

Rapid, Sustained Improvements With Efgartigimod in Symptoms, Daily Life, and Patient Satisfaction in gMG: Initial Results From the PREMIER Study

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KEY TAKEAWAYS



Real-world efgartigimod use delivers meaningful early (Week 4) and sustained improvements in gMG symptoms (MG-ADL) and quality of life (MG-QoL15r) among all patients, with the greatest benefit observed in patients maintained on therapy



Efgartigimod effectively reduces reliance on long-term steroids, with a substantial and steadily increasing proportion of patients who are corticosteroid free through 44 weeks of treatment



Beyond symptoms, patients achieved nearly 90% treatment satisfaction by Week 44, and efgartigimod improved the ability to work in 48% of patients with baseline employment impairments



Future PREMIER data will continue to characterize the long-term, real-world experiences of these patients

BACKGROUND | METHODS

- gMG is an IgG-mediated autoimmune neuromuscular disorder that causes fatigable weakness in voluntary muscles¹
- gMG substantially impairs patients' daily functioning, reduces work productivity, hinders employment, and limits social activities and personal relationships^{2,3}
- Management of this condition can involve long-term corticosteroid therapy, which is associated with significant side effects^{4,5}
- Efgartigimod is a human IgG1 antibody Fc fragment indicated for the treatment of gMG

Objective

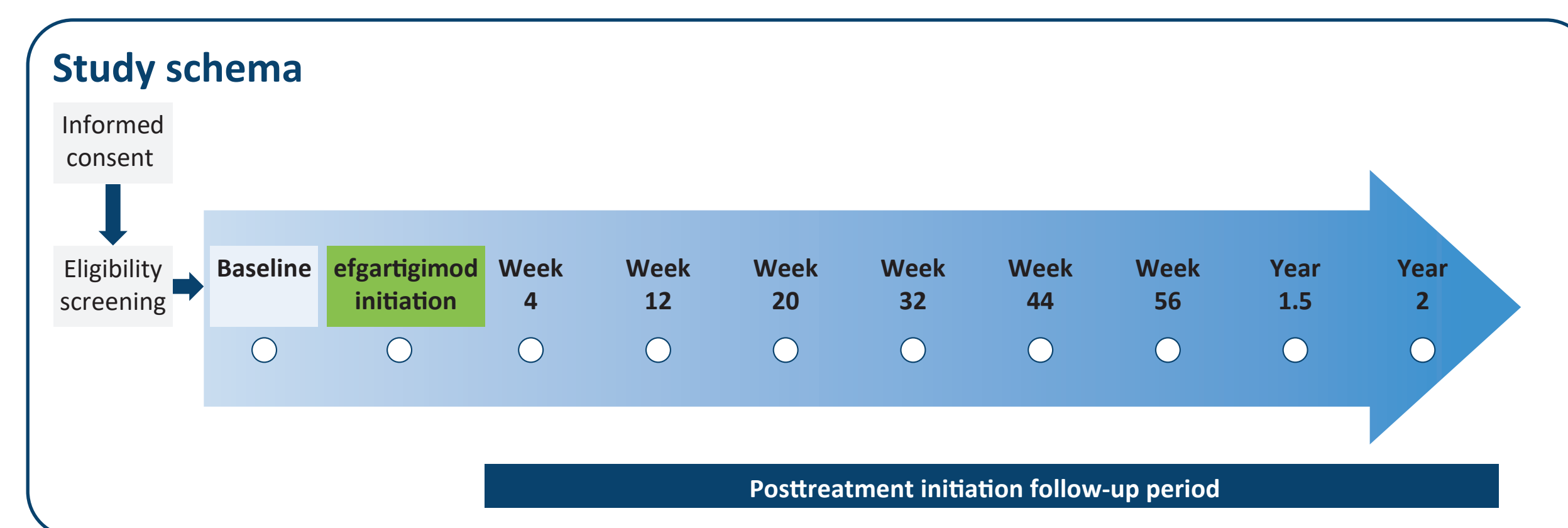
- Characterize early treatment outcomes and patient experience among US patients with gMG treated with efgartigimod

