

Periocular treatment improves eye comfort and quality of life for patients with facial paralysis

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Patients with facial paralysis who underwent surgical treatment for a condition that leaves them unable to completely close their eyes reported improvement in comfort around the eyes and overall quality of life, according to a report in the March issue of *Archives of Facial Plastic Surgery*.

The inability to close the eye can be a devastating result of facial paralysis. "The resulting loss of corneal protection can lead to exposure keratitis [inflammation of the cornea], corneal ulceration, and potentially permanently [vision loss](#)," the authors write as background information in the article. "Eyelid weight placement, lower eyelid suspension, and brow ptosis [drooping or sagging of the eyelid] correction are frequently performed to protect the eye."

Douglas K. Henstrom, M.D., of Harvard Medical School, Massachusetts Eye and Ear Infirmary, Boston, and colleagues measured and reported the change in quality of life (QOL) after surgical periocular treatment. The researchers used the Facial Clinimetric Evaluation (FaCE) scale – a patient-based system that measures impairment and disability in facial paralysis and represents a valuable adjunct to traditional physician-graded scales for evaluating QOL issues in patients affected by facial paralysis.

From March 2009 to May 2010, 49 patients with paralytic inability to

completely close the eye were treated at the Facial Nerve Center at Massachusetts Eye and Ear Infirmary, Boston. Thirty-seven of the patients completed preoperative and postoperative FaCE surveys.

"Overall QOL, measured by the FaCE instrument, significantly improved following static periocular treatment," the authors report. "Mean FaCE scores increased from 44.1 to 52.7."

"Patients also reported a significant decrease in the amount of time their eye felt dry, irritated, or scratchy," the authors write.

Two patients experienced localized cellulitis (a bacterial infection of the skin and tissues beneath the skin) in reaction to the eyelid weight. There was one eyelid weight extrusion.

"In the overall treatment paradigm for patients with [facial paralysis](#), treating the eye using this modality is simple, and not only improves corneal protection but also yields a significant subjective benefit," the authors conclude.

More information: Arch Facial Plast Surg. 2011;13[2]:125-128.

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