

# Botox for Hemifacial Spasms

## What are Hemifacial Spasms?

Hemifacial spasms (HFS) is a neuromuscular disorder characterised by frequent involuntary contractions (*spasms*) of the muscles on one side of the face. The disorder occurs in both men and women, although it more frequently affects middle-aged or elderly women.

The first symptom is usually an intermittent twitching of the eyelid muscle that can lead to forced closure of the eye. The spasm may then gradually spread to involve the muscles of the lower face, which may cause the mouth to be pulled to one side. Eventually the spasms involve all the muscles on one side of the face almost continuously. Hemifacial spasms are most often caused by a blood vessel pressing on the facial nerve at the place where it exits the brainstem.

## What is the treatment for HFS?

Small doses of Botulinum Toxin Type A, or 'Botox', may be injected into muscles, causing temporary weakness or paralysis in the injected areas. In HFS, Botox may be injected into the affected muscles, and spasms may be blocked. The drug effect wears off after two to three months, and re-injections are then required to regain control of the spasms.

Botox is particularly effective for HFS involving only the small muscles around the eye. Spasm control is more difficult to obtain when the larger muscles of the lower face become involved. As the severity and extent of HFS progresses over time, the effectiveness of repeated Botox injections may diminish.

Possible side effects of Botox injections for HFS include drooping of the face, bruising, bags under the eye, and pain at the injection sites.

Repeated Botox injections may induce permanent weakness in the facial muscles. In rare instances, one may develop a resistance to the Botulinum toxin once their body has produced antibodies that render the toxin ineffective. This may occur when re-injections are performed over short intervals of time, or when high doses are used.

### Informed Consent:

I have read and understood the information detailed above. I consent to having Dr Sonia Moorthy perform Botox treatment for Hemifacial Spasms on myself.

Patient Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

