What is Guillain-Barré?

Guillain-Barré syndrome (GBS) is an autoimmune disease. This means it is a condition caused by your body’s own way of fighting off illness through the immune system. An earlier illness, most often an infection, may have triggered your GBS symptoms. The human body produces substances to fight off infections. However, in a person with GBS the immune system is misdirected, then attacks and damages the nerves.

GBS makes you weak. You may find it difficult to move around. There is often numbness and tingling in your limbs. Some people may develop breathing problems and may need temporary assistance from a mechanical ventilator.

What does “immunotherapy” mean?

People with GBS often receive immunotherapy. This type of therapy fights the misdirected immune system. It is not well known exactly how it works, but it likely removes the antibodies causing your disorder.

For people with GBS, doctors will order one of these treatments when people become bedridden or when their symptoms are getting rapidly worse. Early treatment can speed up your overall recovery time.

What are the immunotherapy treatments used to treat GBS?

Intravenous immune globulin (IVIg)

Your doctor may suggest an intravenous medication called immune globulin (IVIg). Depending on how weak you are your doctor will treat you as soon as possible. IVIg is a medication used to help the body fight disease. Immune globulin is a protein in human blood that likely links itself with antibodies or other substances directed at the nerve.

Your physician may give you a choice between plasma exchange (described on back page) and IVIg. If so, you should know that research shows side effects occur somewhat less often in people getting IVIg than in people treated with plasma exchange. However, both treatments are equally effective.

If you and your doctor decide that IVIg is an option for you, he or she can provide more details about what happens during the procedure and any side effects you may experience.

If you are the caregiver of a child with severe GBS, IVIg may be an option for your child. Discuss the pros and cons with your child’s neurologist.
Plasma exchange
Your doctor may recommend plasma exchange. Plasma exchange is best when done within two weeks to a month of when you first start to have GBS symptoms. Plasma exchange is a process that separates the plasma in a person’s blood from the red and white blood cells. Before the blood returns to the body, the plasma is “exchanged” with a blood product called albumin. Research shows that plasma exchange can shorten the time it takes to recover from GBS-related symptoms.

If you and your doctor decide that plasma exchange is an option for you, your doctor can provide more details about what happens during the procedure and any side effects from the treatment.

If you are the caregiver of a child with severe GBS, plasma exchange may be an option for your child. Discuss the pros and cons with your child’s neurologist.

Combined treatments
Scientific studies show there is no benefit to combining plasma exchange and IVIg, either mixing the two methods in a treatment plan or performing them one after the other.

Studies have shown that plasma exchange and IVIg are equally effective in treating people within two to four weeks of onset of GBS, especially if you are having difficulty walking. While the treatments are expensive, the costs are roughly the same.

Steroids
Corticosteroids are man-made drugs that are similar to a hormone called cortisone. Your body produces cortisone on its own. Although corticosteroids reduce inflammation, careful reviews of the published studies using this drug do not support its use to treat GBS.

Talk to your neurologist
Together you and your doctor can choose a plan that works best for you based on your medical history. It is important to talk with your doctor about your choices. Ask your neurologist for more information and resources.

GBS is complex and varies in severity and length with each patient. Your GBS treatment plan will need to be individualized. Ask your doctor to discuss these treatment options with you.

This is an educational service of the American Academy of Neurology. It is designed to provide members with evidence-based guideline recommendations to assist with decision-making in patient care. It is based on an assessment of current scientific and clinical information, and is not intended to exclude any reasonable alternative methodologies. The AAN recognizes that specific patient care decisions are the prerogative of the patient and the physician caring for the patient, based on the circumstances involved. Physicians are encouraged to carefully review the full AAN guidelines so they understand all recommendations associated with care of these patients.