

Intravenous Immunoglobulin (IVIG)

Common questions patients ask about IVIG therapy for Myasthenia Gravis

Why am I being, or might be treated with IVIG?

IVIG might be prescribed for an individual with MG for one of several reasons. The first indication for use might be for a hospitalized patient who is extremely ill and might not be responding adequately to other treatments. Some patients with MG who are being treated with IVIG have improved quickly, thus allowing time for other treatments to begin working. Patients at home who are having significant symptoms (problems speaking, swallowing or walking) in spite of aggressive treatment with other drugs and treatments may be considered for treatment with IVIG also.

What is IVIG?

IVIG is intravenous immune globulin. It is also known as pooled human gamma globulin or simply gamma globulin. IVIG has been used for decades in modern medicine in the treatment of a variety of infectious or inflammatory diseases. In patients who are lacking in the antibodies necessary to fight infection, IVIG replaces those lost antibodies.

IVIG is used also in the treatment of a variety of autoimmune disorders. Over the past two decades, IVIG has been used extensively in the treatment of some autoimmune neurological disorders, including Myasthenia Gravis. There are indications that IVIG is an effective treatment for some patients with autoimmune Myasthenia Gravis.

How Does IVIG work?

IVIG seems to affect the function or the production of antibodies in the immune system. The exact mechanism on how IVIG works in successfully treating Myasthenia Gravis and other autoimmune disorders is not entirely understood.

Since IVIG is a blood product, is it safe?

IVIG is felt to be very safe with regard to exposure to infection or viruses. Donors are screened. The processing of IVIG inactivates such infections as HIV and Hepatitis B and C. Nonetheless, it is a human blood product that comes from multiple donors.

Are there adverse effects that occur with IVIG treatments?

For the most part, IVIG is considered quite safe. However, there are several adverse effects that may occur on occasion. Some patients develop headache, chills and aches during the infusion. Slowing the infusion and using medicines to relieve these symptoms may be helpful.

Some patients will experience fatigue, fever or nausea that may persist up to 24 hours after the infusion. Some patients may have migraine headaches, aseptic meningitis, skin reactions or a more severe allergic type reaction. Because IVIG is a highly concentrated protein, it can sometimes interfere with blood flow and clotting. Rare instances of stroke, heart attack, and deep vein clots have been reported.

How is IVIG administered?

IVIG treatments are administered intravenously. The medication is infused slowly over a number of hours. The dose is based on the individual's weight. Many patients are treated with a series of infusions over a period of three to five days. Other patients may have infusion intervals even farther apart. Patients who are treated with long-term maintenance therapy have a single infusion every few weeks.

For some patients, the infusion is given in a physician's office, while others may have it in the home using a home health agency. Patients who are severely weakened are treated in the hospital. A week or two may be required before the patient feels the onset of improvement, although this varies from patient to patient. The duration of improvement from IVIG is usually limited to a few weeks to a few months.

What are other concerns about using IVIG?

IVIG is expensive and this can be a major issue in management. It is important to discuss the cost issues with one's health insurance provider in order to prevent an unforeseen financial dilemma.

Reviewed for publication by the Medical Advisory Board of the Myasthenia Gravis Association of Western Pennsylvania. 2009