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Elizabeth Henderson

Imad Ikhwan

Dharti R. Patel

Monicka Felix

Furqan Haq

*See next page for additional authors*

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**Authors**

*Elizabeth Henderson, Imad Ikhwan, Dharti R. Patel, Monicka Felix, Furqan Haq, and Salman Muddassir*

## **Authors**

Elizabeth Henderson, MD

Imad Ikhwan, MD

Dharti Patel, MD

Monicka Felix, MD

Salman Muddassir, MD

Vikas Malholtra, MD

## **Nivolumab Induced Myasthenia Gravis**

### **ABSTRACT**

Nivolumab is an immune checkpoint inhibitor antibody that can be used to treat a variety of cancers, however it has showed significant immune related adverse effects. One particular concerning adverse event is the development of immunotherapy induced myasthenia gravis syndromes. Early suspicion of autoimmune symptoms would help preventing long term mortality. Here we present the clinical course and outcomes of a 61 year-old male who presented with Myasthenia gravis related symptoms after the 3<sup>rd</sup> cycle of Nivolumab infusion for melanoma, He initially showed symptoms of ptosis, diplopia, fatigue and dysphagia, eventually resulting in respiratory failure and death.

The 61 year-old male with active melanoma undergoing treatment with Nivolumab developed myasthenia-like symptoms following his third round of treatment. The immunotherapy was immediately discontinued and started on steroids by his oncologist. The patient's symptoms did not improve and he was subsequently admitted to the hospital where his condition further

deteriorated. He was treated with IV solumedrol, pyridostigmine, and IVIG. The patient still did not respond to these treatment and was treated with plasmapheresis.

This case illustrates the importance of early recognition and appropriate management of immune related adverse events with immunotherapy. This patient had early recognition and was given proper treatment, however still expired as a result of complications secondary to Nivolumab-induced myasthenia gravis.

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