WHAT EXACTLY IS MYASTHENIA GRAVIS?

WHAT IS IT?
MG is complicated and rare, autoimmune neuromuscular disease. Our immune systems mistakenly attack us and inhibit the signal, called acetylcholine, to our muscles. Our muscles get fewer signals and cannot sustain repetitive activity.

WHO GETS IT?
Myasthenia Gravis affects all ages, gender, and ethnic groups. It is more commonly diagnosed in women who are 20-40 years old and men who are over 40, although there are those who do not fit the statistics.

HOW IS IT TREATED?
The most common treatments are acetylcholinesterase inhibitors (Mestinon), steroids (Prednisone/Prednisolone), immunosuppressants (Imuran, Cellcept), IVIG, Plasmapheresis and in some cases, Rituximab.

WHAT ARE THE SYMPTOMS?
The most common symptoms are generalized fatigue, drooping eyelids, double vision, blurry vision, weak neck, arms, legs and hands, difficulty breathing, chewing, swallowing, and talking, mild muscular twitching, and drooling.

WHO TREATS IT?
The primary treating physician for MG is a neurologist but it takes a skilled and trained doctor to treat it correctly. A neuromuscular specialist is ideal.

WHAT ARE COMMON MISCONCEPTIONS?
It is commonly believed that MG is easy to treat and manage with medication and that the majority lead mostly normal lives. Unfortunately, difficulty in finding skilled doctors, sometimes debilitating side effects from medication and symptoms themselves make daily life with MG anything but normal for many. Myasthenics are sometimes perceived as lazy and misdiagnosed with mental disorders, anxiety or depression, delaying diagnosis sometimes for years.