FOI 7729 – Q2

How many patients have you treated in the last 4 months for chronic migraine (15+ headache days per month) and episodic migraine (4-15 headache days per month) with the following drugs:

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| --- | --- | --- |
| **Drugs** | **Chronic Migraine (15+ headache days per month)**  | **Episodic Migraine (4-15 headache days per month)** |
| Atogepant |  |  |
| Erenumab |   |   |
| Eptinezumab |   |   |
| Fremanezumab |   |   |
| Galcanezumab |  |  |
| Rimegepant |   |   |
| Botulinum Toxin   |   |   |