

Botulinum toxin A injections for treatment of the facial muscle contractures due to Guillain-Barré syndrome: A case report

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INTRODUCTION:

Bifacial weakness with paresthesia is a rare subtype of Guillain-Barré syndrome (GBS).^{1 2} Generally, facial paralysis is transient³ and may recover completely with proper treatment.⁴ We describe a case of facial muscle contracture with synkinetic movement, resulting from GBS. Botulinum toxin A was effective to control these sequelae.

CASE PRESENTATION:

A 29-years-old female was referred to us with a bilateral facial muscle contracture at rest and synkinetic movement after treatment of GBS. The contracture was seen in the whole face including the forehead, glabella, eye, cheek, upper lip, and mentum region.

Botulinum toxin A was used to suppress the facial muscle contractures and control the synkinetic facial movement. Although complete recovery could not achieved, the injection was effective. Now the patient has been undergoing the injections repeatedly with no adverse effect.

CONCLUSION:

Facial muscle contracture due to GBS is well controlled by botulinum toxin A injections. However according to recovering of the facial functions, it is insufficient to treat only by botulinum toxin A injections.

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