Myasthenia Gravis Frequently Asked Questions (FAQs)



A Public Information Initiative

Q.1. What is myasthenia gravis?

Ans. Myasthenia Gravis (MG) is a treatable immune-system disorder characterized by weakness and fatigability of muscles such as eye, chewing, swallowing, and limb muscles due to defective chemical transmission at the neuro-musclular junction.

Q.2. What is the cause of myasthenia gravis?

Ans. It is due to formation of antibodies to acetylcholine receptors present in the neuromuscular junction which block the transmission.

Q.3. Is it hereditary?

Ans. Myasthenia Gravis, which is commonly seen, is not hereditary, except in the new-borns of affected mothers who may have weakness for a few days only.

Q. 4. When to suspect Myasthenia Gravis?

Ans. When a person experiences weakness and fatigability, especially, in the eye, chewing and swallowing, or limb muscles which improves on rest and fluctuates from morning to evening; this should raise the suspicion of MG.

Q. 5. How to diagnose Myasthenia Gravis?

Ans. The most important is history and examination for fluctuation in fatiguability and weakness of eye, chewing and swallowing, and limb muscles. Nerve conduction velocity/repetitive nerve stimulation studies can be done to confirm the diagnosis.

Q. 6. Is CT scan of chest mandatory?

Ans. A CT scan of chest is mandatory to rule out thymic hyperplasia and associated tumors of thymus gland.

Q.7. What other diseases should be checked in a person with Myasthenia Gravis?

Ans. The persons who have MG should be screened for thyroid dysfunction, rheumatoid arthritis, pernicious anemia, SLE, Sjogren's disease and ulcerative colitis.

Q.8. What precautions should be taken by a MG affected person?

Ans. The person should take the medicines regularly as prescribed by the neurologist. In case of fever or any infections, the neurologist should be consulted with the list of drugs which are hazardous for MG (For list of offending drugs refer to the information on MG).

Q.9. How to treat Myasthenia Gravis?

Ans. Treatment should start either with neostigmine (7.5-15mg 4-6 hourly orally) or pyridostigmine (30-60mg 4-6 hourly). Steroids and other immune-suppressants may also be required for long term management.

Q.10. What kind of jobs a MG affected person should avoid?

Ans. The jobs which demand excessive physical activity and long duty hours should be avoided.

Q.11. Is it a life threatening disease?

Ans. Sometimes there is an involvement of swallowing and respiratory muscles. In such circumstances, the neurologist should be consulted as an emergency.

Disclaimer:

This brochure is for the general information of the public and the patients. People should not self-medicate themselves with the medicines and treatments mentioned here. Before taking any of the medications mentioned in the information brochure, please consult your neurologist.

Dr. Jayantee Kalita, MD, DM

