of lower quality - observational studies mostly.

Experience with Botox for other indications is extensive and we are therefore confident about its safety. We do need to develop a skilled group of injectors and encourage the wider NHS to offer Botox as an option to appropriate individuals.

It is always a good day for a headache sufferer when a new treatment option becomes available."

Lee Tomkins, Director at Migraine Action comments, "The licence of Botox as a preventative treatment for chronic migraineurs is a really important step forward. Chronic sufferers are always aiming to get more "crystal clear" headache-free days each month and this treatment will help them to achieve that. Botox will

give many chronic migraineurs a new lease of life where individuals will be able to make more plans and not be so debilitated by their condition."

It is important that patients seek a referral to a specialist for help with chronic migraine as the condition is so often associated with depression and other medical comorbidities. Keeping a diary is really essential and will assist your specialist in making an accurate diagnosis. Within the UK, there are headache clinics offering specialist assistance and support to people with chronic migraine."