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Case Report

Acupoint Injection of Obstinate Facial Paralysis: A Case Report

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Case report

Facial paralysis is a common condition and add its manifestations are Muscle paralysis, Angle of mouth askew, frontal stria disappearance and difficulty in eye closing on the affected side of the face [1,2]. According to the injury site, facial paralysis is divided into peripheral type and central type. Facial paralysis can be caused by viral or bacterial infections, benign or malignant tumors of the head or neck and traumatic facial paralysis [3]. Conventional treatments are medicine, massage, physiotherapy and acupuncture [4]. Intractable facial paralysis is delayed and wrongly treated for more than three months without significant improvement in symptoms. The prognosis of each condition varies greatly [5]. On the basis of comprehensive treatment drugs are injected into acupuncture points. The treatment could last for three months with satisfactory results.

We report the case of a 63-year-old man with left-sided facial paralysis who was treated during his hospitalization. Six months ago, his right side of the face was paralyzed, and the symptoms disappeared after the treatment in the People's Hospital. But three months ago, he developed facial paralysis on left side while his brain Magnetic Resonance (MRI) and Electromyography (EMG) were normal. He received intravenous infusion medication for one week, acupuncture treatment for three weeks in the people's hospital, but the treatment was ineffective. Then he came to the Rehabilitation Medicine Department of Jiangning Hospital of Traditional Chinese Medicine. He felt anxious, disappointed and helpless. His left muscle was paralyzed, the corners of his mouth were crooked, his forehead lines disappeared, and he could not close his eyes on the affected side. His



Figure 1: Photograph of the patient with Obstinate facial paralysis to Acupoint injection treatment, showing loss of eyebrow raise on the left side.

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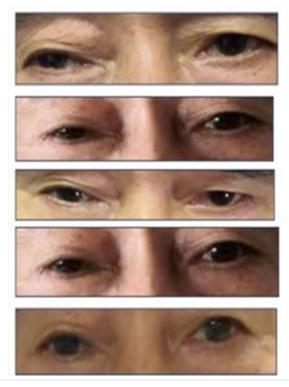


Figure 2: Photograph of the patient with Obstinate facial paralysis to Acupoint injection treatment, showing loss of eyelid raise on the left side.



Figure 3: Photograph of the patient with Obstinate facial paralysis to Acupoint injection treatment, showing loss of lips raise on the left side.

tongue was pale with a white coating. His pulse was thin. Acupuncture was performed on ST2, ST4, ST6, ST36 of the stomach meridian of Foot Yangming, BL1 and BL2 of the bladder meridian of Foot Taiyang, and SJ23 of the Sanjiao meridian of Hand Shaoyang respectively. These traditional acupoints were selected based on published clinical case reports and systematic reviews of acupuncture in patients with ophthalmic diseases [6,7]. All acupoints were injected with physiological salt solution (0.9% NaCl). Acupuncture was performed twice a week for 8 weeks.

After 8 sessions, the patient's upper eyelid levator muscle activity improved, the upper eyelid was normal, and no further fatigue and dizziness. The before and after photos are shown in Figure 1, Figure 2, Figure 3, and Figure 4, respectively.



Figure 4: Photograph of the patient with Obstinate facial paralysis to Acupoint injection treatment, showing loss of nasolabial fold raise on the left side.

We found that acupoint injection improved the long-term sequelae of facial paralysis. This case report provides strong support for the use of acupoint injection in cases of subacute and chronic paralysis for which other treatment modalities have failed. Acupoint injection is a quick, non-invasive and painless method that is easy for physicians to operate and easy for patients to accept. These features, combined with the safety of acupoint injection, make it a promising adjunctive therapy for chronic facial paralysis. Significant improvement in this condition requires large prospective studies to confirm our findings.

Declarations

Conflicting interests: The author declared no potential conflicts of interest with respect to the research, authorship, and/ or publication of this article.

Ethical approval: Our institution does not require ethical approval for reporting individual cases or case series.

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