



1 13 October 2016  
2 EMA/CHMP/179671/2016  
3 Committee for Medicinal Products for Human Use (CHMP)

4 **Concept paper on the need for revision of the guideline**  
5 **on clinical investigation of medicinal product for the**  
6 **treatment of migraine**  
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Agreed by CNS Working Party	June 2016
Adopted by CHMP for release for consultation	13 October 2016
Start of public consultation	21 October 2016
End of consultation (deadline for comments)	31 January 2017

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9 The proposed guideline will replace the Guideline on clinical investigation of medicinal products in the  
10 treatment of migraine (CPMP/EWP/788/01 Rev.1, 24 January 2007).  
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12 Comments should be provided using this [template](#). The completed comments form should be sent  
13 to [cnswpsecretariat@ema.europa.eu](mailto:cnswpsecretariat@ema.europa.eu).

Keywords	Migraine, acute migraine, chronic migraine, migraine prophylaxis.
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## 14 **1. Introduction**

15 Migraine is characterised recurrent severe headache attacks usually accompanied by nausea, vomiting,  
16 photo- and/or phonophobia. Attacks may last for 4-72 hours in adults. The one-year prevalence in  
17 adults is estimated to be 15%. In children and adolescents the prevalence is approximately 5 %. Three  
18 times as many women are affected as men and most sufferers are aged between 20 and 50 years;  
19 prevalence declines after 50 years. Lost workdays per year due to migraine in the general employed  
20 population have been estimated at almost 6 days per 1000 working persons.

21 The current guideline (CHMP/EWP/788/01 Rev.1) came into effect in July 2007. The document  
22 focusses on the evidence needed in support of a claim of treatment of acute migraine attacks and the  
23 evidence needed in support of migraine prophylaxis.

## 24 **2. Problem statement**

25 The current guideline does not address the evidence needed to support a claim of treatment of chronic  
26 migraine, which is a relatively new concept. Chronic migraine has been accepted in the International  
27 Classification of Headache Disorders (3<sup>rd</sup> edition) and has been accepted as a restricted indication for  
28 Botox®. Recently a number of scientific advice procedures have been considered for development  
29 programs of medicinal products for the treatment of chronic migraine. The other parts of the guideline  
30 still apply and are up to date although a slight adaptation may be discussed.

## 31 **3. Discussion (on the problem statement)**

32 The following critical aspects should be discussed in the update of the guidance document:

33 Design of the studies in chronic migraine with respect to:

- 34 • Determination of the study population (separation from medication overuse headache vs chronic  
35 headache vs chronic migraine)
- 36 • Design of the studies: Randomised placebo-controlled and active controlled parallel group studies  
37 with justification of control used
- 38 • Duration of the studies in chronic migraine , need for showing maintenance of effect
- 39 • Primary and secondary endpoints (migraine days vs headache days vs number of attacks,  
40 symptom severity )
- 41 • Methods to deal with concomitant medication for headache.

## 42 **4. Recommendation**

43 The Central Nervous System Working Party (CNSWP) recommends drafting a revision of the Migraine  
44 guideline including chronic migraine.

## 45 **5. Proposed timetable**

46 It is planned to release for consultation a draft CHMP guidance document not later than Q4 2017.

47 **6. Resource requirements for preparation**

48 The preparation of this guideline will involve the CNSWP. Drafts of the document will be discussed with  
49 the SAWP and other relevant WPs and committees.

50 **7. Impact assessment (anticipated)**

51 It is aimed that this guideline will be helpful to achieve consensus in the evaluation and standardisation  
52 of the clinical development plan for agents evaluated for migraine including chronic migraine.

53 **8. Interested parties**

54 The interested parties in the guidance document include learned societies and academia (International  
55 Headache Society (HIS), European Neurological Society (ENS), pharmaceutical industry (e.g. EFPIA  
56 and others) and other regulatory agencies.

57 **9. References to literature, guidelines, etc.**

58 Note for guidance on clinical investigation of medicinal products in treatment of Migraine

59 [http://www.ema.europa.eu/ema/pages/includes/document/open\\_document.jsp?webContentId=WC500](http://www.ema.europa.eu/ema/pages/includes/document/open_document.jsp?webContentId=WC500)  
60 [003481](http://www.ema.europa.eu/ema/pages/includes/document/open_document.jsp?webContentId=WC500)

61 Procedure for European Union guidelines and related documents within the pharmaceutical legislative  
62 framework (EMA/P/24143/2004): <http://www.emea.europa.eu/pdfs/human/regaffair/2414304en.pdf>