


Abstract

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Topic	Neuromuscular/Neurophysiology
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Abstract Title	MYASTHENIA GRAVIS - CLINICAL PRESENTATION, DISEASE PROGRESSION AND RESPONSE TO TREATMENT: A DESCRIPTIVE STUDY AT TERTIARY CARE LEVEL IN SRI LANKA
Abstract	<p>Purpose Data related to myasthenia gravis (MG) is scarce in Sri Lanka. This study aims to describe the clinical presentation, disease progression and response to treatment in a cohort of Sri Lankan patients with MG.</p> <p>Methods A descriptive study was conducted in consecutive patients with confirmed MG, followed up for >1 year at Neurology clinics of Colombo North Teaching Hospital and National Hospital of Sri Lanka. Data collection was done using an interviewer administered questionnaire and medical records. Subclasses of MG were described according to clinical classification of Myasthenia Gravis Foundation of America.</p> <p>Results 65 patients were studied (men-50.8%; mean age-51.7±11.6years; mean follow-up - 8.8±7.1years). 52.3% (men-63.6%; women-40.6%) were in subclass-1 at the time of diagnosis. Thymoma positivity was significantly less among those in subclass-1 (subclass-1:10.7%; non-subclass-1:34.6%; p=0.04). 14.7% from subclasses-1 progressed to other subclasses, subsequently. 83% were admitted to hospital at least once (subclass-1:73.3%; non-subclass-1:95.7%; p=0.022). 50% experienced ≥1 exacerbations during follow-up. 21.1% had ≥1 ICU admissions (subclass-1:5.3%; non-subclass-1:36.8%; p=0.012). At the time of data collection, 81.5% were in remission. There was no significant difference in response to therapy with pyridostigmine, neostigmine, prednisolone, azathioprine, immunoglobulin or thymectomy based on initial subclass. Thymectomy achieved good response irrespective of thymoma status (thymoma-positive:80%; thymoma-negative:75%; p=0.505).</p> <p>Conclusions More than half in the study cohort initially had ocular myasthenia. Half have experienced at least one exacerbation and 1/5th were admitted to ICU at least once during the follow-up. Most have achieved remission, subsequently. Response to therapy did not differ based on subclass at baseline.</p> <p>Figure :  MG Abstract final (2).docx</p>
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