Making Sense of Bell’s Palsy
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Bell’s palsy is a disorder that causes temporary weakness or paralysis of the facial muscles. This paralysis or weakness occurs on one side of the face, and often causes the face to droop on the affected side. The cause of Bell’s palsy is not entirely clear; however, experts believe it occurs when the 7th cranial nerve (the nerve that controls the facial muscles) becomes swollen and inflamed. Usually occurring without warning, Bell’s palsy can frighten both the person experiencing the facial paralysis and any friends or family nearby, especially since symptoms may resemble those of an acute ischemic stroke. Bell’s palsy typically affects one side of the face, but in rare cases, it has been known to affect the nerves on both sides.

Symptoms of Bell’s palsy may include…
- difficulty smiling, closing the affected eye, and making facial expressions.
- pain in the jaw or around the ear on the affected side.
- drooling and a decreased ability to taste.
- headache and increased sensitivity to sound on the affected side.
- changes in tear and saliva production.
- difficulty eating or drinking.
- impaired speech.

Bell’s palsy occurs more often in people who…
- are pregnant – typically during the third trimester or one week following delivery.
- have an upper respiratory infection, such as the flu or cold virus.
- have diabetes.

Bell’s palsy affects men and women equally. It can occur at any age, but most often between the ages of 15 and 60. Some cases of Bell’s palsy are very mild, typically resolving within a month, with or without treatment. In severe cases, symptoms may take up to six months to improve or may never fully disappear. In addition, more severe cases may cause irreversible damage to the facial nerve, partial or complete blindness in the affected eye, and involuntary contraction of certain muscles in the face (i.e., the affected eye simultaneous shuts when smiling). Moreover, there may be a genetic predisposition to Bell’s palsy in people who experience recurring attacks.
It is crucial to seek immediate medical attention if any form of paralysis occurs in order to rule out stroke. Bell’s palsy is not the result of a stroke, but only a doctor will be able to determine the underlying cause of facial weakness or paralysis. If Bell’s palsy is determined to be the culprit of the facial paralysis, corticosteroids are often prescribed in order to address the suspected swelling of the 7th cranial nerve.

Sources:
Bell's Palsy by the Mayo Clinic Staff retrieved 12/29/2016 from www.mayoclinic.org


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