



Guillain-Barre Syndrome

This rare neurological disorder affects roughly 3,000–6,000 people in the United States each year. Most individuals recover without long-term complications.

Q: What is Guillain-Barre Syndrome (GBS)?

Guillain-Barre syndrome occurs when the immune system attacks the body's nerves, causing muscle weakness or paralysis.

Q: What are the symptoms of GBS?

Symptoms of GBS include weakness and tingling sensations that can develop over hours, days, or weeks, and typically begin in the legs and spread to the upper extremities. Individuals may also experience double vision, difficulties with bowel and bladder management, and cramp-like pains that feel worse at night. Weakened facial muscles can also impair the ability to chew, swallow or speak.

Severe cases of GBS can cause paralysis and respiratory failure. Symptoms can rapidly increase and intensify. Early diagnosis and treatment offer the best outcomes. Seek medical attention immediately if weakness and tingling sensations begin to spread upward throughout the body.

Q: What causes GBS?

The cause of GBS is not fully known but is believed to stem from several different factors. According to the Centers for Disease Control and Prevention (CDC), about two out of every three people diagnosed with GBS experienced diarrhea or a respiratory illness a few weeks before developing GBS symptoms. Viruses, including the flu, can also precede GBS. On rare occasions, people have developed GBS after receiving certain vaccines. However, it is important to understand that the benefits of vaccinations outweigh the risks: studies demonstrate there is a greater chance of getting GBS after having the flu than after getting vaccinated against the flu.

Q: How is GBS diagnosed?

GBS symptoms are similar to other diseases, including transverse myelitis and multiple sclerosis. Doctors may confirm GBS diagnosis using electromyography (nerve conduction tests that record the electrical activity of the muscle,) magnetic resonance imaging (MRI), and a lumbar puncture to analyze fluid around the spinal cord and brain.

Q: How is GBS treated?

Because GBS can progress rapidly, patients diagnosed with the disease will be immediately hospitalized and given intravenous immunoglobulin, possibly followed by plasma exchange. Patients who are unable to eat will receive food intravenously; if breathing is impaired, ventilator assistance may be necessary.

Q: Will I recover from GBS?

Symptoms can last from a few months to a few years. Most people will fully recover, but some will experience long-term muscle weakness and nerve damage.

Q: Are there clinical trials for GBS?

Yes. To find current GBS trials, visit [ClinicalTrials.gov](https://www.clinicaltrials.gov) (<https://www.clinicaltrials.gov/ct2/home>), a searchable website for publicly and privately supported clinical studies maintained by the National Library of Medicine at the National Institutes of Health.

Sources: Merck Manuals, Centers for Disease Control and Prevention, National Institute for Neurological Disorders and Stroke, U.S. National Library of Medicine.

Need to talk to someone?

Our Information Specialists are available to answer your questions.

Call toll-free 1-800-539-7309 Mon-Fri, 9 am-8 pm EST.

Schedule a call or ask a question online at <https://www.ChristopherReeve.org/Ask>

Resources for GBS:

Centers for Disease Control and Prevention: Guillain-Barre Syndrome

<https://www.cdc.gov/campylobacter/guillain-barre.html>

eMedicine: Pediatric Guillain-Barré Syndrome

<http://emedicine.medscape.com/article/1180594-overview>

GBS/CIDP Foundation International

<http://gbs-cidp.org/>

375 East Elm St., Suite 101

Conshohocken, PA 19428

Phone: 610-667-0131, 866-224-3301 (Toll-free)

GBS/CIDP Foundation International offers information and interactive bulletin boards, research funding and a worldwide chapter organization to patients, caregivers and families affected by Guillain-Barré Syndrome (GBS) and Chronic Inflammatory Demyelinating Polyneuropathy (CIDP).

Mayo Clinic: Guillain-Barre Syndrome

<https://www.mayoclinic.org/diseases-conditions/guillain-barre-syndrome/symptoms-causes/syc-20362793>

MedlinePlus: Guillain-Barré Syndrome

<http://www.nlm.nih.gov/medlineplus/guillainbarresyndrome.html>

Merck Manual: Guillain-Barre Syndrome Quick Facts (Consumer Version)

<https://www.msdmanuals.com/home/quick-facts-brain,-spinal-cord,-and-nerve-disorders/peripheral-nerve-disorders/guillain-barré-syndrome-gbs>

Merck Manual: Guillain-Barré Syndrome (Professional Version)

http://www.merckmanuals.com/professional/neurologic_disorders/peripheral_nervous_system_and_motor_unit_disorders/guillain-barr%C3%A9_syndrome_gbs.html

National Institute of Neurological Disorders and Stroke: Guillain-Barré Syndrome Information Page

<https://www.ninds.nih.gov/Disorders/All-Disorders/Guillain-Barr%C3%A9-Syndrome-Information-Page>

National Institute of Neurological Disorders and Stroke (NINDS): Guillain-Barre Syndrome booklet

<https://catalog.ninds.nih.gov/publications/guillain-barre-syndrome>

Shepherd Center: Rehab for Guillain-Barre

<http://www.shepherd.org/patient-programs/Guillain-Barre-Syndrome>

Info on GBS and Zika virus:

Centers for Disease Control and Prevention: Questions About Zika

<http://www.cdc.gov/zika/about/questions.html>

According to the CDC “Current research suggests that Guillain-Barre syndrome (GBS), an uncommon sickness of the nervous system, is strongly associated with Zika; however, only a small proportion of people with recent Zika virus infection get GBS”.

Centers for Disease Control and Prevention: Areas at Risk for Zika

<https://www.cdc.gov/zika/geo/index.html>

In 2018, no local mosquito-borne Zika virus transmission has been reported in the continental United States. However, it is still a threat in certain countries.

Hesperian: Zika Virus

http://en.hesperian.org/hhg/Zika?utm_source=When+a+bug+bite+isn%27t+just+a+bug+bite+6-22&utm_campaign=When+a+bug+bite+isn%27t+just+a+bug+bite+6-22&utm_medium=email

The information contained in this message is presented for the purpose of educating and informing you about paralysis and its effects. Nothing contained in this message should be construed nor is intended to be used for medical diagnosis or treatment. It should not be used in place of the advice of your physician or other qualified health care provider. Should you have any health care related questions, please call or see your physician or other qualified health care provider promptly. Always consult with your physician or other qualified health care provider before embarking on a new treatment, diet or fitness program. You should never disregard medical advice or delay in seeking it because of something you have read in this message.

This publication is supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$10,000,000 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS, or the U.S. Government.