

### IDF Lunch & Learn: Good's Syndrome 12.07.22

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### Today's Topics

#### What is Good's Syndrome?

- 1. What is a thymus and a thymoma?
- 2. What are B cells and antibodies?
- 3. What are T cells?

#### What to watch out for in Good's Syndrome and thymoma?

### Living with Good's Syndrome

- 1. What are the treatments?
- 2. Navigating the pandemic with immunodeficiency

### Q and A



## First report of Good's syndrome (1955)

Mr. F.H. is a 58-year-old male who was well but then developed pneumonia for the first time ... chest [x-ray] revealed evidence of a large thymoma.

On November 6. 1951. a 54 gram. tumor was removed from the anterior mediastinum ... benign thymoma ...

He then had 17 pneumonias in the next 4 years. He had an absence of [antibodies].

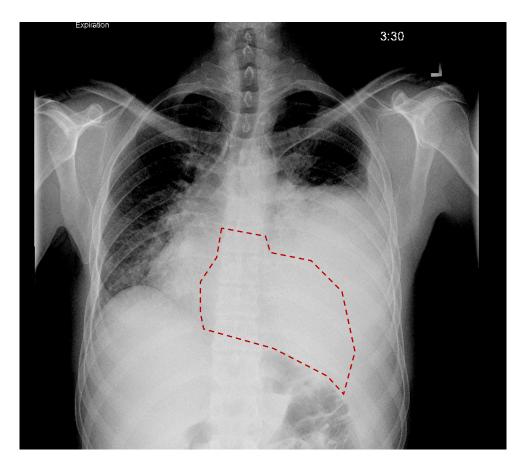


Figure 1 Robert A. Good (1922-2003).

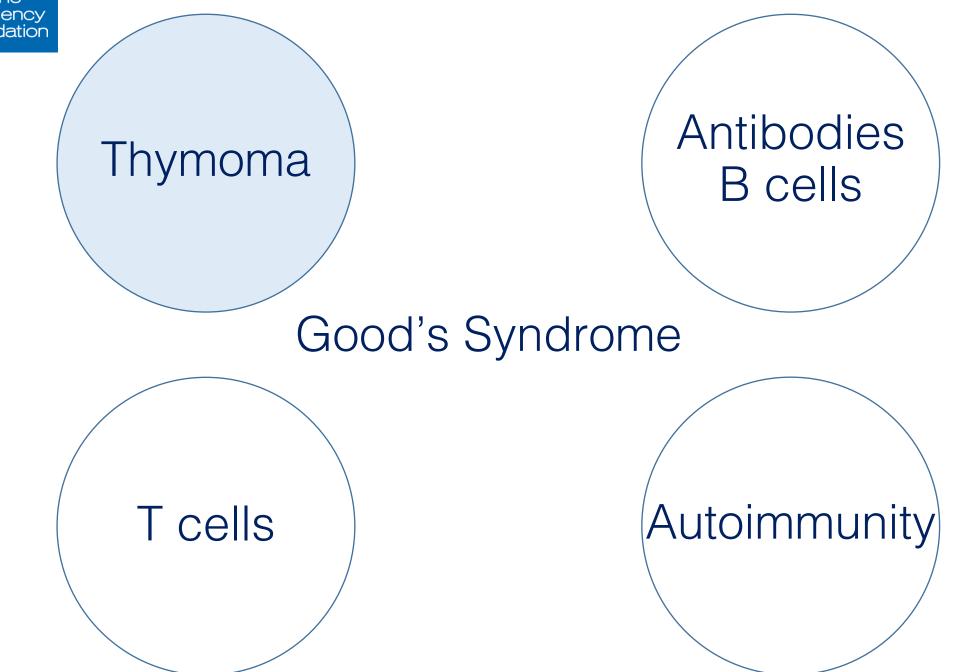


## A case from Mount Sinai Hospital

- 51 year old architect
- Long history of sinusitis, but has not required hospitalization
- Felt poorly and fainted. His family doctor thought his chest sounds were dull
- Referred for chest X-ray thymoma was found and surgically removed
- 8 months later, he went to an allergist for ongoing sinusitis
- Allergist tested antibody levels: IgG 30, IgA 0, IgM 5 mg/dL
- Patient referred to Mount Sinai Immunology





