Madison Neurology LLC: Compiled for Educational Purposes. Not for Clinical Use.

MADISON NEUROLOGY LLC

608 403 0000

Neurology Care 7 days a Week. Because Your Brain Matters.

Hemifacial Spasm

Patient education guide · Movement Disorders · Madison Neurology LLC

What is it?

Hemifacial spasm causes painless, involuntary twitching of the muscles on one side of the face — typically starting around the eye and gradually involving the cheek and mouth. The spasms are caused by a blood vessel pressing on the facial nerve where it exits the brainstem, making it misfire. It is benign but socially bothersome, and highly treatable.

How does it happen?

In most cases, an artery (sometimes a vein) loops against the facial nerve root, and the pulsatile pressure irritates the nerve into firing spontaneously. Rarely, a tumor or other lesion compresses the nerve — which is why MRI is performed at diagnosis.

Common symptoms

- Involuntary twitching starting around one eye
- Gradual spread to the cheek, mouth, and sometimes neck muscle on the same side
- Spasms triggered or worsened by stress, fatigue, talking, or smiling
- Spasms persisting even in sleep (unlike most movement disorders)
- Intermittent eye closure that can interfere with reading or driving when severe

How is it diagnosed?

Diagnosis is clinical — the one-sided pattern is unmistakable. An MRI with fine cuts through the nerve exit zone confirms the vessel contact and excludes rare compressive lesions. It must be distinguished from benign eyelid twitching (myokymia) and blepharospasm (which affects both eyes).

How is it treated?

Botulinum toxin (Botox) injections into the spasming muscles are first-line: highly effective, with relief lasting 3-4 months per treatment, repeatable indefinitely. For patients wanting a definitive fix, microvascular decompression surgery — placing a small cushion between the vessel and the nerve — cures the condition in about 85-90% of cases at experienced centers. Oral medications give modest benefit at best.

What does the future hold?

Botox controls the condition well for most patients over the long term, with excellent safety. Microvascular decompression offers a permanent cure for appropriate candidates. The condition does not spread beyond the face or lead to other neurological problems.

Questions patients commonly ask

Q: Is this a stroke or Bell's palsy?

A: No — it's overactivity of the facial nerve (not weakness), from vessel irritation; facial strength remains normal.

Q: Does Botox in the face change my expression?

A: The injections target the overactive muscles in small doses; a slight temporary asymmetry or lid droop is possible but usually minimal with an experienced injector.

Q: Is the surgery worth considering?

A: If Botox works well, many stay with it. If you want a cure and accept surgical risk, microvascular decompression has high success rates at experienced centers.

National support groups & resources

- **Facial Pain Association** — facepain.org
- **American Academy of Neurology — Brain & Life patient resources** — brainandlife.org
- **National Organization for Rare Disorders** — rarediseases.org — 1-800-999-6673

(Organization contact details were current at the time of compilation; please verify online.)

Disclaimer — please read

This material is provided by Madison Neurology LLC for general educational purposes only. It is not medical advice, is not a substitute for the independent judgment of a qualified healthcare professional, and does not create a physician-patient relationship. Do not disregard, avoid, or delay seeking professional medical advice, diagnosis, or treatment because of anything in this material. Individual conditions, treatments, and outcomes vary; only your own healthcare team can evaluate your specific situation. If you think you may be experiencing a medical emergency, call 911 or go to the nearest emergency department immediately. To the fullest extent permitted by law, Madison Neurology LLC, its providers, and staff disclaim all liability for any loss, injury, or damage arising from the use of, reliance on, or inability to use this information. Organization contact details are provided as a courtesy, were current at the time of compilation, and may change; Madison Neurology LLC is not responsible for the content of external organizations.