

How ICER's Evidence Report Fails Migraine Patients

The Institute for Clinical and Economic Review says new acute migraine medications aren't worth their cost. Here's how the economists got it wrong.

Pain relief timeline.

ICER evaluates medications' ability to reduce pain only within 2 hours. Some patients, and some medicines, need a little more time.

Indirect costs.

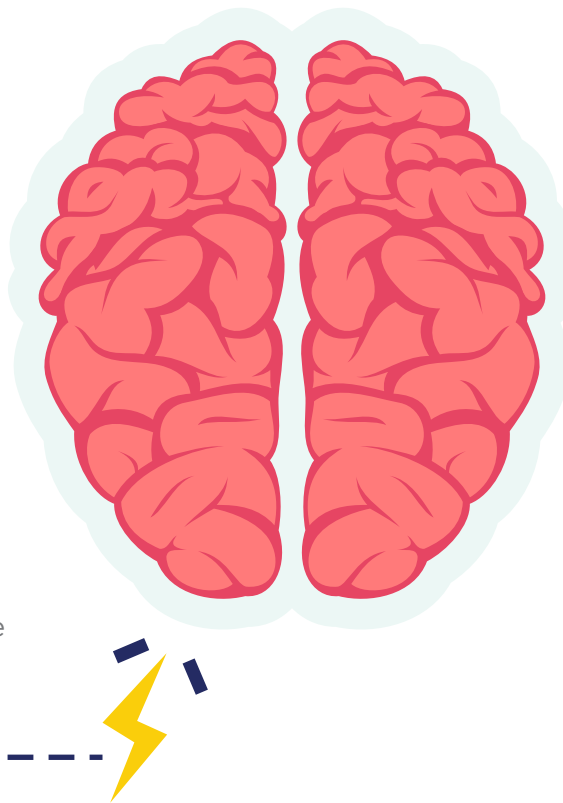
Migraine incurs about \$2,300 a year per patient in indirect costs like lost productivity. ICER ignores the value of reducing these costs.

Prevention possibility.

ICER assumes new acute migraine treatments have no preventive value - even though current evidence suggests they could.

Migraine effects.

Patients often experience nausea, vomiting and sensitivity to sound and light during migraine attacks. ICER does not properly account for the value of relieving these symptoms.



By failing to fully capture the impact of migraine and the value of treatment, ICER could make it harder for people with migraine to access the medicine they need.



Institute for
Patient Access