Aim and Objectives To assess patients who are potential candidates for treatment with cilgavimab/tixagevimab in a tertiary care hospital and to describe the search strategy.

Material and Methods In Spain, potential candidates for treatment with cilgavimab/tixagevimab are people with a high degree of immunosuppression (due to pathology or treatment) who do not respond adequately to vaccination. The Spanish Agency of Medicines and Health Products establishes the conditions for patients who are candidates for treatment with cilgavimab/tixagevimab[1] . A search for patients was carried out, prioritising the following criteria: haematological patients on treatment with rituximab during the last 9 months, patients with solid organ transplant, patients with multiple sclerosis on treatment with ocrelizumab/rituximab, and patients with recent infection by COVID-19 who belong to any risk group. All of them underwent serology, including in the study those with negative serology (anti-anati-S antibodies < 260 BAU/ml). Those patients were scheduled for cilgavimab/tixagevimab administration.

Results 112 patients (38 = haematological patients on rituximab treatment, 50 = multiple sclerosis patients on rituximab/ocrelizumab treatment and 24 = kidney transplantation) were enrolled. 72 patients were included, 38 women (52.8%), median age 59.5 years old (27-77). The cause of exclusion was positive serology in all cases. 64 patients (88.9%) were on treatment with biologic immunomodulators (35 haematologic patients treated with rituximab <9 months, 27 patients with multiple sclerosis on treatment with rituximab/ocrelizumab/interferon beta-1A and 1 patient on treatment with adalimumab) and the rest were kidney transplant patients. Cilgavimab/tixagevimab was administered to 62 patients (86.1%), 7 patients with unknown reasons, 2 patients had COVID-19 infection and 1 patient had to be excluded for deep vein thrombosis due to the development of symptoms at the time of the appointment.

Conclusion and Relevance More than half of the patients enrolled did not have an adequate response to COVID-19 vaccination. The search strategy was a good tool for administering pre-exposure prophylaxis of COVID-19 to these more vulnerable patients. Further studies are needed to evaluate the effectiveness of the treatment.

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Conflict of Interest No conflict of interest

4CPS-188 QUALITY OF LIFE IN PATIENTS ON GALCANEZUMAB LONG-TERM TREATMENT

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Background and Importance Galcanezumab is a drug indicated for migraine prophylaxis. People with migraine experience significant functional and quality of life (QoL) impairment. Migraine-Specific Quality-of-Life Questionnaire (MSQ) version 2.1 was developed to address physical and emotional limitations.

Aim and Objectives To assess changes in long term QoL in patients treated with Galcanezumab.

Material and Methods Descriptive study of patients who received Galcanezumab (February 2020 to August 2022). QoL data were collected from patients at weeks 0, 4, 12 and 48 and from the electronic clinical history: sex, age, type of migraine, number of monthly migraine headache days (MHD) prior to treatment and duration of treatment. To assess effectiveness was used MSQv2.1(14-item questionnaire that measures QoL impacts in 3 domains: Role Function-Restrictive (RFR), measures limitations in social and work activities; Role Function-Preventive (RFP), measure the impact through prevention of these activities; and Emotional-Function (EF), assess the emotional impact. Higher scores indicate better QoL). The main variable was the rate of responders according to RFR defined as patients whose average change from baseline was ≥ 25 over week 48. Secondary outcomes were responders according RFR over week 4 and 12, and mean changes from baseline in RFR, RFP, EF and MSQ-total at weeks 4, 12 and 48.

Results 34 patients were included, 33 woman, mean age 45 years (29-69). Type of migraine: 70,5% chronic migraine and 29,5% high frequency episodic migraine. Mean monthly MHD prior to treatment were 18 days (8-30) and mean duration of treatment of 15 (3-27) months. 8 patients did not reach 48 weeks, treatment was discontinued for ineffectiveness. Main outcome: the rate of responders was 38,2% at week 48. Secondary outcomes: 34,2% and 45,7% responders at week 4 and 12 respectively. The table shows average change from baseline score in MSQ-domains and MSQ-total:

	WEEK 4	WEEK 12	WEEK 48
MSQ-RFR	22,90	26,30	13,11
MSQ-RFP	24,41	27,35	11,32
MSQ-EF	22,54	27,25	17,25
MSQ-total	23,27	26,80	11,84

Conclusion and Relevance In this study, long-term galcanezumab treatment had a moderate effectiveness in improving the RFR-domain of QoL. The number of responders decreased over time. All domains improved from baseline over the weeks studied. However, at week 48, quality of life worsened compared to weeks 4 and 12.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest.

4CPS-189 ANALYSIS OF MEDICATION PERSISTENCE IN MIGRAINE PATIENTS TREATED WITH ANTI-CGRP MONOCLONAL ANTIBODIES

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