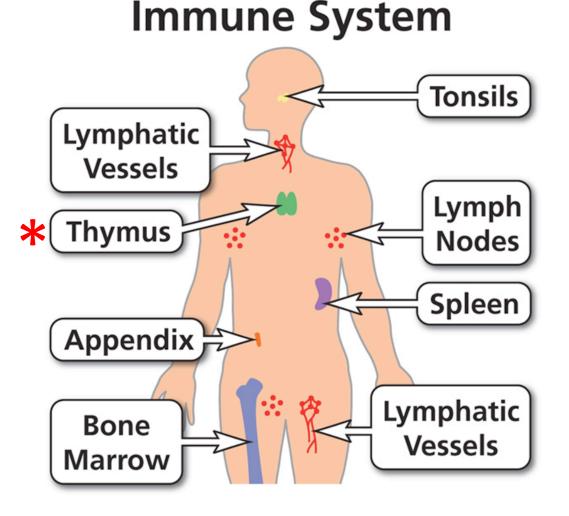






mmune Deficiency Foundatior

- Large in infants, but small in adults
- "Thumos" (thymus) is a Greek word for "spiritedness" or seat of the soul





### Thymus: a school for immune cells (T cells)

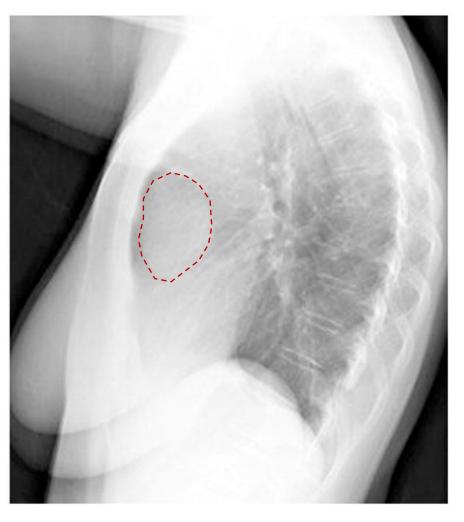
- In the thymus, T cells learn to attack microbes (bacteria, viruses, fungi).
- Bad T cells that can attack our own cells are also removed.
- The immune system produce most of its T cells during childhood.





## What is a thymoma?

- A rare tumor of thymus gland
- Typically occurs in 4<sup>th</sup>-6<sup>th</sup> decades of life
- No known risk factors
- Slow growing
- Often benign (sometimes malignant)





## What are symptoms of thymoma?

- Can be an incidental finding only
- Tumor compresses on heart and lungs (chest pain, cough, shortness of breath)
- An associated syndrome:
  - Myasthenia gravis (muscular weakness)
  - Red cell aplasia (anemia)
  - Immune deficiency: ~< 5% low antibodies (Good's syndrome)

