

## AAO-HNS issues guidance for Bell's palsy treatment during COVID-19

5 February 2021



for Bell's palsy. The broad underlying differential diagnosis should be considered as in all cases of facial paralysis, as per clinical practice guideline recommendations.

"At this time, there is insufficient evidence to conclude the existence of a causal relationship between vaccination against COVID-19 and Bell's palsy," according to the press release. "The U.S. Food and Drug Administration will continue

surveillance for cases of Bell's palsy as vaccination

of corticosteroids on the safety and efficacy of the Pfizer-BioNTech and Moderna vaccines is currently unknown, immunocompromising conditions and use of immunocompromising medications are not contraindications to vaccination. Corticosteroid

therapy and/or antiherpes viral therapy is recommended in unvaccinated patients who develop Bell's palsy. Patients may proceed with vaccination while being treated with corticosteroids

(HealthDay)—In a statement issued by the American Academy of Otolaryngology-Head and Neck Surgery, recommendations are presented for the treatment of Bell's palsy after COVID-19 vaccination and for unvaccinated patients.

More information: More Information

efforts continue."

C. W. David Chang, M.D., from the AAO-HNS
Patient Quality and Safety Improvement
Committee, and colleagues developed
recommendations to guide physicians on treatment
of patients who develop Bell's palsy shortly after
COVID-19 vaccination and unvaccinated patients
who develop Bell's palsy during the COVID-19
pandemic.

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The authors note that the overarching guidance remains timely access to and administration of vaccines against severe acute respiratory syndrome coronavirus 2, which is considered vital to curbing the COVID-19 pandemic. Corticosteroid therapy and/or antiherpes viral therapy is recommended for patients who develop Bell's palsy shortly after vaccination. Although the effect



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