

Posttraumatic facial nerve palsy

Post-traumatic facial nerve palsy (paresis nervi facialis posttraumatica) can be unilateral or bilateral. Traumas affecting the course of the nerve are most often fractures of the skull bones or soft tissue injuries in the area of the parotid gland.

They can cause unilateral paresis of the facial nerve

- fracture of the pyramid of the temporal bone;
- injury to the distal part of the nerve in the area of the foramen stylomastoideum (stab wounds);
- injuries in the parotid area (cutting injuries).

Types of nerve damage

1. complete paresis in distal soft tissue nerve injuries;
2. deficit of the facial nerve with a transverse fracture of the pyramid of the temporal bone, which is perpendicular to the external auditory canal and passes through the cochlea and the channel of the facial nerve;
3. longitudinal fractures of the pyramid of the temporal bone (which are more common than transverse) do not injure the facial or vestibulocochlear nerve, but the auditory ossicles may be damaged.

Treatment options

- application of corticoids and vitamins (B₁, B₆, B₁₂);
- surgical procedure:
 - simple decompression of the bony channel of the nerve, if the nerve is preserved and only compressed by the fracture;
 - microsuture of the nerve end to end or anastomosis of the nerve behind the graft;
 - if the facial nerve cannot be reconstructed, a crossed anastomosis XII can be used. and VII. nerve or resuscitation techniques (active or passive suspension of the corner of the mouth, adjustment).

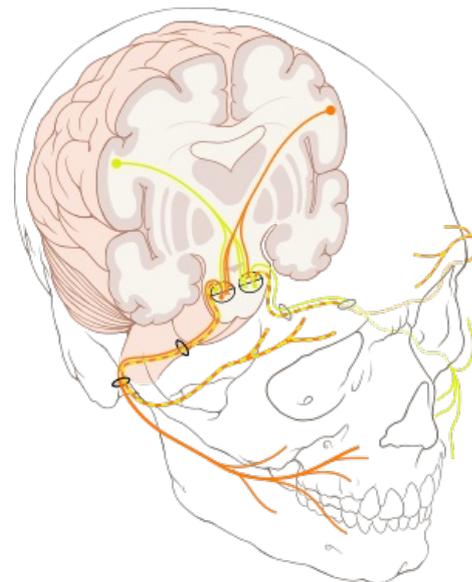
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Related articles

- Syndroma canalis carpi
- Cubital tunnel syndrome
- Canalis Guyoni syndrome
- Rarer strait syndromes
- Syndromes of chronic compression (entrapment) of nerves, tumors of peripheral nerves
- Professional peripheral nerve damage

References

- SAMEŠ, M. *Neurochirurgie*. 1. edition. Jessenius Maxdorf, 2005. 127 pp. pp. 33-34. ISBN 80-7345-072-0.



The upper part of the face is innervated by both crossed and uncrossed fibers (yellow+orange) compared to the lower part, which is somatomotor innervated only by crossed fibers