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Impact of anti-CGRP monoclonal antibodies on disability reduction and quality of life improvement in patients with migraine: a systematic review

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Introduction
Migraine is a highly disabling neurological condition associated with significant functional impairment and reduced quality of life. In recent years, anti-CGRP monoclonal antibodies have emerged as a targeted therapeutic option for migraine prophylaxis, demonstrating benefits not only in reducing attack frequency but also in improving patient functionality.

Objective
To analyze the impact of anti-CGRP monoclonal antibodies on functional outcomes and quality of life in patients with migraine.

Methods
This is a systematic review based on the PICO strategy, defined as follows: P - patients with migraine; I - use of anti-CGRP monoclonal antibodies; C - absence of anti-CGRP therapy or use of conventional preventive therapies; O - reduction in disability and improvement in quality of life. The search was conducted in the PubMed, LILACS and SciELO database using the descriptors "migraine" AND ("anti-CGRP" OR "monoclonal antibodies") AND ("MIDAS" OR "HIT-6"), initially yielding 223 articles. Studies published within the last 12 months, conducted in humans, and freely available in full text were included. After applying the eligibility criteria, 16 studies remained for analysis.

Results
The studies demonstrated consistent benefits of anti-CGRP monoclonal antibodies in reducing migraine-related disability and improving quality of life. Significant reductions in HIT-6 and MIDAS scores were observed, along with decreases in monthly migraine days (MMD), particularly among patients with resistant and refractory migraine. In a retrospective study involving 80 patients, 65% achieved a ≥50% reduction in MMD, while 66% showed a ≥6-point reduction in HIT-6 scores after 52 weeks of treatment, in addition to significant improvements in quality of life and high treatment satisfaction. In a Swiss multicenter study with 24 months of follow-up, mean reductions of 8.1 points in HIT-6 (Headache Impact Test), 16.6 points in MIDAS (Migraine Disability Assessment), and 8.8 monthly migraine days were observed, accompanied by sustained improvements in functionality and family-related disease burden. The studies also demonstrated high treatment adherence, good tolerability, and low rates of serious adverse events, reinforcing the effectiveness of anti-CGRP therapies in real-world clinical practice. Similar outcomes were reported with Erenumab, Fremanezumab, Galcanezumab, and Eptinezumab, including among patients with multiple previous therapeutic failures.

Conclusion
Anti-CGRP monoclonal antibodies demonstrated a significant impact on reducing migraine-related disability, with marked improvements in MIDAS and HIT-6 scores, as well as reductions in attack frequency. The studies also showed sustained improvements in quality of life, patient functionality, and treatment satisfaction, associated with good tolerability and high adherence rates, reinforcing the potential of these agents in the preventive management of migraine, especially in resistant cases.

Keywords:
Migraine
Anti-CGRP monoclonal antibodies
Quality of life

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