

Atogepant for preventing migraine

Information for the public

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Atogepant (Aquipta) is available on the NHS as a possible treatment for preventing migraine in adults who have at least 4 migraine days per month. It is only available when at least 3 other preventive medicines have not worked, or are not tolerated or are unsuitable because of safety concerns.

Atogepant should be stopped after 12 weeks if the frequency of migraine attacks has not reduced by:

- at least 50% (for example, from 10 days to 5 days per month) for people who have fewer than 15 headache days per month (episodic migraine)
- at least 30% (for example, from 20 days to 14 days per month) for people who have more than 15 headache days per month, with at least 8 of those having features of migraine (chronic migraine).

If you are not eligible for atogepant but are already having it, you should be able to continue until you and your doctor decide when best to stop.

Is this treatment right for me?

Your healthcare professionals should give you clear information, talk with you about your options and listen carefully to your views and concerns. Your family can be involved too, if you wish. See [our webpage on making decisions about your care](#).

Questions to think about

- How well does it work compared with other treatments?
- What are the risks or side effects? How likely are they?
- How will the treatment affect my day-to-day life?
- What happens if the treatment does not work?
- What happens if I do not want to have treatment? Are there other treatments available?

Information and support

The [NHS webpage on migraine](#) may be a good place to find out more.

[Migraine Trust](#) (0808 802 0066) can give you advice and support.

You can also get support from your local [Healthwatch](#).

NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

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