Eye Care in Facial Paralysis

Background

Facial paralysis occurs when some of the muscles of the face are either weak or paralyzed. There are many causes such as Bell’s palsy, stroke, infections, trauma, surgery, and some types of tumors. Your doctor will help find the cause and may start certain types of treatment. All types of upper facial nerve weakness may also affect your ability to close your eyelids. Without taking steps to protect the exposed eye, this could lead to permanent damage.

It is important that the eyelids close completely when sleeping and blinking. Major drying of the eye can cause decreased vision, infection, scarring, loss of sight, and loss of the eye in extreme cases. It is very important to use eye protection when the eye cannot close.

Incomplete Eyelid Closure

Incomplete eyelid closure can result when the upper eyelid does not blink properly or when the lower eyelid does not make a tight seal with the eye. Facial paralysis may also decrease tear production. Any of these can lead to severe drying of the eye.

Signs of Eye Irritation

- Burning
- Watering
- Decreased vision
- Sensitivity to light
- Eye pain

Treatment

All patients with incomplete eye closure should lubricate the surface of the eye. You can apply Genteval® gel, an over the counter mild lubricant, to the eye 4-6 times per day and at night. For better lubrication, we suggest a thicker eye ointment such as Lacrilube® or Refresh PM® (over the counter).

Ointments are good at adding moisture to the eye but can cause some blurry vision. Eye drops usually do not cause blurring of the eye. You will need to use eye drops more often because they add moisture only for a short time. Lubricating eye drops generally do not work as well as ointments, especially at night. If you are still having problems with eye irritation, light sensitivity, or decreased vision after using eye lubricant see your eye care doctor.
Your doctor may suggest a moisture chamber, eye patching, or taping of the eyelids, especially when sleeping. You should only use these while working with your doctor to avoid an injury to the eye. You may also use sunglasses to protect the eye from wind or dust when outside.

If you have incomplete eye closure and none of these treatments work, your doctor may give other options. These may include:

- A short-term suture to keep your upper and lower eyelids together for a few weeks to protect the eye.
- A procedure to insert a gold or platinum weight into your upper eyelid to help with eye closure. The weight can be taken out at a later time. Placement of an eyelid weight is usually used with facial paralysis where the chance of recovery is poor, or when it is very hard to close the eye.
- Eyelid surgery to improve the position and support of the lower lid.

You should see your doctor right away if you have any new symptoms of facial weakness.

**Contact Us**

To make an appointment with UW Health General Ophthalmology or Optometry call (608) 263-7171. [http://www.uwhealth.org/eyecare/eye-care-services-ophthalmology/10776](http://www.uwhealth.org/eyecare/eye-care-services-ophthalmology/10776)

If your facial paralysis lasts for more than three months, you may ask your doctor for a referral for the UW Facial Nerve Clinic. For more information on facial paralysis or to request an appointment call (608) 263-6190 or visit our website at [http://www.uwhealth.org/facialnerve](http://www.uwhealth.org/facialnerve).

Our team of doctors at UW Health looks forward to helping you with the many challenges of facial paralysis.

**Scott R. Chaiet, MD**  
Division of Otolaryngology,  
Department of Surgery

**Mark J. Lucarelli, MD, FACS**  
Oculoplastic Surgery,  
Department of Ophthalmology