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| Title | Triptans for Acute Migraine: Comparative Clinical Effectiveness and Cost Effectiveness |
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Aim

To assess the comparative clinical and cost effectiveness of the following serotonin (5-HT₁) receptor agonists (triptans) in patients with acute migraine: almotriptan, eletriptan, naratriptan, sumatriptan succinate/hemisulfate, rizatriptan, and zolmitriptan.

Conclusions and results

The evidence of differences in benefit between some triptans from unreplicated randomized controlled trials is judged to be of fair quality. Good-quality evidence suggests that there are no demonstrated differences in the harmful effects associated with oral triptans. Since no head-to-head trials were found, it was not possible to draw reliable conclusions about the comparative effectiveness of triptans in adolescents. In adults, evidence from several long-term placebo-controlled trials suggests that oral sumatriptan recipients consistently experience more headache relief. In adolescents, only nasal sumatriptan has been shown to improve pain relief while also demonstrating side effects, most commonly, taste disturbance. Most of the literature evaluating the cost effectiveness of triptans is of a limited utility to healthcare decision makers because of poor quality. Most economic studies do not compare all available triptans.

Recommendations

Not applicable.

Methods

A systematic review was summarized and appraised to compare triptans in adults. The clinical literature was systematically reviewed to compare triptans in adolescents. Economic evaluations were systematically reviewed to identify the primary influential factors determining the cost effectiveness of therapy and to identify compelling evidence of cost effectiveness in a Canadian population.

Further research/reviews required

More comparisons among triptans other than sumatriptan are needed, and better evidence regarding the effectiveness of triptans for early and mild migraines should be considered.