



The Puzzle of Myasthenia Gravis

Science tells us . . .

That MG is a neuromuscular autoimmune disease that causes varying degrees of voluntary muscle weakness. The muscle weakness occurs because antibodies produced by the body's immune system impair communication between an impulse sent by the nerve to the muscle signaling it to contract. So many things many of us take for granted—walking, seeing clearly, swallowing, smiling, even breathing—can be a struggle for an MG patient.

It is a puzzle why the immune system, which normally protects the body from foreign organisms, mistakenly attacks the neuromuscular transmission — a puzzle which scientists and researchers are studying today.

History . . .

Myasthenia gravis was first described in the 17th century. The name is taken from the Greek; “myasthenia” meaning muscle weakness and Latin, “gravis” meaning severe.

MG can strike . . .

Men, women and children of any age or race, but it most commonly affects adult women under age 40 and men over 60. For every male with MG there are 1.5 women with the disease.

The effects . . .

Of weakness and fatigue can develop unexpectedly and rapidly and vary in presence and severity throughout the day. The trademark of MG is muscle weakness that increases during periods of activity and improves with rest.

MG's primary symptoms are erratic and can occur in many combinations, such as: droopy eye lid(s), double or blurred vision, weak arms, hands, neck, face or legs, difficulty chewing, smiling, swallowing, talking, undue fatigue, difficult breathing or shallow respiration or sense of balance difficulty.

MG is a rare disease that is often misdiagnosed or undiagnosed because its symptoms can masquerade as many other conditions. The prevalence of MG in the United States is estimated to be 20 in 100,000.

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Prognosis . . .

There is no cure for MG. With proper diagnosis and treatment, MG patients can expect to lead normal or nearly normal lives. Treatment regimes are specific to each patient, can change as the disease changes and require careful medical follow-up. Twenty percent of people with MG experience a reversal of some or all symptoms.

What research is being done?

Within the Federal Government, the National Institute of Neurological Disorders and Stroke (NINDS) has primary responsibility for conducting and supporting research on myasthenia gravis. NINDS works with pharmaceutical and biotech companies, as well as research hospitals and universities. Researchers are seeking to learn what causes the autoimmune response in myasthenia gravis

Resources for patients and families . . .

The Myasthenia Gravis Foundation of Illinois, Inc. provides services to patients and families that help them cope with the impact MG has on quality of life— family, work, day-to-day. We educate the public and healthcare professionals about this rare, and, at times, debilitating disease. We fund research to improve treatment and find a cure.

The Myasthenia Gravis Foundation of Illinois, Inc. was formed October 29, 1972 by a local group of caring individuals who wanted to help patients achieve the best possible quality of life, while living with and managing their MG. We are a volunteer-led organization, dedicated to being the best possible resource for MG patients in Illinois, NW Indiana and the Quad Cities.

Our Mission: To facilitate the timely diagnosis and optimal care of individuals affected by myasthenia gravis and to improve their lives through programs of patient services, public awareness, medical research, professional education, advocacy and patient care.

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