Inclusion body myositis (IBM) is an acquired progressive inflammatory muscle disease that typically occurs over the age of 50 and affects more men than women. IBM causes a very slow progression of weakness most commonly beginning in the quadriceps muscles and finger flexor muscles. This can cause difficulty climbing up stairs or getting up out of chairs and gripping objects. Other muscles of the arms and legs can become involved later in the course. Swallowing problems can also arise. The diagnosis is made by detecting elevations of elevated muscle enzymes in the blood (creatine phosphokinase, i.e. CPK, or aldolase), abnormalities typical of a muscle disease on EMG/nerve conduction testing, magnetic resonance imaging (MRI) of muscle, and findings on muscle biopsy including inflammation and vacuoles (“inclusion bodies”) that distinguish this disease from other inflammatory myopathies such as polymyositis and dermatomyositis. Unfortunately, unlike other inflammatory myopathies, there is currently no definitive treatment for this disease, though patients can benefit from supportive therapies such as bracing and assistive devices as needed.