

Newer Treatments for MG
as of June 2025

Drug Name	Manufacturer	Delivery By	Usual Dosing	Action	Antibody Specific	Vaccinations
BKEMV™ (Interchangeable Eculizumab biosimilar to SOLIRIS®)	Amgen	IV infusion	every 2 weeks	Monoclonal antibody that inhibits Complement C-5	AChR+	serial meningococcal vaccines are required
SOLIRIS® (Eculizumab)	Alexion	IV Infusion	900 mg weekly for first 4 weeks, 5th week 1200 mg, then 1200 mg every 2 weeks	Monoclonal antibody that inhibits Complement C-5	AChR+	serial meningococcal vaccines are required
Ultomiris® (Ravulizumab-cwvz)	Alexion	IV Infusion	Once every 8 weeks (6-7 times a year)	Monoclonal antibody that inhibits Complement C-5	AChR+	serial meningococcal vaccines are required
Zilbrysq® (Zilucoplan)	UCB	Sub-cutaneous injection	daily	Monoclonal antibody that inhibits Complement C-5	AChR+	serial meningococcal vaccines are required
IMAAVY® (nipocalimab-aahu)	Johnson & Johnson	IV infusion	every 2 weeks	FcRn blocking monoclonal antibody, reducing circulating IgG	Patients 12 and up AChR+, MuSK+	consult physician
Rystiggo® (Rozanolixizumab- noli)	UCB	Sub-cutaneous injection to be given by medical professional	weekly for 6 weeks then break for 9-14 weeks, then another 6 weeks. Average 4 cycles per year	IgG4 monoclonal antibody that binds to the neonatal Fc receptor (FcRn), reducing circulating IgG	AChR+, MuSK+	consult physician
Vvgart® (efgartigimod alfa-fcab)	argenx	IV Infusion	weekly for 4 weeks, individualized break before beginning another cycle but not sooner than 4 weeks from the last infusion	IgG1 antibody fragment that binds to the neonatal Fc receptor (FcRn), reducing circulating IgG	AChR+	consult physician
Vvgart Hytrulo® (efgartigimod alfa and hyaluronidase-qvfc)	argenx	Sub-cutaneous injection to be given by medical professional. Now available via pre-filled syringes for self-injection.	weekly for 4 weeks, individualized break before beginning another cycle but not sooner than 4 weeks from the last injection	IgG1 antibody fragment that binds to the neonatal Fc receptor (FcRn), reducing circulating IgG	AChR+	consult physician
Rituxan® (rituximab) and its bio-similars	Various	IV Infusion	usually 1 infusion every 4-6 months (off label use)	monoclonal antibody that supresses/depletes B-cells	All generalized MG especially MuSK+	consult physician