



Facial Palsy Service User Information Leaflet

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Issue No. 6.4.1.7 Date of Is		Review Date: Oct 2022 If review date has passed the content will apply until the next version is published
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Produced by Fife Musculoskeletal Physiotherapy Service

What is facial palsy?

Facial palsy is a weakness (paralysis) that affects the muscles of the face. It is sometimes also called a Bell's palsy. It is due to a problem with the facial nerve. The weakness usually affects one side of the face. Rarely, both sides are affected. There may be similar symptoms to a stroke, but facial palsy is very different to a stroke and full recovery occurs in most cases.

What is the facial nerve?

You have a facial nerve (seventh cranial nerve) on each side of your face. Each facial nerve comes out from your brain, through a small tunnel in your skull just under your ear. The nerve splits into many branches that supply the small muscles of the face. These muscles are used to smile, frown, close your eyelids and take taste sensation from your tongue to your brain.

Who gets facial palsy?

Anyone can get facial palsy, however it is more common in pregnant women, diabetics and patients with HIV. It most commonly occurs between the ages of 15-60 and affects approximately 5000 people a year. Facial palsy is the most common cause of a sudden facial weakness. About 1 in 70 people has a facial palsy at some stage in their life.

What causes facial palsy?

It is thought that inflammation develops around the facial nerve as it passes through the skull from the brain. The inflammation may compress (squash) the nerve as it passes through the skull. The nerve then partly, or fully, stops working until the inflammation goes. If the nerve stops working, the muscles that the nerve supplies also stop working. The cause of the inflammation is not known but, in most cases, it is probably due to a viral infection. Other less common causes can be from a fracture to the face, incident during a surgical procedure or a stroke.

What are the symptoms of facial palsy?

Weakness in the muscles of the face, normally develops quickly, over a few hours or so. The effects of the weakness vary, depending on whether the nerve is partially or fully affected. These include the following:

- Your face may droop to one side. When you smile, only half of your face may move.
- You may find it difficult to blink or close your eyes
- You may experience tingling of your tongue on the side that is affected.
- Chewing food on the affected side may be a problem. Food may get trapped between your gum and cheek. Drinks and saliva may escape from one side of your mouth.
- You may not be able to wrinkle your forehead, whistle or blow out your cheek.
- You may have some difficulties with speech, as the muscle in the side of the face help forming words.
- Most cases are painless or cause just a mild ache. However, some people develop some pain near the ear which can last for days.

• Loud sounds may be uncomfortable and normal noises may sound louder than usual.

How does facial palsy progress?

In most people the function of the nerve gradually returns to normal. Symptoms usually start to improve after 2 to 3 weeks, and have usually gone within two months. In some cases, it can take up to twelve months to recover fully. In some cases, symptoms do not completely go. Some slight weakness may remain for good. It is uncommon to have no improvement at all. A small number of people are left with some degree of permanent facial weakness.

How is it treated?

Steroid tablets.

A course of steroid tablets is usually given for about 10 days. The steroid tablet most commonly used is called Prednisolone. Steroids help to reduce inflammation which is probably the reason they help.

Antiviral drugs.

As most cases of the facial palsy are probably due to a viral infection, antiviral drugs may help. It is possible that taking a course of steroids plus a course of antiviral medicine may work a little better than taking steroids alone.

Eye protection.

If you cannot close your eyelids fully, your eye may become dry. Dryness could cause damage, so it is essential to keep the eye moist. Products to do so include following:

- Eye pad or goggles.
- Eye drops to lubricate during the day.
- Eye ointment for overnight.
- Tape, for taping the upper and lower eyelid together during the night.

Surgical options

- Botox injections
- Plastic surgery
- Suturing
- Grafting

Surgery is not needed in most cases of Bell's palsy as 90% of patients recover spontaneously

Exercises

Exercises can help encourage the facial muscles to work normally again. These should be started as soon as possible. At the start little movement may be seen, but you should keep trying until the movement comes back. See Appendix I at end of leaflet.

You can also find some useful exercise on the following website: <u>http://www.facialpalsy.org.uk/advice/self-help-videos/1454/</u>

Will it happen again?

In most cases, a facial palsy is a "one-off". About 1 in 10 people who have a facial palsy can have a further episode sometime in the future, often several years later.

Further help and information:

Facial Palsy Association Web: <u>www.bellspalsy.org.uk</u>

www.facialpalsy.org.uk/

Appendix I

Facial Exercises



Sit relaxed in front of a mirror



Gently raise eyebrows, you can help the movement with your fingers



Draw your eyebrows together, frown



Wrinkle up your nose



Take a deep breath through your nose, try and flare nostrils



Gently try and move corners of mouth outwards



Try and keep movement the same on each side of your face



You can use your fingers to help. Once in position take your fingers away and see if you can hold that smile



Lift one corner of the mouth

then the other

Exercises to Help Close the Eye



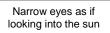
Look down

Gently place back of index finger on eyelid to keep the eye closed With opposite hand gently stretch eyebrow up working along the brow line. This will help relax the eyelid and stop it becoming stiff



Now try and gently press the eyelids together





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