Study population

- Adult patients prescribed efgartigimod in routine clinical practice and enrolled in the efgartigimod patient support program were invited to participate in the ongoing *Prospective Real-World Study of Efgartigimod for Patients With Generalized Myasthenia Gravis* (PREMIER) study
- Patients were required to:
 - Be aged ≥18 years at the time of the enrollment
 - Be prescribed efgartigimod (intravenous or subcutaneous) for gMG
 - Be efgartigimod-naïve or received the first dose within 2 days of study enrollment
 - Not be currently participating in any clinical trials
 - Be able to understand English and provide consent to participate in the study

Data collection and assessments

- Data were collected at baseline (ie, prior to or within 2 days from the first dose of efgartigimod), and over a 2-year follow-up period after efgartigimod initiation
- Patients who initiated efgartigimod were invited to complete all follow-up surveys, regardless of their efgartigimod treatment status at each follow-up



- MG-ADL was used to capture symptoms and functional status
 - 8 items with a 7-day recall period, each scored from 0 (normal) to 3 (most severe). Total scores range from 0 to 24, with higher scores indicating greater severity
- MG-QoL15r was used to assess health-related quality of life
 - 15 items with a 7-day recall period, each scored from 0 to 2. Total scores range from 0 to 30, with higher scores indicating worse quality of life

- Patients also reported corticosteroid use and dosage (4-week recall period), satisfaction with current treatments, and ability to work
 - Ability to work was captured at baseline, Week 20, and Week 56 onward given the expected slower work-related impacts

Data analysis

- We report initial results up to Week 44 using a data cut of March 23, 2026
- Unadjusted statistical comparisons between the posttreatment outcomes and baseline were conducted using Chi-square/Fisher's exact tests for categorical variables and t-tests for continuous variables

LIMITATIONS

- Findings should be interpreted in the context of patient support program-based recruitment, which may limit generalizability to the overall gMG population, and potential selection bias among follow-up survey completions

RESULTS

- At the time of analysis, 157 patients enrolled in PREMIER and initiated efgartigimod
 - 75 completed the Week 44 survey, with 70.7% on efgartigimod
- At baseline, patients' mean (SD) age was 63.2 (14.6), and 49.0% were female (**TABLE 1**)

