

Important Terms to Know

Clearly communicating your experience can help you and your healthcare team better manage your gMG

If you or your loved one is living with uncontrolled generalized myasthenia gravis (gMG), discussing the disease with your care team can feel like learning a whole new language. While your day-to-day experience with gMG symptoms may be unpredictable, you can be prepared for discussions with your doctor by using this glossary to learn the important gMG terms they may use.

Acute

Occurring suddenly and lasting for a short time. An acute disease is one with symptoms that only last for a short period of time. People with myasthenia gravis often experience both acute and chronic symptoms.

Antibodies

An antibody is part of your body's immune system that protects you by attacking foreign proteins.

Autoimmune disease

A disease in which the immune system, which normally protects the body, attacks it instead.

Chronic

Long-lasting, persistent, or constant. A chronic disease is one with symptoms that occur over a long period of time. People with myasthenia gravis often experience both chronic and acute symptoms.

Complement system

Part of your immune system that enhances (complements) the ability of your immune cells to do their jobs in protecting you against disease.

Diplopia

An ocular (eye) symptom that is also known as double vision. It causes you to see two images of a single object.

Dysarthria

A motor speech disorder in which the muscles that are used to produce speech are damaged, paralyzed, or weakened. gMG causes weakness in these muscles, resulting in slurred or slow speech.

Dysphonia

A voice disorder resulting in difficulty speaking easily or clearly. This can occur due to weakness caused by gMG.

Dysphagia

Difficulty swallowing due to muscle weakness, which may be caused by gMG.

Exacerbation

An exacerbation is an acute (short-term) worsening of gMG symptoms.

Fluctuation

A fluctuation in gMG occurs when you experience a change in muscle strength.

Generalized myasthenia gravis (gMG)

A chronic autoimmune, neuromuscular disease that causes weakness in the skeletal muscles, which can worsen after periods of activity and improve after periods of rest. This weakness can affect moving, eating, and breathing.

Immune system

A system that protects your body from foreign invaders by producing a response to fight infections and other threats.

Myasthenic crisis

A medical emergency where the muscles you use to breathe get very weak, leading to respiratory failure.

Neuromuscular junction (NMJ)

The meeting place of nerves and muscles. When the NMJ is destroyed, your muscles get weaker.

Ptosis

Droopiness of the eyelids due to muscle weakness. gMG may cause drooping of the upper eyelid.

Uncontrolled

As gMG affects each person differently, uncontrolled disease can also vary person to person. The most common signs and symptoms that may indicate uncontrolled disease include:

- Myasthenia Gravis Activities of Daily Living Profile (MG-ADL)—a tool your doctor may use to assess the extent of your symptoms)—greater than or equal to 6
- Some but not all of the following: Ongoing weakness, difficulty speaking, problems with chewing or swallowing, impaired vision or drooping eyelid, shortness of breath, or difficulty with activities such as brushing your teeth or combing your hair—which can impact your daily quality of life
- Progression of symptoms requiring frequent treatment changes and/or increase in treatment dosing

It's important to speak with your doctor if you are experiencing these signs and symptoms of gMG to understand if your disease may in fact be uncontrolled.

References:

1. British Society for Immunology. Accessed December 20, 2020. <https://www.immunology.org/>
2. Cutter G, Xin H, Aban I, et al. Cross-sectional analysis of the Myasthenia Gravis Patient Registry: disability and treatment. *Muscle Nerve*. 2019;60(6):707–715.
3. Grob D, Brunner N, Namba T, Pagala M. Lifetime course of myasthenia gravis. *Muscle Nerve*. 2008;37(2):141–149.
4. Hehir MK, Silvestri NJ. Generalized myasthenia gravis: Classification, clinical presentation, natural history, and epidemiology. *Neurol Clin*. 2018;36(2):253–260.
5. Howard JF Jr. Myasthenia gravis: the role of complement at the neuromuscular junction. *Ann NY Acad Sci*. 2018;1412(1):113–128.
6. Juel VC, Massey JM. Myasthenia gravis. *Orphanet J Rare Dis*. 2007;2:44.
7. Ludwig RJ, Vanhoorelbeke K, Leypoldt F, et al. Mechanisms of autoantibody-induced pathology. *Front Immunol*. 2017;8:603.
8. Mantegazza R, Antozzi C. When myasthenia gravis is deemed refractory: clinical signposts and treatment strategies. *Ther Adv Neurol Disord*. 2018;11:1756285617749134.
9. Merriam Webster Medical Dictionary. Accessed December 20, 2020. <https://www.merriam-webster.com/medical>
10. NIH National Cancer Institute. Accessed December 20, 2020. <https://www.cancer.gov/>
11. Werneck LC, Scola RH, Germiniani FM, Comerlato EA, Cunha FM. Myasthenic crisis: report of 24 cases. *Arq Neuropsiquiatr*. 2002;60(3-A):519–526.
12. Xin H, Harris LA, Aban IB, Cutter G. Examining the impact of refractory myasthenia gravis on healthcare resource utilization in the United States: analysis of a Myasthenia Gravis Foundation of America Patient Registry sample. *J Clin Neurol*. 2019;15(3):376–385.

Access helpful resources on gMG Never Rests

Understanding how gMG impacts your life, learning how to partner with your doctor, and finding support from the gMG community can help you take better charge of your care.

Learn more at gMGNeverRests.com

If your gMG feels uncontrolled, talk to your doctor about your condition.

Not intended to provide medical advice. Always seek medical advice from your HCP.

