

MIGRAINE CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS IV VYEPTI (eptinezumab-jjmr)

RATIONALE FOR INCLUSION IN PA PROGRAM

Vyepti is a humanized immunoglobulin G1 (IgG1) monoclonal antibody that has high affinity for binding to the calcitonin gene-related peptide (CGRP) receptor and acts by antagonizing this receptor. Vyepti is indicated for the preventive treatment of migraine in adults. Other migraine prophylaxis options include antiepileptic drugs, antidepressants, and antihypertensive agents (1-2).

Regulatory Status

FDA approved indication: Vyepti is a calcitonin gene-related peptide receptor antagonist indicated for the preventive treatment of migraine in adults (1).

The American Academy of Neurology and the American Headache Society Position Statement recommends giving at least 2 conventional oral migraine preventive treatments an adequate trial of at least 6 weeks at a target or usual effective dose prior to initiating preventive therapy with a CGRP medication (3).

The safety and effectiveness of Vyepti in pediatric patients have not been established (1).

Summary

Vyepti is a humanized immunoglobulin G1 (IgG1) monoclonal antibody that has high affinity for binding to the calcitonin gene-related peptide receptor and acts by antagonizing this receptor. It is indicated for the preventive treatment of migraine in adults. The safety and effectiveness of Vyepti in pediatric patients have not been established (1).

Prior approval is required to ensure the safe, clinically appropriate, and cost-effective use of CGRP antagonists IV while maintaining optimal therapeutic outcomes.

References

1. Vyepti [package insert]. Bothell, WA: Lundbeck Seattle BioPharmaceuticals, Inc.; October 2022.
2. Silberstein, S.D. et al. "Evidence-Based Guideline Update: Pharmacologic Treatment for Episodic Migraine Prevention in Adults: Report of the Quality Standards Subcommittee of the



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American Academy of Neurology and the American Headache Society.” *Neurology* 78.17 (2012): 1337–1345.

3. (2019), The American Headache Society Position Statement on Integrating New Migraine Treatments into Clinical Practice. *Headache: The Journal of Head and Face Pain*, 59: 1-18. <https://doi.org/10.1111/head.13456>