

The unseen burden of non-flaccid facial paralysis: patient-reported psychosocial impact & treatment experience

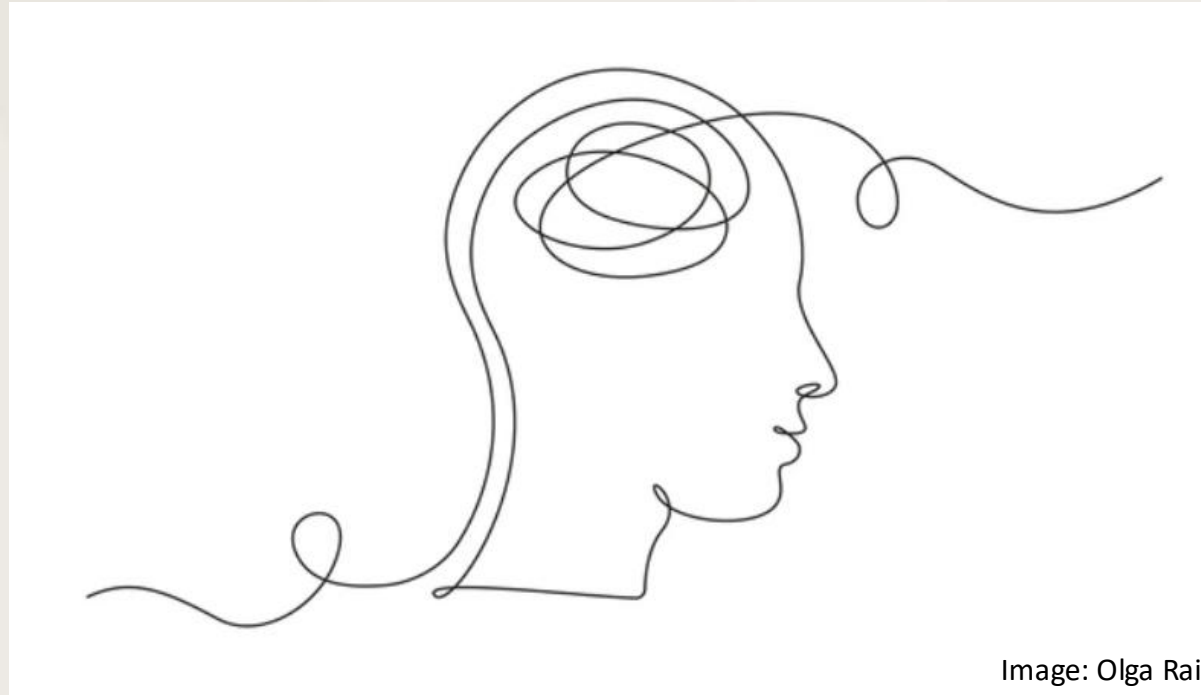


Image: Olga Rai

Kelly Vittetoe, MD

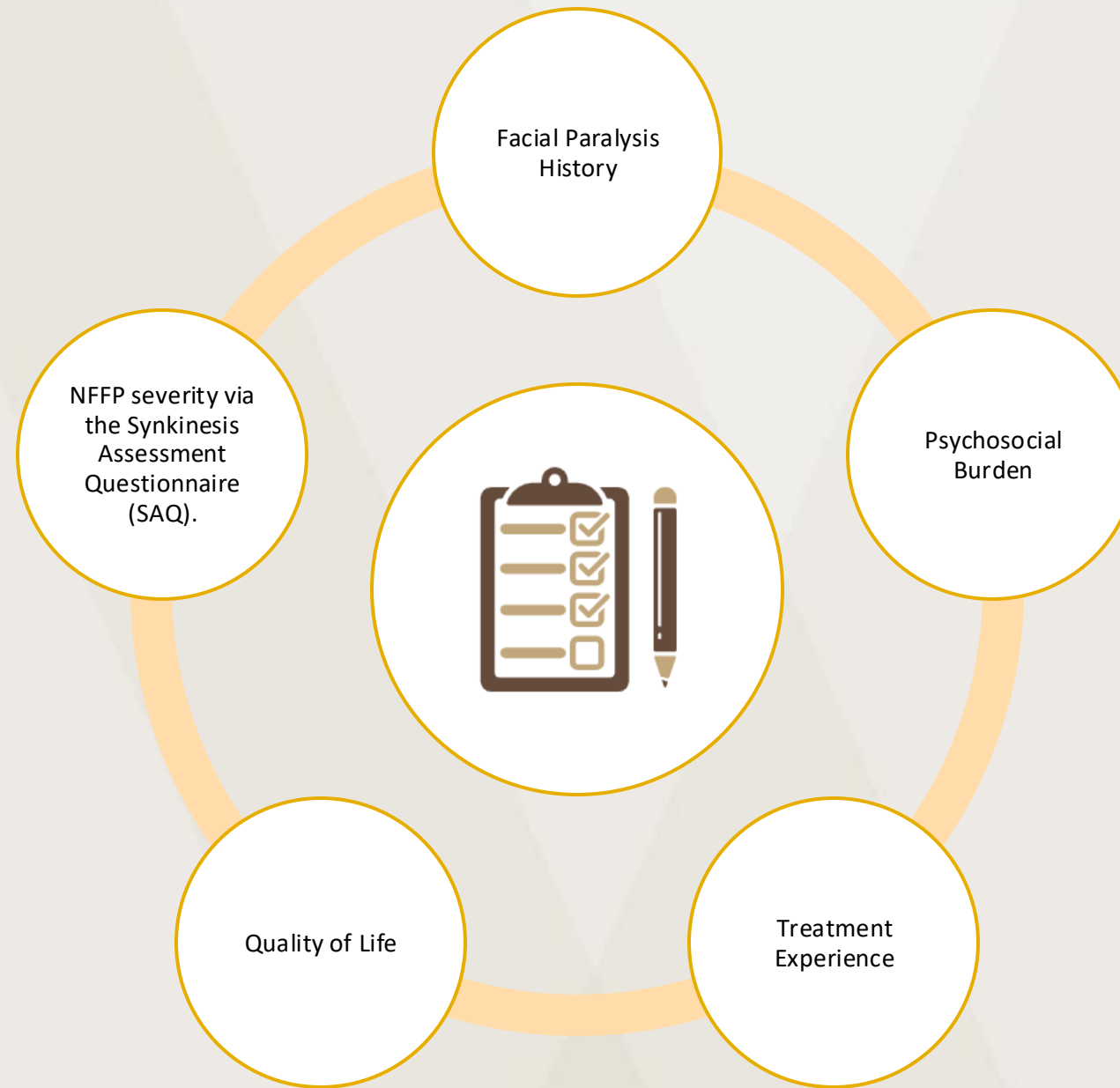
Introduction

Non-flaccid facial paralysis (NFFP) has both physical and psychosocial impacts.

Over 25% of patients with synkinesis met criteria for possible or probable depression in a prior study (DeSisto et al, 2024).

Objective: assess the psychosocial burden of NFFP and patient perspectives on treatment efficacy.

Methods



Results

Quality of Life

Psychosocial
Burden

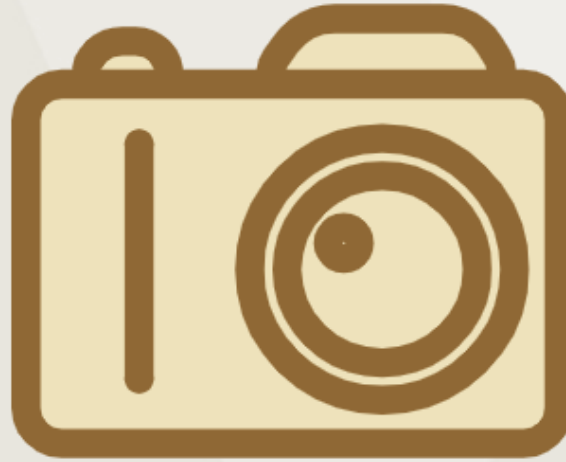


Results



62.8%

Stress worsens
severity of NFFP



94.7%

Dislike having
their photo taken



59.8%

NFFP at least sometimes
prevents socializing

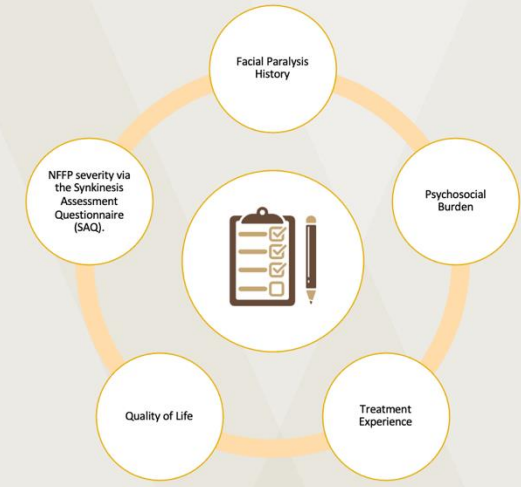
Results



Only 27.3% of patients with NFFP regularly see a mental health provider

- Patients who do regularly see a mental health provider are younger (43 vs. 55 years, $p < 0.001$)
- No difference in SAQ scores between patients who do receive mental healthcare and those who do not

Results



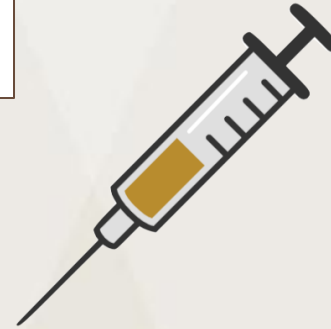
Results

78%

Chemodenervation reduced **self-consciousness** in 78% of patients

71%

Chemodenervation reduced **self-criticism** in 71% of patients



Among treated patients:

- **56.3%** would pay out of pocket for chemodenervation
- **92.6%** would continue treatment indefinitely

Conclusion



NFFP significantly impacts patients' self-image and social wellbeing



Mental health support remains underutilized in the NFFP population



Chemodenervation improves physical symptoms & emotional distress



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