Bell’s palsy

Bell’s palsy is facial paralysis, normally affecting one side of the face - due to an injury to the facial nerve (the seventh cranial nerve.) For many people effects can improve after three months or so although for some people the symptoms can continue for longer and occasionally the effects never disappear completely. Many people suspect they have suffered a stroke when first faced with the effects of Bell’s palsy but a visit to the doctor can help alleviate these fears.

Who it affects

Bell’s palsy can affect men and women of any age although it is most common in 15 to 45-year-olds. In the UK it affects about one in 70 people at some point in their lifetime. The average age of onset is 40 years old.

Symptoms

Symptoms commonly include a drooping or sagging mouth, facial pain, drooling, loss of taste, inability to close the eye, resulting in a watery teary eye and the need to wear an eye patch. The symptoms of Bell’s palsy often come on very quickly, over a few hours or overnight. The weakness or paralysis usually affects one side of your face although it occasionally affects both sides.

The symptoms will vary depending on whether the nerve is partially or fully affected. Symptoms can include:

- facial pain around the ear on the affected side for a few days
- Muscle weakness in the face, causing it to droop on one side, or to affect your expressions such as smiling or frowning
- numbness in the affected side
- the eye on the affected side watering or becoming dry
- sometimes the eye not closing fully
- difficulty chewing food
- a loss of taste on one side of the tongue
- uncomfortable sensitivity to noise
• Difficulty speaking as clearly as usual.

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**Recovery**

Seventy five per cent of patients with Bell's palsy experience complete recovery, most within two to three weeks. An additional 15 per cent experience satisfactory recovery, but may have persistent facial asymmetry. Five to 10 per cent of patients have poor recovery at four months with persistent neurological impairment and cosmetic disfigurement.²

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**Causes**

It is presently thought that most cases of Bell’s palsy arise from the herpes simplex virus (the same one that gives you cold sores). However, there are a wide variety of other possibilities including diabetes, HIV infection, and various cancers. Occasionally Bell’s palsy can be the presenting symptom of MS, and this type of weakness can occur as a brainstem relapse in established MS. Your doctor should investigate any cause which needs further treatment.

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**Diagnosis**

Diagnosis is based on history, findings on physical examination, and the results of laboratory tests. An MRI scan will be performed if there is any possibility of a stroke or brain tumour.³

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**Treatment**

All patients with Bell’s palsy need to take precautions against drying of the eye on the side of facial weakness. This will generally include use of artificial tears during the day and use of a jelly which moisturises the eye at night.

Prednisolone (steroid) treatment is thought to speed recovery but it must be given within the first week of facial weakness, in order to be effective. A large trial showed that a dose of prednisolone 25mg twice a day for 10 days improved recovery.⁴

A leaflet is available from www.bellspalsy.org.uk detailing exercises that may be helpful. In people with severe impairments still present at least one year after onset, several surgical procedures are available to improve cosmetic appearance.

Before trying any treatment, speak to a health care professional. All potential treatments can have side effects and what suits one person may not help someone else.
References


2 Timothy, C. Hain, MD, The Department of Neurology, Northwestern, USA


Useful organisations and other information

www.bellspalsy.org.uk has online forums and chat rooms. The website also has information leaflets available for free download.

MS Society publications

The MS Society has publications on a wide variety of topics, including information for people newly diagnosed, types of MS, managing relapses, and social services. For a publications list and order form visit the website www.mssociety.org.uk or call 020 8438 0799. (Monday to Friday, 10am-3pm.

MS Helpline

The award winning MS Helpline offers confidential emotional support and information to anyone affected by MS, including family, friends, carers, newly diagnosed or those who have lived with the condition for many years. Information about MS is available in over 150 different languages by speaking to a Helpline worker via an interpreter. Call freephone 0808 800 8000 Monday to Friday, 9am-9pm, except bank holidays, or email helpline@mssociety.org.uk

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Suggestions for improvement in future editions are welcomed

Please send them to infoteam@mssociety.org.uk

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With thanks to Gavin Giovannoni and all the people affected by MS who contributed to this publication

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First edition, May 2008