



Facial Palsy UK is a national charity for anyone affected by facial palsy, whatever the cause.

We have produced this guide to help explain the condition and how it may affect your child and your family.

If your child has been diagnosed with facial palsy it may be worrying and distressing. With the right treatment, information and support, it will be easier.

What is facial palsy?

Facial palsy can also be called facial paralysis. There are separate facial nerves on the right and left sides. Facial nerves control the muscles used for facial expression and function, so if a nerve is damaged or absent the muscle cannot move.

Facial palsy can be temporary or permanent depending on the cause.

There are different degrees of facial paralysis. This is because each facial nerve splits into five branches and one or more of these can be affected. The more nerve branches affected, the greater the extent of weakness in the face. This can range from weakness around the lower part of the face to the whole side of the face. In some cases both sides of the face are affected.

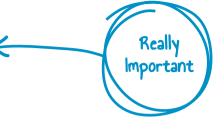
It's important to note that when a child is born with facial palsy, nothing that the mother has done during the pregnancy will have caused it and in the majority of cases a cause isn't found.

Helpline 0300 030 9333



What should I do?

If you think that your child has facial palsy, ask for help as soon as possible from your midwife, health worker or GP.



What are the symptoms?

There are many different causes of facial palsy, sometimes it occurs on its own and sometimes it is a part of another condition.

You may notice that your infant is unable to blink or doesn't close their eye when they are asleep. This can result in them having either a very watery eye or a dry eye. Painful dry eyes sometimes produce excess tears to combat irritation. You may also notice one side of your child's mouth doesn't move when they are crying or smiling. There may be obvious drooping of the face. Both sides of the face are sometimes affected.

This is the same for older children, but they will be able to describe what is happening and tell you about problems. These may include eyes watering or feeling dry, difficulty speaking clearly and issues with drooling when eating or drinking.



How is a diagnosis made?

Taking a history

This involves asking questions about what led up to the paralysis, any other health problems and details about parents' health.

A physical examination

This will involve a detailed examination of your child's face to check how each of the facial muscles are working. An examination of the other facial nerves will also be done. Further physical examination will be conducted depending on what the potential cause for the facial palsy is thought to be.

Tests

If the cause of the facial palsy is not clear from the history and examination, your doctor may recommend performing some tests. These may include scans to check the facial nerve and special tests to check the function of the facial nerve and the facial muscles.

These tests are not routinely used but may be included if there is no improvement in the condition after three weeks and no other cause has been found.

What is the treatment?

Specialist referral should be made when a diagnosis has been confirmed. The specialist will talk to you about simple and more complicated treatment options for your child.

Management of the condition

Eye care

If your child's eye does not close fully, eye care is very important to prevent damage to the cornea (the clear covering over the front of the eye). If you have not been given a prescription for eye drops, contact your GP and ask for drops for use during the day and ointment for use at night. If drops are used more than 4 times a day over a long period, they should be preservative-free. If a young child rubs the eye it may be a sign that it is uncomfortable

Find more info about eye care at: facialpalsy.org.uk/dry-eye-advice/

You may need to tape the eye at night if it does not close fully. Find out how to do this here:

facialpalsy.org.uk/tape-eyes-closed-children/

Beware of anything that may get in the eyes: e.g. shampoo, wind, sand, smoke, pet hair, glitter and snow.

Free NHS-funded sight tests and optical vouchers are available for children under the age of 16. An ophthalmic practitioner will be able to organise a sight test and, even if there is no prescription necessary, can recommend the use of glasses for wind/smoke/dust protection.

Some people find it more comfortable to wear an eye mask at night.

It is a good idea for your child to wear sunglasses to avoid damage if unable to squint against the sun. Goggles should be used for swimming.

Dental care

Facial palsy can make it more difficult to brush your teeth and food can collect in the cheek. It's important to clean teeth regularly to prevent decay. Some children struggle to open their mouth wide at the dentist.

