



PRESS RELEASE

AbbVie's atogepant and onabotulinumtoxinA receive strong recommendations in the newly updated Canadian Headache Society (CHS) Migraine Prevention Guideline

- *The 2024 Canadian Headache Society (CHS) Migraine Prevention Guideline, which replaces the previous version published in 2012, granted strong recommendations for atogepant in episodic and chronic migraine, and for onabotulinumtoxinA in chronic migraine.*¹
- *The new CHS Migraine Prevention Guideline is based on a comprehensive systematic review and meta-analysis and addresses both episodic and chronic migraine.*¹
- *A strong recommendation was issued when an intervention was deemed suitable for the majority of patients, with benefits outweighing potential risks.*¹

Montréal, Québec – December 19, 2024 – AbbVie (NYSE: ABBV) announced today that atogepant and onabotulinumtoxinA have received strong recommendations in the newly updated [CHS Migraine Prevention Guideline](#): atogepant is strongly recommended in the treatment of episodic and chronic migraine, and onabotulinumtoxinA, in the treatment of chronic migraine (please refer to the guideline for the full recommendations). The 2024 version marks a crucial step forward in equipping healthcare professionals with the most current, evidence-based recommendations for preventing and managing migraines – a condition that impacts millions of Canadians.²

“We are pleased to see that the updated CHS guideline recognizes the data supporting the potential benefits of our treatments,” says Rami Fayed, Vice President and General Manager of AbbVie Canada. “We believe that AbbVie’s commitment to patients living with migraine can positively impact patients’ daily lives.”

The previous guideline, published in 2012, has been updated due to the approval of several new treatments in recent years. Moreover, the previous version did not address chronic migraine. The new CHS Migraine Prevention Guideline is based on a comprehensive systematic review and meta-analysis and addresses both episodic and chronic migraine. A strong recommendation was issued when an intervention was deemed suitable for the majority of patients, with benefits outweighing potential risks.¹

“I am very excited to see that we now have so many new options for our patients, and whole new therapeutic classes that are effective and overall tolerated well,” states Dr. Ioana Medrea, Neurologist and Headache Specialist, Women's College Hospital Centre for Headache, and lead author of the CHS guideline. “I hope that access to these medications also improves so that more people disabled by a migraine disorder may benefit.”

“Many people living with migraine lack access to effective treatments and carry a heavy burden in their daily lives because of this, says Wendy Gerhart, Executive Director of Migraine Canada. “We welcome the new guidelines, as we believe it will empower the healthcare community to select optimal treatments, offering significant relief for Canadians affected by migraine.”

About Migraine

Migraine is a complex neurological disease with recurrent attacks that lasts 4-72 hours. It can be defined by symptoms such as moderate to severe pain intensity, nausea, vomiting, photophobia and phonophobia.³ An estimated 2.7 million Canadians are reported diagnosed with migraine, however the number of people living with migraine is much higher.⁴ Episodic migraine is characterized as having less than 15 headache days per month, while 15 headache days or more per month, is considered chronic.⁵

About ^{Pr}QULIPTA® (atogepant)

QULIPTA (atogepant) is the first and only oral, small-molecule calcitonin gene-related peptide (CGRP) receptor antagonist (gepant) specifically developed for the preventive treatment of episodic and chronic migraine. QULIPTA blocks the binding of the CGRP to its receptor. CGRP is a neuropeptide that may play a role in migraine pathophysiology.⁶

For important safety information, please consult the [QULIPTA Product Monograph](#).

About ^{Pr}BOTOX® (onabotulinumtoxinA)

BOTOX is a sterile, vacuum-dried form of purified botulinum neurotoxin type A complex that blocks neuromuscular conduction by binding to receptor sites on motor nerve terminals, entering the nerve terminals, and inhibiting the release of acetylcholine. The safety and efficacy profiles of BOTOX have been established over more than 30 years through clinical trials and real-world experience across multiple indications. In Canada, BOTOX is approved for 8 therapeutic indications, including chronic migraine, overactive bladder, neurogenic detrusor overactivity associated with a neurological condition, cervical dystonia and primary hyperhidrosis of the axillae in adults, focal spasticity in adult and pediatric patients, as well as blepharospasm and strabismus in patients 12 years or older.⁷

For important safety information, please consult the [BOTOX Product Monograph](#).

About AbbVie in Neuroscience

At AbbVie, our commitment to people around the world living with neurological and psychiatric disorders is unwavering. With more than three decades of experience in neuroscience, we are providing relevant treatment options today and advancing innovation for the future. AbbVie’s Neuroscience portfolio consists of approved treatments in neurological conditions, including migraine, movement disorders, and psychiatric disorders, along with a robust pipeline of therapies. We have made a strong investment in research and are committed to building a deeper understanding of neurological and psychiatric disorders. Every challenge makes us more determined and drives us to discover and deliver advancements for those impacted by these conditions, their care partners, and clinicians. For more information, visit www.abbvie.ca.

About AbbVie

AbbVie’s mission is to discover and deliver innovative medicines and solutions that solve serious health issues today and address the medical challenges of tomorrow. We strive to have a remarkable impact on people’s lives across several key therapeutic areas – immunology, oncology, neuroscience, and eye care – and products and services in our Allergan Aesthetics

portfolio. For more information about AbbVie, please visit us at www.abbvie.ca. Follow AbbVie Canada on [X](#), [Instagram](#), or [LinkedIn](#).

For more information on AbbVie's complete migraine portfolio, please visit www.abbvie.ca.

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¹ Medrea I. et al. (2024) Updated Canadian Headache Society Migraine Prevention Guideline with Systematic Review and Meta-analysis. The Canadian Journal of Neurological Sciences, 1-23. https://www.headachesociety.ca/files/ugd/9f0189_8eb9049b4b1943268725ebf41088ea0c.pdf. Accessed December 2024.

² Canadian Headache Society. Updated Canadian Headache Society Migraine Prevention Guideline with Systematic Review and Meta-analysis Released. <https://www.newswire.ca/news-releases/updated-canadian-headache-society-migraine-prevention-guideline-with-systematic-review-and-meta-analysis-released-882795315.html>. Accessed December 2024.

³ Headache Classification Committee of the International Headache Society (IHS) The International Classification of Headache Disorders, 3rd edition. Cephalalgia. 2018;38(1):1-211. Accessed April 2024.

⁴ Ramage-Morin P., & Gilmour, H. (2014). Prevalence of migraine in the Canadian household population. Health Reports, 25(6): 10-16. <https://www150.statcan.gc.ca/n1/en/pub/82-003-x/2014006/article/14033-eng.pdf?st=CSyp19VF>. Accessed April 2024.

⁵ Migraine Canada. The Migraine Family: categories and groups. Retrieved from <https://migrainecanada.org/posts/the-migraine-tree/roots/migraine-categories/the-migraine-family-categories-and-groups/>. Accessed April 2024.

⁶ AbbVie Canada. QULIPTA Product Monograph. May 2024.

⁷ AbbVie Canada. BOTOX Product Monograph. February 2024.