Drug assessment at a glance: A26-27[1]

Inebilizumab (generalized myasthenia gravis)

24 August 2026

[1] This is a courtesy translation of the summary provided as a service by IQWiG. For further information on the subject matter and the result of the assessment, please refer to the dossier assessment for Project A26-27. The G-BA decides on the added benefit.

Research question 1 of the benefit assessment

Population	Adults with anti-AChR antibody-positive generalized myasthenia gravis for whom add-on therapy to standard treatment is an option
Intervention	inebilizumab
Comparator	eculizumab (for refractory patients) or efgartigimod alfa or ravulizumab or rozanolixizumab or zilucoplan
Outcomes	At least one patient-relevant outcome

Overview of positive and negative effects – research question 1

	Size of the effects	Informative value of the effects
Mortality	∅	–
Morbidity	∅	–
Symptoms	∅	–
Health-related quality of life	∅	–
Side effects	∅	–
	∅ No (suitable) data ↔ No advantage or disadvantage ↑ / ↓ Small advantage/disadvantage ↑↑ / ↓↓ Moderate advantage/disadvantage ↑↑↑ / ↓↓↓ Large advantage/disadvantage	– Not applicable ★ Low ★★ Moderate ★★★ High

Overall: No advantage or disadvantage (no suitable data)

Evidence base and noteworthy aspects – research question 1

- No relevant studies were identified for a direct comparison of inebilizumab versus the comparator therapy.
- The MINT study (a double-blind RCT comparing inebilizumab with placebo) was not suitable, as it did not allow for a comparison of inebilizumab with the comparator therapy.

Research question 2 of the benefit assessment

Population	Adults with anti-MuSK antibody-positive generalized myasthenia gravis for whom add-on therapy to standard treatment is an option
Intervention	inebilizumab
Comparator	rozanolixizumab
Outcomes	At least one patient-relevant outcome

Overview of positive and negative effects – research question 2

	Size of the effects	Informative value of the effects
Mortality	∅	–
Morbidity	∅	–
Symptoms	∅	–
Health-related quality of life	∅	–
Side effects	∅	–
	∅ No (suitable) data ↔ No advantage or disadvantage ↑ / ↓ Small advantage/disadvantage ↑↑ / ↓↓ Moderate advantage/disadvantage ↑↑↑ / ↓↓↓ Large advantage/disadvantage	– Not applicable ★ Low ★★ Moderate ★★★ High

Overall: No advantage or disadvantage (no suitable data)

Evidence base and noteworthy aspects – research question 2

- No relevant studies were identified for a direct comparison of inebilizumab versus the comparator therapy.
- The MINT study (a double-blind RCT comparing inebilizumab with placebo) was not suitable, as it did not allow for a comparison of inebilizumab with the comparator therapy.

References

Institut für Qualität und Wirtschaftlichkeit im Gesundheitswesen. Inebilizumab (generalisierte Myasthenia gravis); Nutzenbewertung gemäß § 35a SGB V; Dossierbewertung [online]. 2026 [Accessed: 19.08.2026]. URL: https://doi.org/10.60584/A26-27.

Gemeinsamer Bundesausschuss. Nutzenbewertungsverfahren zum Wirkstoff Inebilizumab (Neues Anwendungsgebiet: Myasthenia gravis, AChR-Antikörper+, MuSK-Antikörper+) [online]. 2026 [Accessed: 19.08.2026]. URL: https://www.g-ba.de/bewertungsverfahren/nutzenbewertung/1325/.

English translations for this project are published at https://www.iqwig.de/en/projects/a26-27.html

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Publisher

Institute for Quality and Efficiency in Health Care (IQWiG)

Address

Siegburger Str. 237
50679 Köln
Germany

Phone: +49 221 35685-0
Fax: +49 221 35685-1
Email: info@iqwig.de
Internet: www.iqwig.de