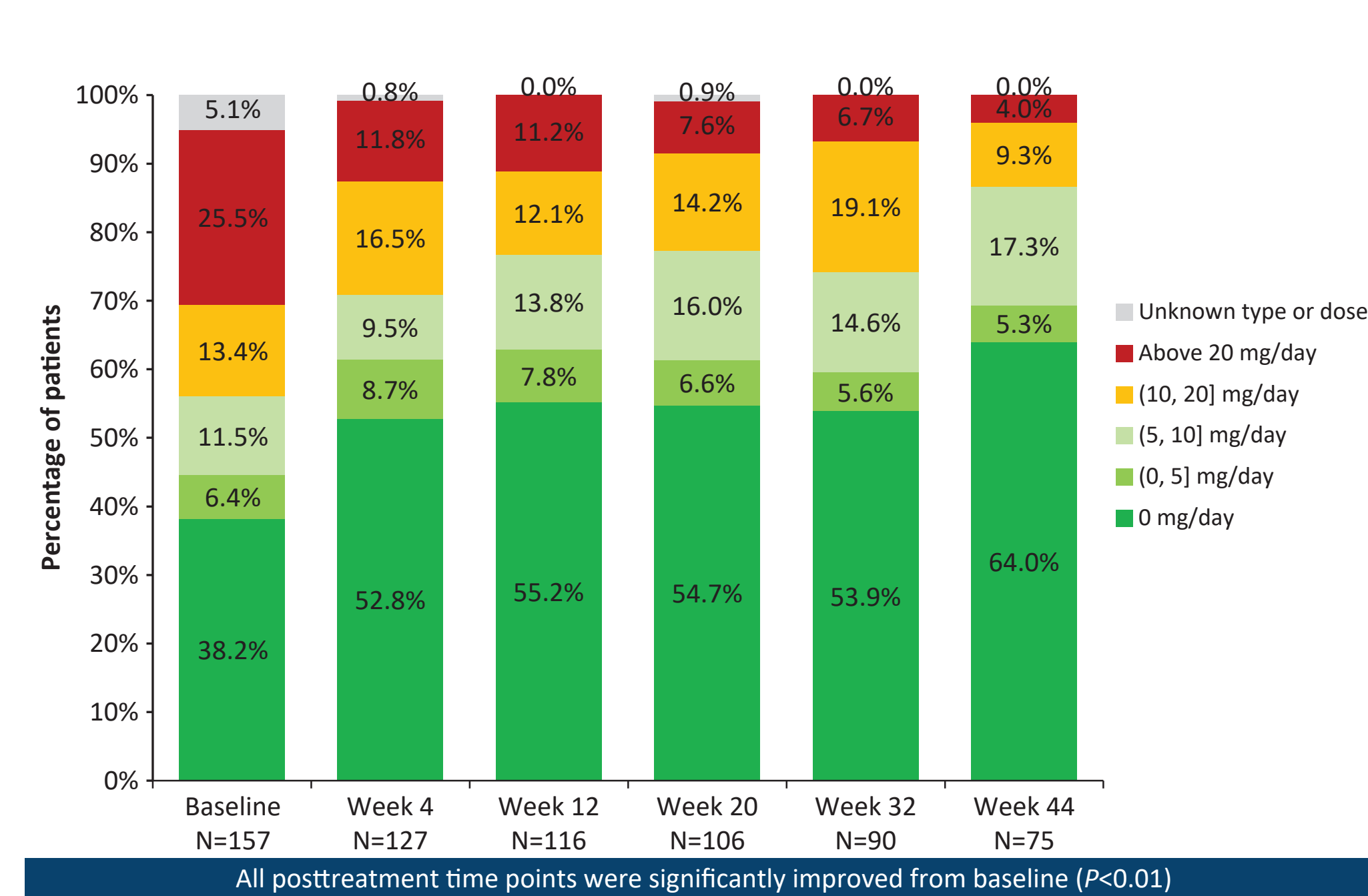
TABLE 1 Baseline Characteristics

	N=157
Demographics	
Age at enrollment (years), mean ± SD	63.2 ± 14.6
Female, n (%)	77 (49.0)
White or Caucasian, n (%)	134 (85.4)
Employment status, n (%)	
Employed ^a	63 (40.1)
Unemployed	7 (4.5)
Retired	76 (48.4)
Homemaker/student	11 (7.0)
Disabled, n (%)	19 (12.1)
BMI (kg/m ²), mean ± SD	31.4 ± 7.8
Medical history	
gMG disease duration (years), ^b mean ± SD	5.6 ± 9.0
Less than 12 months	65 (44.2)
1-3 years	23 (15.6)
3+ years	59 (40.1)
Treatment used in previous 4 weeks, n (%)	
Cholinesterase inhibitor	124 (79.0)
Corticosteroids	97 (61.8)
Non corticosteroid immunosuppressants	58 (36.9)
Immunoglobulin or plasma exchange	40 (25.5)
Biologics/advanced therapies ^c	5 (3.2)

^aEmployed includes self-employed, part-time, and full-time employees. ^bDisease duration calculated as time since diagnosis to baseline survey date among those who provided their date of diagnosis. ^cBiologics/advanced therapies include eculizumab, rituximab or rituximab biosimilar, ravulizumab-cwv, rosexelizumab-nol, zilucoplan.

