

Direct calcitonin gene-related peptide inhibition found to reduce acne, rosacea in patients with migraine

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For patients experiencing migraine, direct calcitonin gene-related peptide (CGRP) inhibition with monoclonal antibodies (mAbs) is associated with reduced rates of acne and rosacea compared with no

inhibition (topiramate) or indirect inhibition (triptans), according to a [research letter](#) published online July 10 in *JAMA Dermatology*.

Christopher J. Thang, from the University of Texas Medical Branch in Galveston, and colleagues examined whether CGRP inhibition is associated with reduced rates of developing acne or rosacea in a [cohort study](#).

Patients experiencing migraines were stratified into four treatment cohorts: CGRP inhibitor (CGRPi) mAbs, CGRPi nonpeptide [small molecules](#) (gepants), triptans, and topiramate. Cohort comparisons were independently 1:1 propensity score-matched for age at index, demographics, and potential confounding medications and comorbidities using a greedy nearest-neighbor matching algorithm.

The researchers found that among patients treated with CGRPi mAbs matched with those treated with triptans, CGRPi mAb exposure was associated with a significantly reduced rate of acne and rosacea.

CGRPi mAb exposure was also associated with significantly reduced rates of acne and rosacea compared with topiramate. CGRPi mAb exposure was associated with a reduced rate of acne compared with gepants, although the difference was not statistically significant, and with a significantly reduced rate of rosacea.

"While further studies, including randomized [clinical trials](#), are needed to examine the effects of CGRP inhibition on acne and rosacea development, the present study highlights CGRP inhibition as a novel therapeutic avenue for both conditions," the authors write.

More information: Christopher J. Thang et al, Calcitonin Gene-Related Peptide Inhibition and Development of Acne and Rosacea, *JAMA Dermatology* (2024). [DOI: 10.1001/jamadermatol.2024.2182](https://doi.org/10.1001/jamadermatol.2024.2182)

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