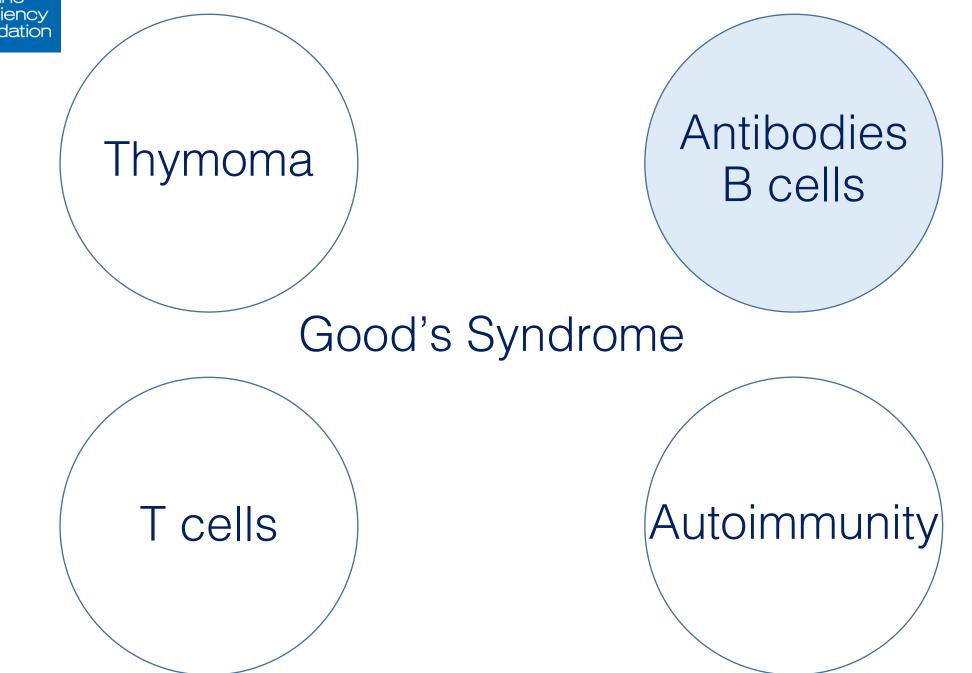




### Our Immune System







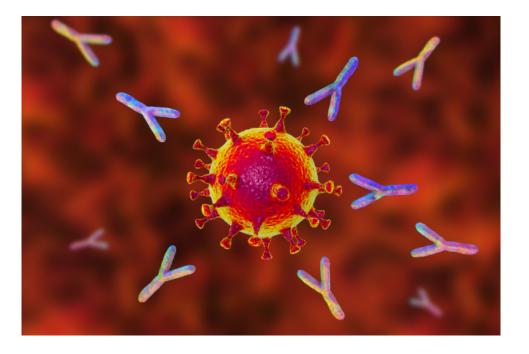


- Antibodies protect us when unwanted substances enter our body
- Antibodies fight against: bacteria, viruses, fungi

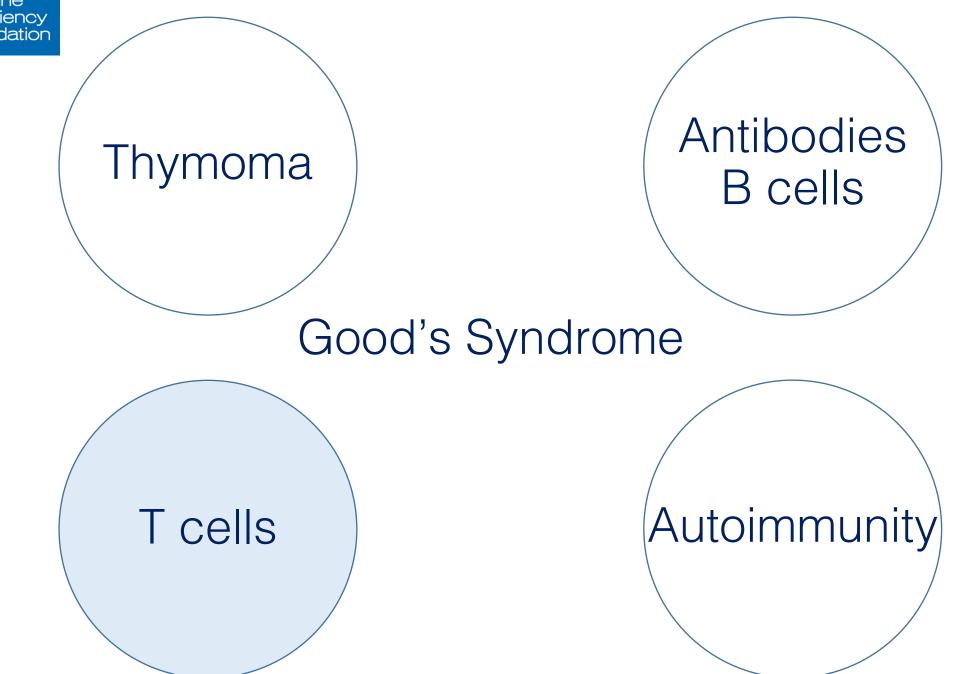
eficiency

- Produced by specialized immune cells called B cells
- In Good's Syndrome: B cells are very low or absent.







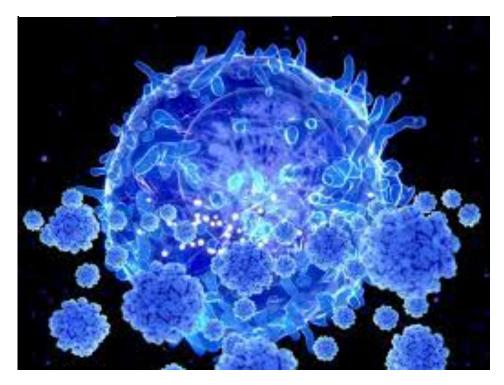




### T cells: Immune System's Quarterback

- Trained at thymus
- Orchestrate targeted immune responses
- Especially important for viruses, fungi