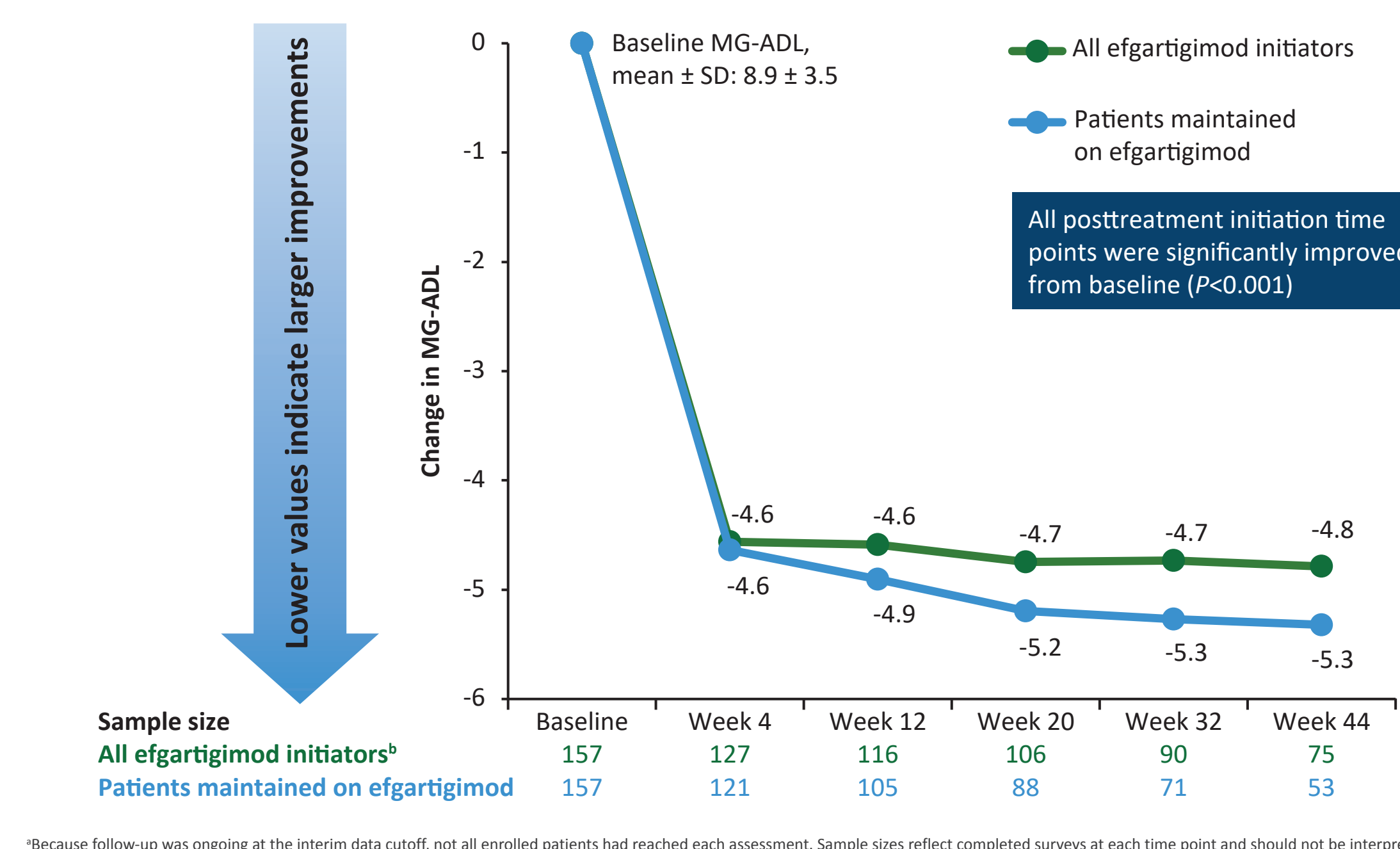
- The proportion of corticosteroid-free patients significantly increased ($P<0.01$) from baseline to Week 4, further increasing through Week 44 (**FIGURE 3**)

