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Management of facial nerve palsy post parotidectomy

Facial nerve palsy is one of the potential complications resulting from the parotidectomy. The nerve may be injured during surgical manipulation or sacrificed because of tumour invasion. The post-operative facial asymmetry may be obvious. Patient has uncertainty over the function recovery and can result in social isolation, facial appearance concealment, anxiety, lower self-esteem and difficulty in communications using facial expressions. From physical functions point of view, there are brow ptosis, lagophthalmos, visual field disturbances, epiphora, conjunctivitis, and in the worst scenario, corneal exposure leading to blindness, breathing and eating difficulty secondary to chronic facial palsy. Thorough assessment, patient's needs and expectations evaluation and procedures prioritization are important in facial palsy management. Both surgical and non-surgical methods are complementary to each other in order to achieve satisfactory outcomes.

李中正

玛丽医院外科副顾问

腮腺切除术后面神经麻痹的处理

面瘫是腮腺切除术的潜在并发症之一。面神经可能会在手术操作过程中受伤或因肿瘤侵袭而被切除。术后面部不对称可能很明显。患者的面神经功能恢复存在不确定性，并可能导致社交孤立、面部外观遮掩、焦虑、自尊心下降以及面部表情交流困难。从生理机能上看，有眉毛下垂、眼睑下垂、视野遮挡、溢泪、结膜炎，以及最严重的情况为角膜暴露导致失明。继发于慢性面瘫的呼吸和进食困难。全面评估、患者的需求和期望评估以及程序优先级排序在面瘫管理中很重要。手术和非手术方法是相互补充的，以求达到满意的效果。