

Patient information from BMJ

Last published: Aug 13, 2020

Bell's palsy

If you wake up one morning and find that your face droops on one side, you may have Bell's palsy. This can be alarming, but most people recover completely.

We've looked at the best and most up-to-date research to produce this information. You can use it to talk to your doctor and decide which treatments are right for you.

What happens?

If you have Bell's palsy the muscles of your face suddenly become weak. It happens because a nerve sending messages from your brain to your face muscles stops working. It almost always happens on just one side of the face.

We don't know for certain what causes Bell's palsy. It may be caused by swelling around the nerve, caused by a virus.

Not everyone who has weak face muscles has Bell's palsy. Some people with similar symptoms have another condition, such as an injury, an ear disease, or a stroke.

Your doctor will check for other conditions. You won't be diagnosed with Bell's palsy until other problems have been ruled out. You might need some tests, such as an MRI scan or a CT scan, to rule out problems other than Bell's palsy.

Some people who have a stroke get weakness in the muscles of the face, but this is different from Bell's palsy. If you have a stroke, other parts of your body are usually affected, too.

What are the symptoms?

You might find that your face droops on one side and it's hard to close or open one eye. You may not be able to frown or smile properly and your speech may be slurred. Having less control over your mouth muscles might mean that you dribble saliva.

Some people get an ache behind their ear for a few days. Bell's palsy isn't usually painful, but you may find loud noises unpleasant. You may lose your sense of taste on the affected side of your tongue.

These things might make you feel anxious or self-conscious.

Bell's palsy

The symptoms come on quickly. They might get worse over two to three days.

Bell's palsy only affects the face. If you feel weak or numb in other parts of your body you should tell your doctor immediately.

What treatments work?

Most people recover from Bell's palsy within about six months, even without treatment. But treatment can help relieve the symptoms and help you recover more quickly.

Medicines

The main treatment for Bell's palsy is steroid tablets. These work by reducing the inflammation (swelling) around the affected nerve. They seem to work best if you take them within three days of your symptoms starting. You'll probably need to take the tablets for a week.

The full name for these medicines is **corticosteroids**. These are not the same as the anabolic steroids used by some bodybuilders. They are similar to natural chemicals made in your body that reduce inflammation.

Taking steroids for a long time at a high dose can cause side effects, including high blood pressure, diabetes, and thinning of the bones. But the short courses of steroids used to treat Bell's palsy are unlikely to cause these problems.

Doctors sometimes prescribe **antiviral tablets** alongside steroids. Antiviral tablets attack the virus that may be causing the problem. Antiviral drugs might help when used together with steroids, but they don't help when used on their own.

Antiviral medicines can have mild side effects. Some people feel sick and get diarrhoea.

Surgery

Surgery for Bell's palsy can help people to recover completely. But it is a complex operation that is only used for people with severe symptoms. For example, your doctor won't usually suggest surgery unless you have no movement at all on the affected side of your face, and if tests show that your facial muscles are badly affected.

Surgery involves removing part of the bone in the face as well as some other tissue. This gives the affected nerve room to swell so that other tissues are not pressing on it.

Eye protection

Many people with Bell's palsy find that they can't properly close the eye on the side of the face that is affected. This means that there is a danger the eye could become too dry. This can cause permanent damage.

There are several things you can do to avoid problems.

- Wear glasses or sunglasses during the day to protect the eye.

Bell's palsy

- Use eye drops called artificial tears to keep the eye moist. Use them as often as you need to.
- Your doctor may advise you to tape the eye closed at night while you sleep. He or she may also suggest an eye-lubrication ointment or gel to use while you sleep.
- You may need to have a small weight fitted into your eyelid to keep it closed. This is temporary and the weight will be removed when you have recovered.

What will happen to me?

Very few people get Bell's palsy more than once. So if you get what seems like a second episode, see your doctor.

You have a good chance of recovering completely from Bell's palsy. This means that you will regain all or most of the muscle control in your face. About 3 in 10 people are left with some muscle weakness.

About 2 in 10 people also get other long-term problems; for example, your face may look different because your face muscles have shortened. And parts of your face may move differently; for example, your chin may dimple when you blink. That happens when the nerve in the face grows back in a different way.

These problems can be distressing. You can talk to your doctor about further treatments. You may also find counselling helps you cope with changes to your face.

You're more likely to have long-term problems if:

- You have no movement at all in the affected side of your face
- You are older than 60
- You have high blood pressure or diabetes, or you're pregnant
- You haven't started to recover after six weeks.

Where to get more help

You might want to talk to other people who have Bell's palsy. There are various charities and support groups. For example, in the UK, the Bell's Palsy Association (bellspalsy.org.uk) is a charity that may be able to help.

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