



# Health Facts

## Bell's palsy

Bell's palsy is usually a temporary one sided facial weakness, of acute onset, without a detectable underlying cause. Bell's palsy occurs in about 6 - 18 children out of every 100,000 each year.

Most children recover fully by 6 weeks, some take up to a year.

Weakness may initially worsen then stabilise before improvement. Around 1 in 10 children will get some continuing weakness or the nerve grows back to the wrong areas (resulting in facial twitching).

### Signs and symptoms

- Facial nerve paralysis or weakness – symptoms are generally on one side of the face only.
- Difficulty closing one eye
- Difficulty eating and drinking; food falls out of one side of the mouth
- Drooling due to lack of control over the muscles of the face
- Difficulty with speech
- Drooping of the face, such as the eyelid or corner of the mouth
- Problems smiling, grimacing, or making facial expressions
- Pain or discomfort around the jaw and behind the ear

Other symptoms that may occur:

- Dry eye, which may lead to eye sores or infections
- Dry mouth
- Headache
- Loss of sense of taste
- Sensitivity to sound that is louder in one ear (hyperacusis)

### Diagnosis

Bell's palsy is diagnosed by physically examining your child and by excluding other causes of facial weakness and paralysis.

### Management

- Most children will be able to be discharged home after review
- Bell's palsy in children often gets better spontaneously
- Management options available for your child will be discussed with you by your doctor.
- Progress of the condition will be monitored by doctors in the ED, the initial review visit will be in 2 weeks.
- Most children may need eye protection



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## Eye protection options:

- Option 1**     Viscotears or GelTears (both carbomer 980 0.2%) – 4x / day
- Option 2**     Genteal Gel (carbomer 980 0.2%, hypromellose 0.3%) or Refresh Liquigel (carmellose 1%) initially 4 x / day then reduce to 3 x / day when back at school – for ease of use.

### Ointment for night time until lid closure is complete

Lacrilube, Polyvisc or Ircal (all paraffin and wool fat)

### Severe lid laxity/redness

Lacrilube, Polyvisc or Ircal (all paraffin and wool fat) can be used 4 times per day

- Note**            If the eye becomes red (and fails to settle over a few days with increased lubricant) or the Bell's is not resolving as expected over 4-6 weeks then ophthalmology should be involved.

## Care at home

- Children with Bell's palsy can take simple analgesics for pain (paracetamol)
- Provide eye protection as per doctors instruction
- Photographs taken initially and with any changes can help with monitoring.

Capture photographs of:

- Face relaxed
- Wide smile
- Eyebrows raised
- Eyes tightly shut

## When to seek help

When your child is sent home you will be informed by the doctor to return to the Emergency Department for review in about two weeks.

You should return to hospital in the following circumstances:

- Red painful eye
- Continued progression of weakness after 48 hours
- Different or new symptoms
  - Headache
  - Vomiting
  - Temperature
  - Disturbed vision
  - Weakness or abnormal sensation in another area of body or affecting other areas of head and neck
- No improvement after 4-6 weeks

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