FIGURE 3 Oral Corticosteroid Use^{a,b}



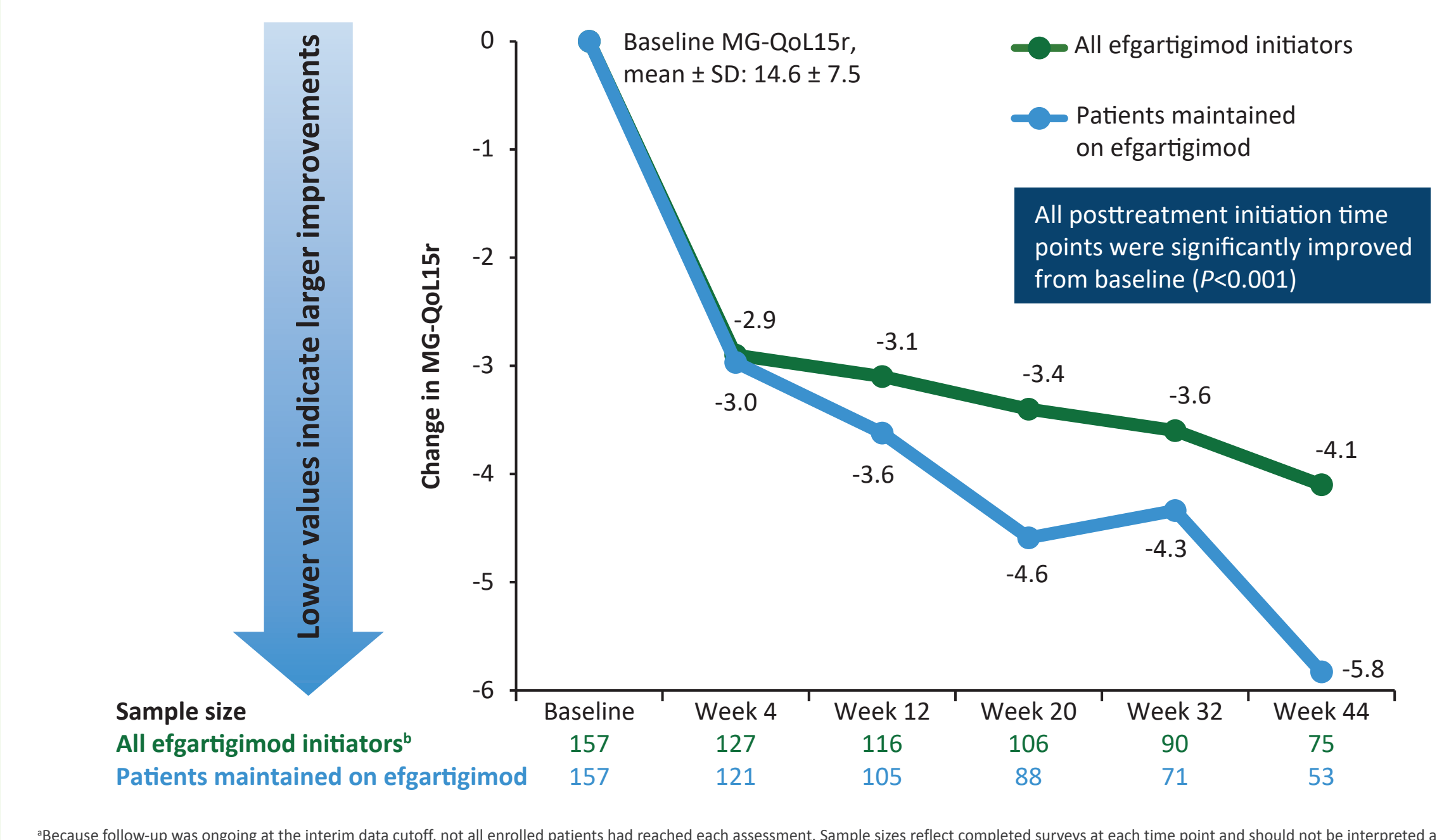
- MG-ADL significantly improved ($P<0.001$) as early as Week 4. Improvements were sustained through Week 44, with larger improvements observed among those maintained on efgartigimod at the respective survey time points (**FIGURE 1**)

