CLAIMS

1. Use of a monoclonal antibody that modulates the calcitonin gene-related peptide (CGRP) pathway in the manufacture of a medicament for the treatment of migraine in a subject, wherein the subject does not respond favorably to a preventative migraine treatment selected from the group consisting of topiramate, carbamazepine, divalproex sodium, sodium valproate, valproic acid, flunarizine, candesartan, pizotifen, amitriptyline, venlafaxine, nortriptyline, duloxetine, atenolol, nadolol, metoprolol, propranolol, biopropol, timolol, and onabotulinumtoxinA.

2. The use of claim 1, wherein the preventative migraine treatment is selected from the group consisting of topiramate, carbamazepine, divalproex sodium, sodium valproate, flunarizine, pizotifen, amitriptyline, venlafaxine, nortriptyline, duloxetine, atenolol, nadolol, metoprolol, propranolol, timolol, and onabotulinumtoxinA.

3. The use of claim 1, wherein the preventative migraine treatment is selected from the group consisting of propranolol, metoprolol, atenolol, bisopropol, topiramate, amitriptyline, flunarazine, candesartan, onabotulinumtoxinA, and valproic acid.

4. The use of any one of claims 1 to 3, wherein the subject does not respond favorably to two or more preventative migraine treatments.

5. The use of claim 4, wherein each preventative migraine treatment is selected from a different cluster, wherein the clusters are defined as follows:

cluster A: propranolol, metoprolol, atenolol, and bisopropol

cluster B: topiramate

cluster C: amitriptyline

cluster D: flunarizine

cluster E: candesartan

cluster F: onabotulinumtoxinA; and

cluster G: valproic acid.

6. The use of any one of claims 1 to 5, wherein the subject does not respond favorably to the preventative migraine treatment after about three months and/or develops adverse side effects.

7. The use of any one of claims 1 to 5, wherein one of the preventative migraine treatments is onabotulinumtoxinA and the subject does not respond favorably to onabotulinumtoxinA treatment after about six months and/or develops adverse side effects.

8. The use of claim 1, wherein the monoclonal antibody is to be administered to the subject intravenously or subcutaneously.

9. The use of claim 1, wherein the monoclonal antibody is to be administered at a dose of about 675 mg.

10. The use of claim 1, wherein the monoclonal antibody is to be administered at a dose of about 225 mg in three separate injections.

11. The use of claim 1, wherein the monoclonal antibody is to be administered at a dose of about 675 mg followed by subsequent doses of about 225 mg at one month intervals.

12. The use of claim 1, wherein the monoclonal antibody is to be administered at a dose of about 675 mg followed by five subsequent doses of about 225 mg at one month intervals.

13. The use of claim 1, wherein the monoclonal antibody is to be administered at a dose of about 225 mg followed by subsequent doses of about 225 mg at one month intervals.

14. The use of claim 1, wherein the monoclonal antibody is to be administered at a dose of about 675 mg followed by subsequent doses of about 675 mg to be administered every quarter.

15. The use of claim 14, wherein the monoclonal antibody is to be administered subcutaneously.

16. The use of claim 1, wherein the monoclonal antibody is to be administered to the subject from a pre-filled syringe, pre-filled syringe with a needle safety device, injection pen, or auto-injector comprising a dose of the monoclonal antibody.

17. The use of claim 1, wherein the monoclonal antibody is to be administered as a formulation comprising the antibody at a concentration of at least about 150 mg/mL.

18. The use of claim 1, wherein the monoclonal antibody is to be administered in a volume of less than 2 mL.

19. The use of claim 1, wherein the monoclonal antibody is an anti CGRP antagonist antibody.

20. The use of claim 1, wherein the monoclonal antibody is human or humanized.

21. The use of claim 1, wherein the monoclonal antibody is a humanized anti-CGRP antagonist antibody.

22. The use of claim 1, wherein the monoclonal antibody comprises a CDR H1 as set forth in SEQ ID NO:3; a CDR H2 as set forth in SEQ ID NO:4; a CDR H3 as set forth in

SEQ ID NO:5; a CDR L1 as set forth in SEQ ID NO:6; a CDR L2 as set forth in SEQ ID NO:7; and a CDR L3 as set forth in SEQ ID NO:8.

23. The use of claim 1, wherein the monoclonal antibody is an IgG1, IgG2, IgG3, or IgG4 antibody.

24. The use of claim 1, wherein the subject is human.

25. The use of claim 1, wherein a second agent is to be conjointly administered simultaneously or sequentially with the monoclonal antibody, and wherein the second agent is an acute headache medication.

26. The use of claim 25, wherein monthly use of the second agent by the subject is decreased by at least 15% after administration of the monoclonal antibody.

27. Use of a monoclonal antibody that modulates the calcitonin gene-related peptide (CGRP) pathway in the manufacture of a medicament for the treatment of migraine in a subject, wherein the subject does not respond favorably to two to four different classes of preventative migraine treatment selected from the group consisting of beta-blockers, anticonvulsants, tricyclics, calcium channel blockers, angiotensin II receptor antagonists, onabotulinumtoxinA, and valproates.

28. The use of claim 27, wherein the monoclonal antibody is an anti CGRP antagonist antibody.

29. The use of claim 27, wherein the monoclonal antibody is human or humanized.

30. The use of claim 27, wherein the monoclonal antibody is a humanized anti-CGRP antagonist antibody.

31. The use of claim 27, wherein the monoclonal antibody comprises a CDR H1 as set forth in SEQ ID NO:3; a CDR H2 as set forth in SEQ ID NO:4; a CDR H3 as set forth in SEQ ID NO:5; a CDR L1 as set forth in SEQ ID NO:6; a CDR L2 as set forth in SEQ ID NO:7; and a CDR L3 as set forth in SEQ ID NO:8.

32. The use of claim 27, wherein the monoclonal antibody is to be administered at a dose of about 675 mg followed by subsequent doses of about 675 mg to be administered every quarter.

33. The use of claim 32, wherein the monoclonal antibody is to be administered subcutaneously.

34. The use of claim 27, wherein the monoclonal antibody is an IgG1, IgG2, IgG3, or IgG4 antibody.

35. The use of claim 27, wherein the subject is human.

36. A monoclonal antibody that modulates the calcitonin gene-related peptide (CGRP) pathway for use in therapy.