What is Bell’s palsy?

Bell’s palsy is a condition in which there is paralysis of the muscles of the face, typically on one side. It is usually temporary - with most people making a full recovery within two to three months. It comes on suddenly, and the cause is unknown. The facial nerve (seventh cranial nerve) supplies the muscles in your face. In Bell’s palsy this nerve is affected, leading to weakness or paralysis of the muscles that control smiling, frowning, eating and closing of the eyelids. It can also affect your ability to taste. Bell’s palsy can affect men and women of any age although the highest incidence appears to be in 15-45 year olds. In the UK it affects approximately one in 70 people at some point in their lifetime.

What are the symptoms of Bell’s palsy?

The symptoms of Bell’s palsy often occur very quickly, over a few hours or overnight. The weakness or paralysis usually affects one side of your face.

**Possible symptoms of Bell’s palsy**

- Droopy eyelid, dry eye, or excessive tears
- Facial paralysis
- Twitching, or weakness
- Drooping corner of mouth, dry mouth, impaired taste

The symptoms will vary and may include:

- Facial pain around your ear on the affected side
- Drooping of the face on one side
- When you smile, only one side of the face may move, you may not be able to frown and speaking clearly may be difficult
- Difficulty closing your eye. It may not fully close and may water or become dry
- Difficulty when chewing food, you may dribble slightly
- Altered or loss of taste on one side of your tongue
- Sensitivity to noise. Noises may sound louder than usual which can be uncomfortable.
What causes Bell’s palsy?

The exact cause of Bell’s palsy is unknown. However, it is thought that in some cases a viral infection of the facial nerve causes it to become inflamed, which compresses the nerve until the inflammation goes down. There is some evidence that herpes simplex (the virus that causes cold sores) is often responsible. Other viral illnesses, such as mumps and rubella, may also be triggers.

Treatment

Medications – your GP may have prescribed you oral steroids (prednisolone). Steroids may help to reduce inflammation and decrease the likelihood of damage to nerve bundles. Antiviral medication may also be prescribed.

Eye care is very important if your eye is affected. If your eye does not close when blinking:

- The eye can dry up. You should use eye drops or artificial tears to keep the eye moist. Use artificial tear drops during the day and a thicker solution at night. Ask your GP or pharmacist for advice.
- The eye will not have the normal protection from the eye lid closing. It is important to protect the eye and avoid scratching the cornea (the thin, transparent layer covering the eye). You may be advised to wear protective glasses or an eye patch by day and to tape the affected eye lid closed at night. Tape such as micropore can be used for this.

Mouth care – as the facial muscle may not be functioning fully, food may become lodged around the teeth and gums on the effected side. Make sure you remember to clean this area well and remove all debris after eating.

Exercises can be useful to tone the facial muscles as the movement begins to return:

- Gently raise your eyebrows – you can help the movement with your fingers
- Wrinkle your nose
- Try and flare your nostrils
- Lift one corner of the mouth and then the other
- Smile without showing your teeth, then smile with showing your teeth
- Bring your eyebrows together in a frown

If you feel the exercises are making your symptoms worse, reduce the number or frequency of the exercises or seek advice

Approximately 80 percent of people who have Bell’s palsy start to improve within three weeks, and make a full recovery within two to three months. However, about five to 10 percent of people have some slight weakness which remains forever. Rarely there may be little or no improvement.