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Postoperative functional evaluation of different reanimation techniques for facial nerve repair

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Abstract

Background

The facial nerve function after facial-facial nerve anastomosis, grafting, hypoglossal-facial nerve anastomosis, hypoglossal-facial interpositional jump nerve anastomosis, or a combined approach was analyzed.

Methods

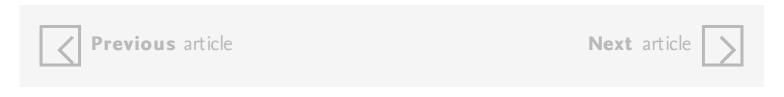
Facial function was assessed after operation using a 7-point visual analog scale (VAS) and by electromyography (EMG) in 53 patients. The final result was judged by May's facial nerve grading system.

Results

Voluntary EMG activity occurred on average 4.52 ű 1.31 months after operation. Initial facial movements were visible after 5.41 ű 1.80 months. Facial function related to the VAS finally reached 44% of normal value. The result was judged May's grade I in 13%, grade II in 34%, grade III in 28%, and grade IV in 25% of patients. A significant difference in outcome between different reconstruction types was not seen. Age over 60 years was related to worse outcome.

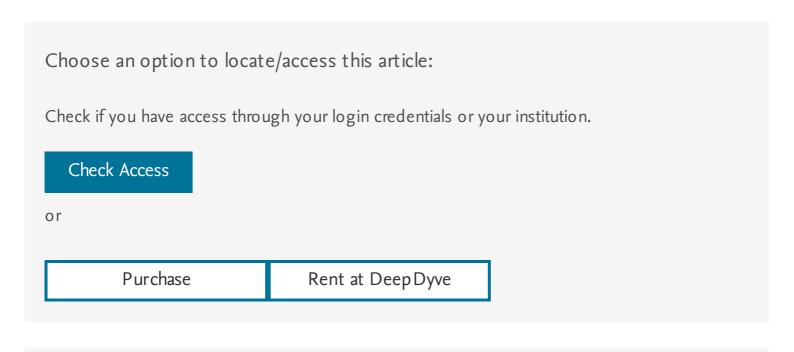
Conclusions

A correct selection of the best method in the individual situation presumed, all analyzed facial reanimation techniques seem to lead nearly similar and satisfactory results.



Keywords

Facial nerve; Facial paralysis; Nerve repair; Hypoglossal nerve; Nerve graft; Nerve anastomosis



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