AB050. PS02.14: Interference of myasthenia gravis (MG) with long term prognosis of thymoma

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Abstract: Thymomas are rare malignant tumors of the thymus, they are associated with paraneoplastic disorders e.g., myasthenia gravis (30%). Little is known about the possible influence of myasthenia gravis and medical treatment of MG on the oncological outcome of thymoma patients. The purpose of this retrospective study was to evaluate this effect. We analyzed the data of 136 thymoma patients (WHO A-B3) which were treated in Myasthenia Gravis Centre Regensburg between 1998 and 2016. 78 of these patients (57,4%) showed paraneoplastic myasthenia gravis proven by positive AChR-antibodies, 58 (42.6%) had no MG. WHO B2 (36.9%) and B3 (17.3%) tumors were most common in both groups. Oncological treatment did not differ in thymoma + paraneoplastic MG (TMG) compared to thymoma without MG. TMG patients required 83% immunosuppressive and in 51% iv immunoglobuline treatment. Thymoma patients with MG were grouped mostly in Masaoka stage 1 or stage 2, whereas patients without MG had on average higher stages. Patients with MG had a significantly better survival in the Kaplan-Meier Estimator. This effect is still apparent when statistically adjusting for the Masaoka stage. In summary not only TMG is caused by thymoma via immunological mechanisms but it seems that TMG may have an effect on thymoma outcome. It is unclear whether this may be caused by existence of MG, the AchR or Titin-ab, immunosuppression, IVIG or other reasons.
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