

Facial Palsy

Facial nerve.

Upper Part of Face → ① Two Upper Motor Neuron (contralateral, ipsilateral) + One lower Motor Neuron.

Lower Part of Face → one UMN + one LMN.

Facial Palsy → Upper Motor Neuron defect.

Bells Palsy → lower Motor Neuron defect.

Causes of Facial Palsy ② Bacteria

① Viruses → Epstein Barr, Herpes, Lyme Disease.

↓
Varicella

② Cold Varicella, Zoster.

Burgdorff

③ Diabetes, Immunosuppression, Hypertension and Pregnancy.

④ Cold Exposure. ⑤ Head injury - stroke, Encephalitis.

Cause of Bells Palsy: → Unknown.

Symptoms of Facial Palsy

① Facial palsy on the opposite side of the face.

② Only lower part of the face is involved.

↳ Angle of mouth is deviated to the normal side when the person is asked to show the teeth.

→ Nasolabial fold obliterated on the affected side.

→ Dysarthria (slurred speech).

→ Usually associated with ipsilateral hemiplegia.

→ Winking in Forehead, eye closure, Taste, Tearing are intact. Earine,

- Facial reflexes are brisk. Hyperacusis abn.
- Absence of Bell's Phenomenon.
- Sudden onset of symptoms within minutes.

PC/F of Bell's Palsy

- Involvement of one side of the face due to lesion on LMN.
- ① Angle of mouth deviated to opposite side.
- ② obliteration of the nasolabial fold.
- ③ Dysarthria (slurred speech)
- ④ Drooping of Eyelids, Excessive tearing.
- ⑤ Absence of wrinkling of forehead.
- ⑥ Taste of Anterior 2/3rd of tongue affected, Drooping of salivae. Dry mouth.
- ⑦ Hyperacusis → Painful hearing or unpleasant quality to louder sounds.
- ⑧ Bell's phenomenon Positive
 - ↳ w/ outward & upward movement of the eyeball when patient tries to close the eyes.

- ⑨ Facial reflexes are depressed and no. hemiparesis & other symptoms.
- ⑩ Sudden onset of symptoms within hours.

Management → Bell's palsy is self-limiting within 6 months. Rule out other causes.