FIGURE 1 Changes in MG-ADL Total Score^a



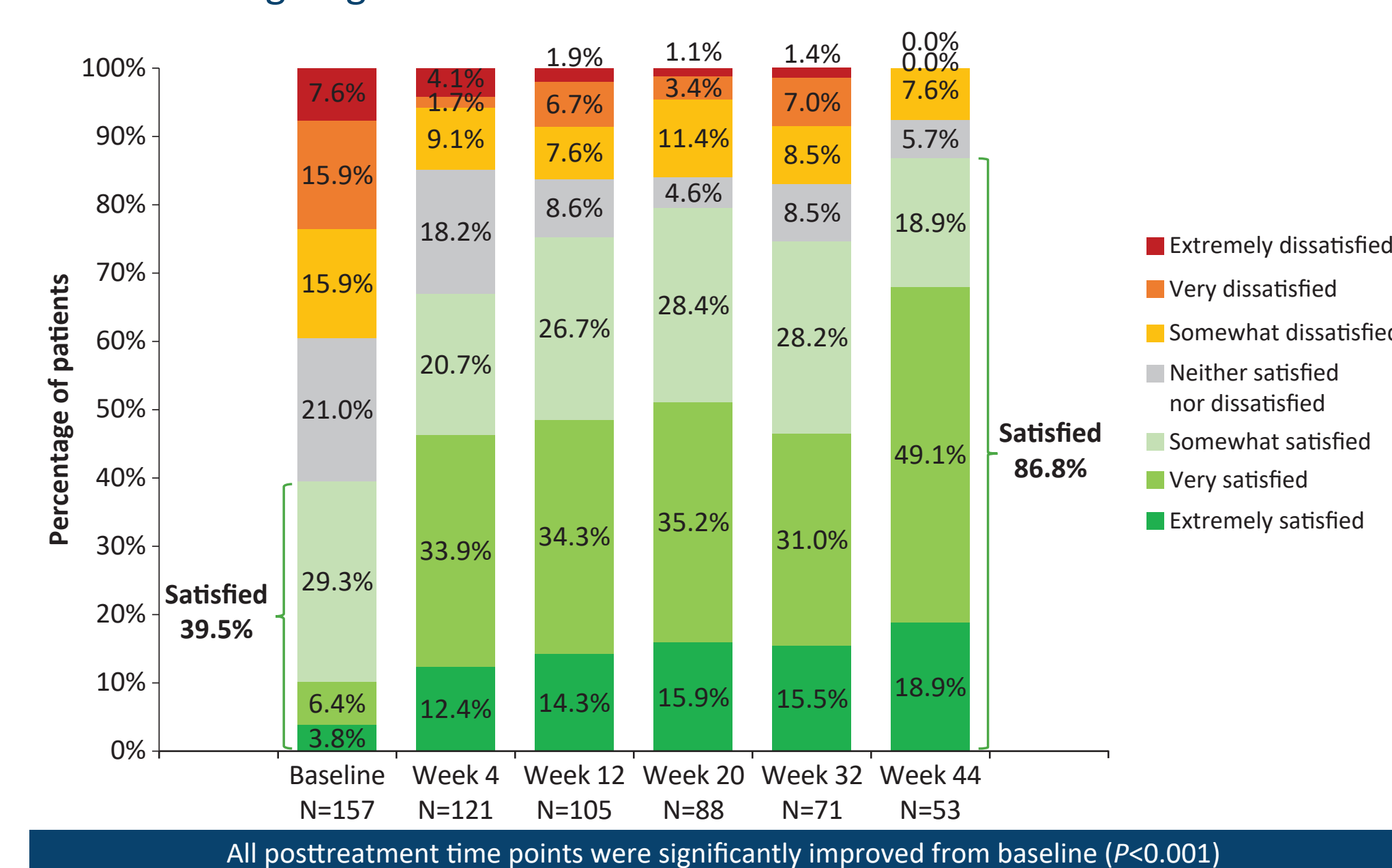
- MG-QoL15r also showed early and significant ($P<0.001$) improvement by Week 4, with progressive improvement through Week 44 and larger improvements among patients maintained on efgartigimod at the respective survey time points (**FIGURE 2**)

FIGURE 2 Changes in MG-QoL15r Total Score^a



- Satisfaction with current gMG treatments ("somewhat" to "extremely satisfied") among patients on efgartigimod significantly ($P<0.001$) increased from baseline to Week 4 and reached almost 90% by Week 44 (**FIGURE 4**)

FIGURE 4 Patient Satisfaction With Current gMG Treatment(s) Among Patients on Efgartigimod^a



- At baseline, the vast majority (90.0%) of patients with work experience reported that gMG affected their ability to work (**FIGURE 5**)
- At Week 20, approximately half (48.1%) of the 54 patients who completed the survey and had baseline work impairments reported improved ability to work since starting treatment with efgartigimod (**FIGURE 5**)

FIGURE 5 Improvement in Ability to Work

