



Facial palsy

A quick guide for understanding facial palsy

It is important to understand what has happened to your face, why it has happened and what to expect from your recovery.

The term Facial Palsy, generally refers to weakness of the facial muscles, mainly resulting from temporary or permanent damage to the facial nerve or cranial nerve. There are different degrees of facial palsy.

Sometimes only the lower half of the face is affected. Sometimes the whole side of the face is affected. In rare cases, both sides of the faces can be affected.

It is estimated that 25-35 people have Facial Palsy for every 1, 00,000 in India.



Facial paralysis occurs when cranial nerve VII , also known as the facial nerve, is injured. The facial nerve is responsible for several functions in the face, including stimulating:

- The muscle responsible for motions in the face
- The gland responsible for producing tears
- The small muscle in the ear responsible for dampening certain noises
- The taste gland in the tongue

- Sensation in a small portion of the skin of the ear

Important note : Bell's palsy is the most common form of facial paralysis. Most people with Bell's palsy or facial palsy recover fully with treatment within 3-4 weeks. Remember there is no one-size-fits-all treatment for Bell's palsy.

Surgical procedures causing Facial palsy:

- Cosmetic procedures, such as facelifts
- Dental procedures
- Mastoid or parotid surgery
- Nerve blocks in the face
- Skull base surgery

Many conditions can produce isolated facial nerve palsy identical to Bell's palsy. Structural lesions in the ear or parotid gland (e.g., cholesteatoma, salivary tumors) can produce facial nerve compression and paralysis. Other causes of peripheral nerve palsies include Guillain-Barré syndrome, Lyme disease, otitis media, Ramsay Hunt syndrome (an outbreak of herpes zoster in the facial nerve distribution), sarcoidosis, and some influenza vaccines.



The different conditions and factors that may increase the risk of developing facial palsy:

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- diabetes

- high blood pressure
- pregnancy
- obesity
- preeclampsia, which can lead to high blood pressure during pregnancy
- being middle aged or an older adult, but with an average age of 40 years

Depending on the severity and the proximity of the nerve affected, it can also result in:

- Inability to close their eye (temporal and zygomatic branches)
- Hyperacusis (nerve to stapedius)
- Metallic taste (chorda tympani)
- Reduced lacrimation (greater petrosal nerve)

How can an ENT doctor help you?

It is not all bad news. Not all facial paralysis after procedures is permanent. Procedures in the area of the nerve will often cause temporary paralysis (neuropraxia) and recovery can be seen over several months.

The mainstay of pharmacologic therapy for Bell's palsy or facial nerve palsy is early, short-term oral steroid treatment. In severe, acute cases, combining antiviral therapy with steroids may improve outcomes. **Also, eye care is essential for patients with an incomplete eye closure.**

Patients with Bell's palsy should be treated within three days of the onset of symptoms with a seven-day course. The medicines will be prescribed by your ENT doctor. Patients may also be monitored for eye irritation and be prescribed eye lubrication. Physiotherapy is started to initiate muscle movements and forms an important part of the treatment.

Note: For anyone in any stage of recovery from facial palsy, it can be beneficial to attend a support group to help reduce isolation and benefit recovery

Treatment for facial palsy may also include surgery, depending on the cause, time

of onset, and severity. Surgical options include facial nerve decompression, grafting, and nerve crossover.

FACIAL EXERCISES



EXERCISES TO HELP CLOSE THE EYE



- Dr. Prashanth R Reddy

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