ENThealth℠
POWERED BY AMERICAN ACADEMY OF OTOLARYNGOLOGY–HEAD AND NECK SURGERY

BELL'S PALSY

The facial nerve controls the muscles of your face, ears, the saliva glands in your mouth, as well as the tears in your eyes, and provides some of the sense of taste on your tongue. Bell's palsy occurs when the facial nerve is damaged by pressure or swelling and does not work properly, resulting in paralysis (weakness) and distortions of the face. Typically, a patient with Bell's palsy wakes up feeling normal, but is shocked when they look in the mirror and sees how one side of the face has changed.

WHAT ARE THE SYMPTOMS OF BELL'S PALSY?

Symptoms of Bell's palsy may include:

- Facial drooping or paralysis
- Drooling or a hard time swallowing
- Incomplete eyelid closure, which may lead to dry eyes
- Facial numbness
- Pain around the ears
- Loss of the sense of taste
- Sense of facial heaviness
- Altered speech

WHAT CAUSES BELL'S PALSY?

It is unknown what causes Bell's palsy, but it occurs when the facial nerve becomes injured, through no-known fault or action of the patient. The facial nerve is believed to have been squeezed or somehow swollen by an inflammation. We don't know why the facial nerve becomes weak, or why some people are more affected than others. Some studies have found that Bell's palsy may be related to a virus, or it could be a response by your body's immune system. It is more common in the 15- to 45-year-old age group. You are at increased risk for Bell's if you are pregnant, have severe preeclampsia, are obese, have high blood pressure, are diabetic, or have upper respiratory ailments.

WHAT ARE THE TREATMENT OPTIONS?

Several treatment options are available for Bell's palsy, and some patients will recover without seeking treatment. It is important, however, to seek medical attention to discuss a treatment plan and avoid misdiagnosis. Some people benefit from taking prescribed oral steroids, and it may help to get this treatment as soon as possible after the onset of facial weakness.

Your primary care provider, or ENT (ear, nose, and throat) specialist, or otolaryngologist, may prescribe antiviral drugs in addition to oral steroids. Other experimental treatments may include electronic nerve stimulation, electroneurography, hyperbaric therapy, or acupuncture. There is conflicting evidence about how well some surgical and experimental treatments work. Talk with your doctor about risks and potential side effects with any treatment.

One very important treatment consideration involves proper care of the eye if a paralyzed eyelid does not allow the lid to close. If the eye is left open, it dries out, which can injure the eye and lead to permanent vision loss. It is very important to moisten the eye by using eye ointment or eye drops. Wearing an eye patch or taping the eye shut may be other treatments recommended by your doctor, and referral to an eye doctor, or ophthalmologist, may be necessary.

Most patients recover at least to some degree. Studies show that facial function is completely restored in about 70 percent of Bell's palsy patients who have complete paralysis within six months, and as high as 94 percent of patients who have partial paralysis. Some patients recover quickly, and some patients may have some degree of long lasting paralysis.

Last reviewed August 2018. For more information, visit: www.ENThealth.org.

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If your condition does not improve over time, there are some procedures that can help reduce the effects of Bell's palsy. You should follow up with your doctor if your symptoms do not get better within three months, or if symptoms get worse. In some instances, patients withdraw socially due to cosmetic changes and may require psychologic support. That's why it's also very important that you monitor your mental health, and seek counseling or support if you feel overwhelmed by the way your face has changed. Websites that share Bell's palsy patient stories and pictures may also provide support.

WHAT QUESTIONS SHOULD I ASK MY DOCTOR?

1. At what point should I see an eye doctor?
2. If I don't get better after an initial treatment with steroids, when should I consider further treatment or more steroids?
3. Do antiviral therapies really work for Bell's palsy?
4. Are any tests available to predict recovery or outcome from Bell's palsy?

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