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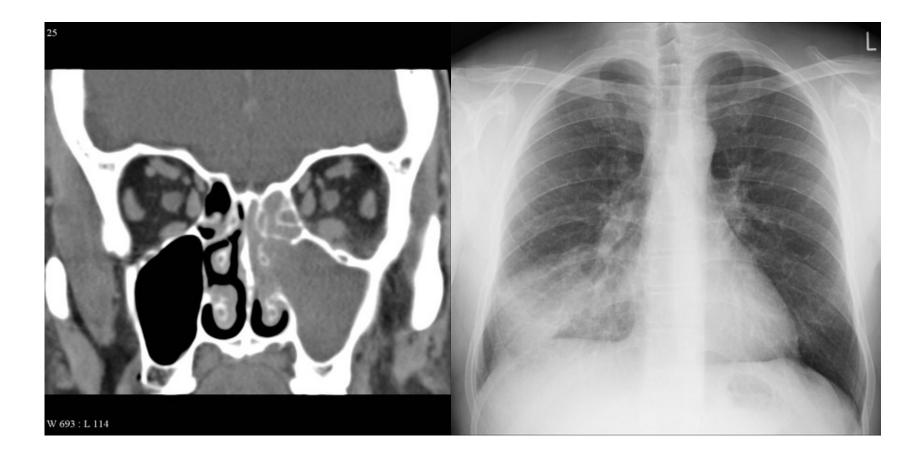
#### Living with Good's Syndrome

- 1. What are the treatments?
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### Q and A



### 1. Infections



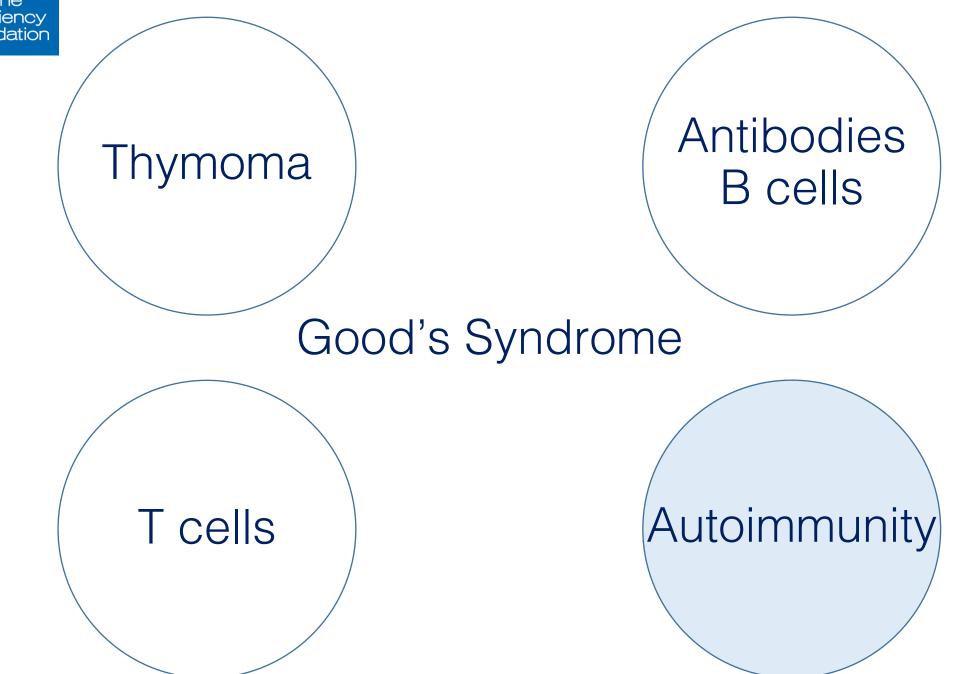
UK report (78 patients)		
Feature	%	
Bronchiectasis	45%	
Sinusitis	10%	



### 1. Infections

Bacteria	Viruses
Haemophilus	Cytomegalovirus
Streptococcus	Herpes simplex
Staphylococcus	Varicella zoster
Salmonella	Human herpesvirus 8
Campylobacter	
Mycobacteria	
Fungi	Protozoa
Candida	Giardia
Pneumocystis carinii	







## 2. Autoimmunity

UK report (78 patients)	
Feature	%
Autoimmunity	26%
Low red blood cells	10%
Thyroid disease	8%
Arthritis (joint inflammation)	5%
Myasthenia gravis	4%
Lupus	4%
Sjogren's disease	3%



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- 1. Remove thymoma
  - Rarely cancerous, but possible
  - Removal of thymoma does not restore the immune system





- 1. Remove thymoma
- 2. Replace antibodies
  - IVIG (monthly) infusion center or home
  - SCIG (weekly, or monthly) home





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- 1. Remove thymoma
- 2. Replace antibodies
- 3. Treat infections
  - Antibiotics
  - Antivirals
  - Consider prophylaxis if pre-existing lung disease





