

Resources

GBS/CIDP Foundation of Canada

- Resources and information about Guillain-Barré syndrome
> www.gbscidp.ca

Guillain-Barré Syndrome

Halifax Infirmary (H.I.)

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here:
www.nshealth.ca/patient-education-resources

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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Learn more: <https://library.nshealth.ca/patient-education-resources>

- › Trouble swallowing. You may need to eat foods that are easier to swallow. In severe cases, you may need a feeding tube until you can eat on your own.
- › Constipation (not being able to poop). You may need laxatives and stool softeners (medications to help you poop).

Your health care team is here to support you and your loved ones. If you have questions, ask a member of your health care team.

Rehabilitation

- Rehabilitation helps you get back any skills or abilities you may have lost. Your rehabilitation will start while you are in the hospital.
 - › A **physiotherapist** will work with you to help you keep and build your muscle strength
 - › An **occupational therapist** will help you to go back to your usual activities (like bathing and dressing)
- You may need to stay at the Nova Scotia Rehabilitation and Arthritis Centre (NSRAC) for a short time. This is to make sure that you can do as much as possible on your own when you leave the hospital.

- **Plasmapheresis (also called a plasma exchange):**

- › We will use a needle to remove some of your blood.
- › We will take out the antibodies that are not working well or are attacking your immune system, and then return the blood to your body.

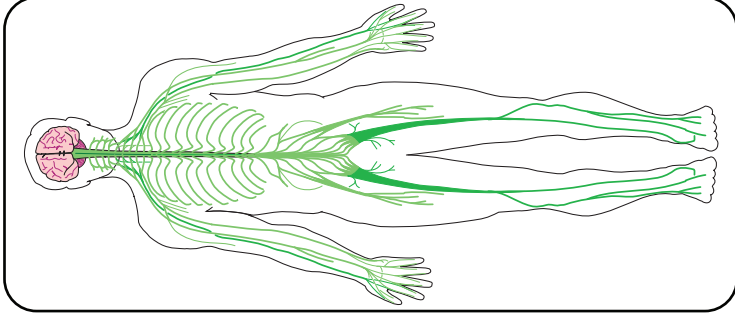
What will happen while I am in the hospital?

- Depending on how bad your disease is and how fast it progresses (gets worse), you may be admitted to the Neurology Unit or to the Intensive Care Unit (ICU).
- You may feel scared, anxious, or depressed. This is common. Your health care team will help you work through your feelings as you recover.
- Your symptoms may get worse before they get better. You will be checked for:
 - › Changes in your heart rate and blood pressure
 - › Paralysis. In severe cases, you may need a ventilator (a machine that breathes for you) until you can breathe on your own.
 - › Trouble peeing. You may have a catheter (thin, hollow tube) to drain urine (pee) from your bladder.

Guillain-Barré Syndrome

What is Guillain-Barré (“ghee-yan bar-ray”) Syndrome (GBS)?

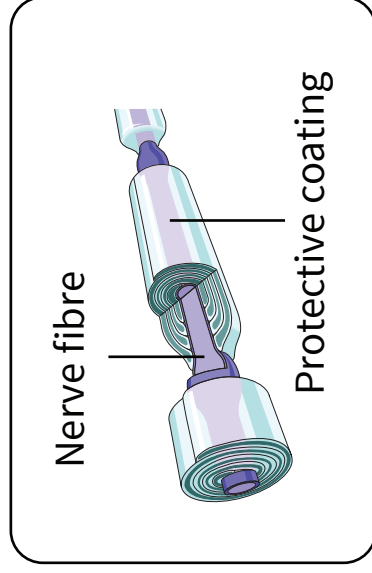
- GBS is a disease of the nervous system. It can cause mild weakness to severe (very bad) paralysis (not being able to move).
- Most people do not know about GBS until they or someone they know is diagnosed with it.
- You and your loved ones may feel scared or worried. This pamphlet will help you understand what is happening and what to expect in the hospital.



What causes GBS?

- The cause of GBS is not known. It often appears several days to weeks after a viral or bacterial infection.

- GBS causes your immune system to attack the protective covering around your nerve fibres. As the disease gets worse, your brain signals start to move along the nerves to your muscles more slowly. This causes muscle weakness that may lead to paralysis.



What are the symptoms of GBS?

- Symptoms can happen quickly over a few hours, or slowly over several weeks. They often start in the legs and move to the arms.
- The 1st symptom may be numbness on both sides of your body.
- You may have pain in your legs and lower back.
- You may feel short of breath or have trouble breathing if the muscles used for breathing are affected.

How is GBS diagnosed?

- Your primary health care provider (family doctor or nurse practitioner) will check for changes in your:
 - › Reflexes
 - › Sense of touch
 - › Muscle strength
- You may also have these tests:
 - › **Electromyography (EMG)** to check how well your brain signals are moving along your nerves.
 - › A **lumbar puncture** (sometimes called a spinal tap) to take a sample of your spinal fluid

How is GBS treated?

You may have 1 or both of the following treatments. Most people recover after having these treatments.

- **Intravenous immunoglobulin (IVIg):**
 - › IVIG is a blood product made up of donated antibodies. Antibodies help your body fight infections. IVIG helps your body fight infections when your own antibodies are not working well.
 - › IVIG treatment is usually given over 5 days. You may need to have IVIG treatment more than once.