GET HELP & SUPPORT Facial Palsy UK Helpline: 0300 030 9333





Management of the condition

Babies

Feeding may be difficult because your baby is unable to purse his/her lips to form a seal around the breast or bottle. Ask your GP or health visitor for a referral to a lactation or feeding consultant if you are worried about this.

Babies may benefit from soft mittens to prevent them scratching the affected eye(s).

All babies will have their eyes checked at birth and again at about six weeks of age by a GP or health visitor. If you have concerns about any aspect of your child's development it is important to mention this; the health visitor is there to make this stage easier for you.

Weaning & early years

If you have noticed any problems with sucking, seek advice about what solid foods are suitable for your child. Some foods may present a choking hazard. This is more

common where the facial palsy is due to Moebius syndrome.

Important

Speech and language therapists treat problems with swallowing and feeding as well as speech.

Young children

Some children (but not all) may have difficulty forming words. Your GP or specialist will be able to make a referral to a speech and language therapist.

Chewing may be difficult so softer foods may be preferred.

Management of the condition

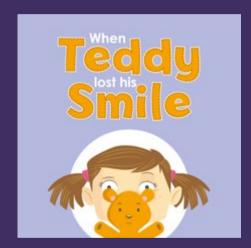
Psychological care

Children tend to become aware of their facial palsy by around the age of seven years. From this time onwards facial palsy can lead to self-consciousness and anxiety in some children, especially when meeting new people. This can be a challenge when moving between schools or joining clubs as new people may comment, ask questions or stare.

When children begin to ask questions about their face it is helpful to give them some simple responses and facts about the condition, which they can also use to answer questions from peers. You can practise these responses when you are with them.

A Starting School information leaflet is available on our website:

facialpalsy.org.uk/young-children/



A children's book is also available called 'When Teddy Lost His Smile', aimed at the 3-7 years age group:

facialpalsy.org.uk/book-children-facial-palsy/

Meeting other children with facial palsy can help normalise the condition for those affected and reduce feelings of isolation. If your child does become self-conscious or distressed in any way, encourage them to remember that everyone is unique and focus instead on their strengths.

Ideally, children should be involved in decisions about their treatment. For younger children this may not be possible, but always try to give them an element of choice if you can. For example, when to have treatment, which toy they would like to take to the hospital or a treat they might like afterwards

Studies show that teenagers usually want to blend in and are very sensitive to the feedback they get from their friends and social groups. Research shows that the noticeability of the facial paralysis does not equate with the level of anxiety felt, so, for example, someone with a very obvious facial palsy may be much less troubled than someone with a mild facial palsy. Developing confidence in their own personality and identity and empowering the child to speak openly about facial palsy are key.

Many schools and colleges provide a counselling service or have access to a counsellor. Counselling has been shown to reduce psychological distress in the short term and to help young people move towards their personal goals.

Facial Palsy UK support

Facial Palsy UK's mission is for every person in the UK affected by facial palsy to have access to the best information, treatment and support available.

Helpline: 0300 030 9333

E-mail: support@facialpalsy.org.uk

Website: www.facialpalsy.org.uk

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Please contact Facial Palsy UK

Facial Palsy UK services

Further information is available on the website for people affected by facial palsy and health professionals. This includes personal stories, information about family days, raising awareness and research.

Facial Palsy UK's Family Days are a relaxing and fun day for children affected by facial palsy, their siblings and parental guardians. The aim of these days is to reduce isolation for children affected by facial palsy and their parents.

Facial Palsy UK Parents and Carers Facebook Group – a safe place for parents and carers of children with facial palsy to come together and gain mutual support:

https://www.facebook.com/groups/FPUKParentsandCarers/

Front Cover - Child with Bell's palsy

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Support Facial Palsy UK

We need your help to raise awareness about facial palsy, fund research into its causes and treatments and support people living with facial paralysis and their families. To make a difference donate online at:

www.facialpalsy.org.uk/donate

Or text FPUK25 £3 to 70070

to donate to Facial Palsy UK with JustTextGiving by Vodafone. Please remember to ask permission from the bill payer.