- 1. Remove thymoma
- 2. Replace antibodies
- 3. Treat infections
- 4. If autoimmunity
  - Work with specialists for targeted treatments





- 1. Check in with your immunologist routinely
  - Tell them about any interval infections, weight changes, new symptoms, and new medications
  - Check your antibody levels 1-2 times a year
- 2. Protect yourself from infections
  - Optimize IVIG/SCIG
  - Test broadly if symptomatic: bacteria, viruses, fungi, etc
  - Protect your lungs
  - If sinusitis, work with an ENT physician to consider topical treatments
- 3. If you develop new symptoms, tell both your primary care doctor and immunologist
  - Thymoma can be associated with autoimmune diseases



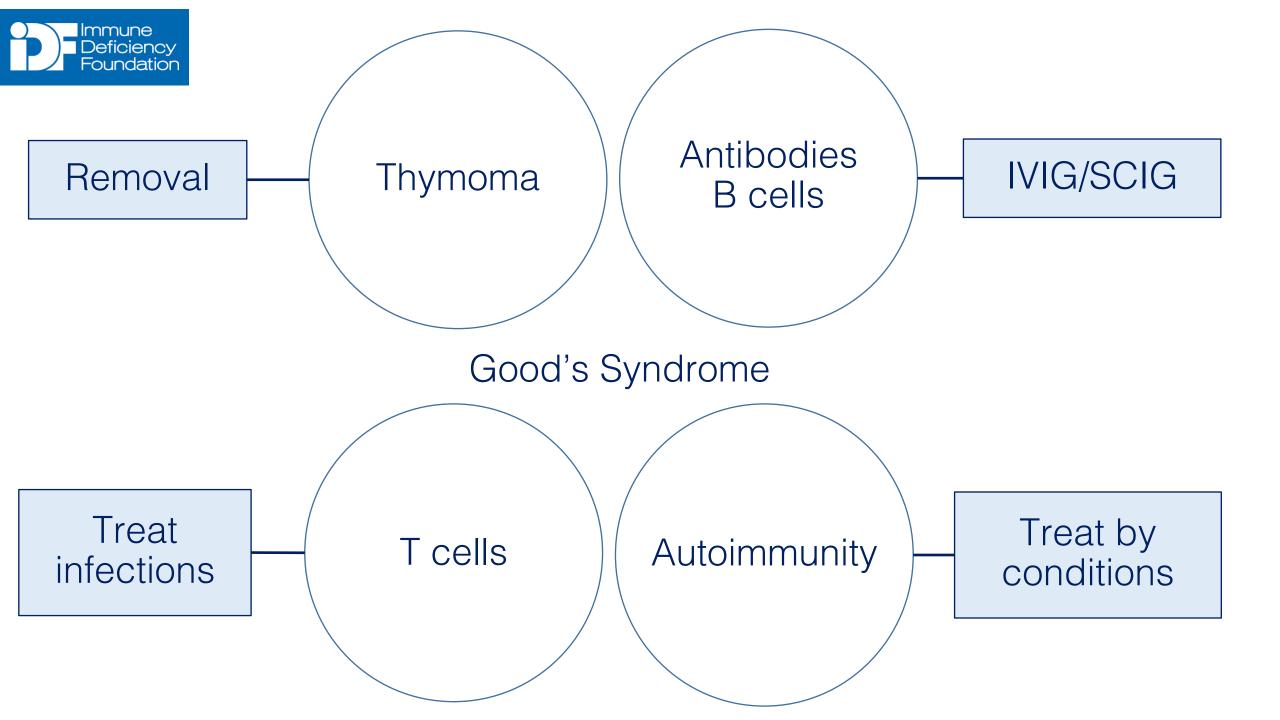
## Covid – general advice

- Vaccinations and masks
- Antiviral therapies can prevent progression to severe disease
  - Paxlovid® is currently approved under EUA
  - Works well if given within 5 days of symptoms onset
  - Ask your doctor and pharmacist to check for drug interactions
- The efficacy of monoclonal antibodies varies depending on the dominant covid variant
  - Check in with your immunologist on the most up-to-date information



## Good's Syndrome: Summary

- Good's syndrome is a rare, acquired immune deficiency
- Characterized by previous or current thymoma
- Low antibodies and B cells are characteristic. Removal of thymoma does not restore this.
- T cells can also be affected
- Symptoms include infections and autoimmunity causes of the immune defects are still under investigation





# IDF Lunch & Learn: Good's Syndrome Q & A

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