

# **CLINICAL STUDY OF ETIOPATHOGENESIS AND MANAGEMENT OF FACIAL NERVE PALSY**

## **ABSTRACT**

## **INTRODUCTION**

Facial nerve dysfunction causes physical, functional, and psychological impact on quality of life. So early evaluation and management is needed. This study was designed to know about various etiological factors and also to analyse outcome of medical and surgical intervention.

## **MATERIALS AND METHODS**

A total of 40 cases were included. Detailed history, E.N.T, Head and Neck Examination, Pure Tone Audiometry and Imaging studies were done for all patients. Surgery has done to whom it is indicated. All patients were followed up to 6 months.

## **RESULTS**

Most common etiology was trauma(55%). Among the 40,19 cases underwent Facial Nerve Decompression. 22 cases were managed conservatively. After surgery out of 19, 18 cases were improved to Grade I from Grade IV palsy.

## **CONCLUSION**

In Traumatic Facial Palsy Facial Nerve Decompression gives complete recovery even in patients with Grade IV palsy. In Chronic Suppurative Otitis Media patient without cholesteatoma and shorter duration of facial palsy gives good prognosis than patient with cholesteatoma and longer duration of facial palsy. In Tuberculous Otitis media recovery of facial palsy is possible after completion of Anti Tuberculous Treatment. In Malignant Otitis Externa Facial Palsy can improve after glycemic control and medical management. In some patients debridement is needed. In Herpes Zoster Oticus prognosis of Facial Nerve recovery is poor.

## **KEY WORDS**

Facial Nerve Palsy, Facial Nerve Decompression,