

## Neurology Clinic: Bell's Palsy Pathway

The intent of this pathway is to support Bell's Palsy management in the Primary Care Setting

<b>Inclusion:</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Subacute unilateral facial weakness involving both the upper (forehead elevation and/or eyelid closure) and lower face</li> <li><input type="checkbox"/> There may be mild ipsilateral peri-auricular pain or discomfort, hyperacusis, and/or a change in sense of taste</li> </ul>
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Weakness sparing forehead elevation and/or eyelid closure</li> <li><input type="checkbox"/> Non facial nerve-related focal neurological deficits</li> <li><input type="checkbox"/> Bilateral facial weakness</li> <li><input type="checkbox"/> Fever or other constitutional signs</li> </ul>
<b>If exclusions or other atypical features present, consider:</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Advanced neuroimaging</li> <li><input type="checkbox"/> Additional laboratory investigations</li> <li><input type="checkbox"/> Cerebrospinal fluid analysis</li> <li><input type="checkbox"/> Neurological consultation</li> </ul>

### Management:

- Initiate prednisone (60 mg daily for 7 days).
- Add valacyclovir (1000 mg 3 times per day for 7 days) if severe weakness and presenting within 72 hours or vesicles present in the external auditory canal.
- Advise follow up with a primary care provider . A neurology referral is not required for Bell's palsy unless there are exclusions or other atypical features.
- Counsel eye protection (tape eye closed at night, application of artificial tears 4 times per day to as often as every hour). A lubricating ointment at night is also suggested.
- Consider physiotherapy referral if moderate or severe weakness and slow recovery.
- If no motor recovery by 3 months, arrange an MRI brain with contrast.
- If progressive worsening or new neurological symptoms, arrange an MRI brain with contrast and consider neurology referral.
- For disabling residual weakness, synkinesis or contracture, refer to St. Paul's facial nerve clinic or a local plastic surgeon with relevant expertise.

If there are concerns beyond those addressed in this pathway, contact a Neurologist on call via hospital switchboard or the RACE app+ at 604-696-2131 or toll-free at 1-877-696-2131 or online at

[www.raceapp.ca](http://www.raceapp.ca)