

CLINICAL PRACTICE GUIDELINES

PLAIN LANGUAGE SUMMARY:

Bell's palsy

BACKGROUND

This plain language summary serves as an overview in explaining Bell's palsy. Though the condition is uncommon, it is the most common facial nerve disorder. Bell's palsy affects both men and women across a wide range of ages. The information in this summary is based on the Clinical Practice Guideline of evidence-based research to help with a more efficient diagnosis and treatment of Bell's palsy.

WHAT IS BELL'S PALSY?

Bell's palsy is a condition that causes the facial nerve not to work resulting in paralysis and distortions of the face. The paralysis can appear as sagging, frozen expressions, frowns, droopiness, and other surprising looks. Some patients report a typical day of waking up and feeling normal, then being shocked when looking in the mirror and seeing how one side of their face has changed. In others, Bell's palsy takes several days or even longer to fully develop, before changes in the face stop. Bell's palsy occurs when the facial nerve is damaged by pressure or swelling. The facial nerve controls the muscles of the face, the ears, the saliva glands in the mouth and tears in the eyes, and provide some of the sense of taste on the tongue.

A person's facial paralysis or weakness may range from mild to severe. It may be difficult to smile or make facial expressions. Some people have a hard time eating or drinking due to the facial weakness. Other symptoms may include: facial numbness, drooling; pain around the ears, and loss of the sense of taste. Eyelids may not fully close. The face may feel heavy.

YOUR DIAGNOSIS/ HOW DO YOU KNOW IF YOU HAVE BELL'S PALSY?

Bell's palsy is diagnosed in several different ways. It is important that a doctor rule out other, *non*-Bell's conditions that may be causing the facial paralysis or other symptoms. Your doctor will review your symptoms and medical history to decide if conditions such as stroke, certain tumors, Lyme disease, infection, injury/trauma, or other disorders might be causing the paralysis. Your doctor will suggest proper testing and treatment after evaluation. Your doctor may refer you to a specialist.

What you can and should do: It is important to *quickly* seek medical attention after the onset of symptoms. Seeking quick medical care will help avoid misdiagnosis or delayed diagnosis and may improve your chances of treatment. If your eyelids are not fully closing, it is very important to hydrate the eye. You can use eye ointment or eye drops to avoid any long-term harm to your sight. You should also protect your eyes. With Bell's palsy, you are more prone to scratches of the cornea, which can be prevented by wearing an eye patch. If you are in pain, seek medical advice.

WHAT CAUSES BELL'S PALSY?

Bell's palsy has an unknown cause. Bell's palsy occurs when the facial nerve becomes damaged, through no-known-fault or action of the patient. The facial nerve is believed to have been squeezed or somehow swollen by an inflammation. There is no reason why the facial nerve becomes weak or why some people are more affected than others. Some studies have found that the Bell's palsy may be related to a virus or could be a response by your body's immune system. Bell's is more common in the 15 to 45 year age group. You are at increased risk for Bell's

if you are pregnant, have severe preeclampsia, are obese, have high blood pressure, diabetes, or upper respiratory ailments.

WHAT CAN YOU EXPECT? WILL YOUR SYMPTOMS GET WORSE?

The recovery time and the severity of symptoms will vary among individuals. However, most people affected by Bell's palsy will recover over a period of time. In some studies, facial function is completely restored in about 70 percent of Bell's palsy patients with complete paralysis within six months, and as high as 94 percent of patients with partial paralysis. Some patients will recover in as little as a few weeks or months. There are a few others who may have some degree of long lasting paralysis. Some patients experience different levels of severity of symptoms or additional paralysis. Bell's palsy symptoms may make some people want to limit their time with other people due to their face looking different or distorted. Other people may have symptoms that affect their speech, vision or hearing. Some people have reported feeling faint or dizzy, conditions that can interfere with their daily activities. Your doctor may refer you to a specialist for any new symptoms or if your condition worsens.

WHAT TREATMENT IS AVAILABLE?

Several treatment options are available to Bell's palsy patients. Some people will recover over time without seeking treatment. It is important to seek medical attention to discuss a treatment plan and avoid misdiagnosis. Some people benefit by taking prescribed oral steroids—and it may help to get this treatment soon after the onset of Bell's. In the past, doctors may have prescribed antiviral drugs. It is not recommended that Bell's palsy patients who are experiencing symptoms for the *first* time receive antiviral drugs alone. Doctors may prescribe antiviral drugs with oral steroids. Experimental treatments include electronic nerve stimulation where an electrical current is produced by a device to stimulate the facial nerve for muscle movement; electroneurography which measures how well your nerves transmit signals; hyperbaric therapy which administers high levels of oxygen; 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. For more details and technical information about the science—and lack of science—behind these different treatments, see http://www.entnet.org/content/clinical-practice-guidelines

WHAT ELSE CAN YOU DO?

If your condition does not improve over time, there are some procedures that can help reduce the effects of Bell's palsy. For instance, you can get specialized help with closing the eyelids. It is also very important that you watch your mental health and that you seek counseling or support if you feel overwhelmed by the way your face has changed. You should follow up with your doctor, should your symptoms not get better within three months or if symptoms worsen. Your doctor can review your past treatment and explore further options with you to help you treat your symptoms. Your doctor may refer you to a specialist to help with managing your symptoms. In today's world of social media, there are a number of websites with patients who are sharing life stories and pictures or videos of how they have coped—often with creative humor and good spirit—and how their condition has improved over time. We do not endorse any specific Bell's related website and some sites have bad information. However, you may find comfort in joining online support discussion forums. These online forums offer a place where you can learn and share with others with Bell's, who understand what you are going through. These sites can provide encouragement, useful coping tips, and hope.

About the AAO-HNS

The American Academy of Otolaryngology—Head and Neck Surgery (www.entnet.org), one of the oldest medical associations in the nation, represents about 12,000 physicians and allied health professionals who specialize in the diagnosis and treatment of disorders of the ears, nose, throat, and related structures of the head and neck. The Academy serves its members by facilitating the advancement of the science and art of medicine related to otolaryngology and by representing the specialty in governmental and socioeconomic issues. The AAO-HNS Foundation works to advance the art, science, and ethical practice of otolaryngology-head and neck surgery through education, research, and lifelong learning. The organization's vision: "Empowering otolaryngologist-head and neck surgeons to deliver the best patient care."