

# MOG Antibody Disease Fact Sheet for Educators

## Definition

- MOG Antibody Disease (MOG-AD) is a rare neuro-immune condition that typically causes inflammation in the optic nerve.
- It can also cause inflammation in the spinal cord, brain and brain stem.
- While its cause is unknown, the disease is not transmittable.
- There is no cure, but treatments are available to prevent inflammatory attacks and to manage symptoms.

## Symptoms

- Loss or blurring of vision in one or both eyes
- Loss of color vision
- Eye pain
- Paralysis or weakness of a limb or limbs
- Loss of sensation
- Cognitive/learning issues
- Behavioral changes/issues
- Loss of bladder or bowel control
- Fatigue related to the diagnosis or medications
- Seizures
- Vomiting
- Headaches
- Altered mental status (requires emergency care)

## Treatments

- Short-term treatments to reduce inflammation during an acute attack include IV or oral steroids, plasma exchange (PLEX), and intravenous immunoglobulin (IVIg).
- Students diagnosed with MOG-AD may be on long-term treatment with medications such as IVIg, SClg or those that suppress the immune system such as mycophenolate mofetil (CellCept), rituximab (Rituxan), azathioprine (Imuran), low-dose steroids.

## Other Considerations

Parents/caregivers should discuss the student's current, specific neurological symptoms with educators. Parents should be made aware of any new symptoms or anything out of the ordinary immediately, as symptoms vary widely, and some symptoms may require emergency care.

Note: Some symptoms may be triggered as a result of prolonged exposure to heat (Uhthoff's Phenomenon).

## Classroom Accommodations

- Some treatments carry an increased risk of infection to the student with MOG-AD, so it is important to keep the classroom clean and sanitized.
- Good hygiene and hand washing are important.
- Alert parents/guardians to any illnesses in the classroom (e.g., flu, strep throat, stomach virus).
- Provide accommodations, required by law, for students who use wheelchairs or other mobility or assistive devices.
- An emergency plan should be in place for exiting the building, medical emergencies, and a seizure plan (when appropriate).

## Learning Considerations

- Student may need plans in place to assist with learning challenges (e.g., 504, IEP, EHC).
- Be cognizant of potential vision issues and their impact on learning.
- Multiple absences are common due to doctor appointments, multi-hour infusions, MRIs, and adverse treatment reactions.
- Inform parents/guardians of any changes in behavior (e.g., anger outbursts, anxiety, crying, student acting withdrawn) or new learning challenges.
- Student may be struggling with their diagnosis and the changes MOG-AD has caused in their life.
- Consult with student's parents/guardians regarding privacy preferences around their condition.

For more information on MOG Antibody Disease, please visit:

<https://wearesna.org/living-with-myelitis/disease-information/mog-antibody-disease/>