

■ Bell's Palsy ■

Bell's palsy is a relatively common condition that causes weakness or temporary inability to move the muscles on one side of the face. Your child's mouth may droop on one side. If he or she has trouble closing the eye on the affected side, steps may be needed to protect it against drying out. Bell's palsy almost always clears up within a week or two, with no treatment needed.

What is Bell's palsy?

Bell's palsy is weakness of the muscles on one side of the face. The weakness is caused by damage to the facial nerve, which controls the muscles of the face. "Palsy" means paralysis, but this type of paralysis is almost always temporary.

Bell's palsy usually follows a recent infection with a virus. In 95% of cases, the muscle weakness clears up within a week or two. Usually no treatment is needed. Eye drops or sometimes an eye patch may be necessary to keep the eye from getting too dry.

What does it look like?

- Fairly sudden loss of movement on one side of your child's face. The loss of movement may be total but is more often partial.
- The entire half of the face is affected, from forehead to mouth. Your child's mouth may droop on one side. He or she may be unable to close one eye; because of this, tears may flow constantly from the eye.
- The facial feeling is normal; the face does not feel numb.
- Bell's palsy can occur at any age. It most often begins about 2 weeks after infection with some type of virus. The most common infection is with herpes simplex virus, which causes cold sores. However, the virus may not have caused any illness at the time.
- Your child may have loss of taste on one side of the tongue (this occurs in about one half of cases).

What causes Bell's palsy?

The cause isn't certain. Some type of immune reaction to recent infection with a virus (most often herpes simplex, the virus that causes cold sores) is probably involved. By the time Bell's palsy occurs, the infection is no longer present.

What are some possible complications of Bell's palsy?

- If your child can't close his or her eye completely, there is a chance that the eye (cornea) could be injured from drying out too much.
- A small minority of patients (5%) are left with permanent weakness of the facial muscles.
- Otherwise, there are few complications.

What increases your child's risk of Bell's palsy?

- There are no specific risk factors besides recent infection with a virus. Bell's palsy can occur at any age, from infancy to the teen years (adulthood as well).
- For newborns, the risk of Bell's palsy is higher if the delivery was difficult—especially if forceps had to be used to assist the birth. In this case, the cause of the palsy is trauma (pressure) caused by the forceps.

Can Bell's palsy be prevented?

There is no practical way to prevent Bell's palsy.

How is Bell's palsy treated?

- Usually, no treatment is needed. The condition clears up on its own within a week or two.
- Some doctors may prescribe oral steroids for this condition. They may also include an antiviral drug to treat the herpes simplex virus, since it is commonly associated with Bell's palsy.
- If your child cannot close his or her eyes or blink normally, steps may be needed to keep the eye from drying out. The doctor may prescribe special eye drops to protect the eye, especially at night. The eye also may be patched or taped shut.
- If tears are dripping from the eye, make sure your child has tissues to dry them! Keep your child from rubbing the eye as much as possible.
- Call our office if full facial motion has not returned within a few weeks. Additional tests may be needed if the condition continues for a longer time.

When should I call your office?

Call our office if your child doesn't recover full motion of the facial muscles within a few weeks.

