



# NANOS

# Patient

# Brochure

# Blepharospasm

*Copyright © 2015. North American Neuro-Ophthalmology Society. All rights reserved. These brochures are produced and made available "as is" without warranty and for informational and educational purposes only and do not constitute, and should not be used as a substitute for, medical advice, diagnosis, or treatment. Patients and other members of the general public should always seek the advice of a physician or other qualified healthcare professional regarding personal health or medical conditions.*

## Benign Essential Blepharospasm (BEB)

Your doctor has diagnosed Benign Essential Blepharospasm, a movement disorder of the eyelids affecting an estimated 5 out of every 100,000 people. BEB is a condition in which uncontrolled blinking, squeezing, and eyelid closure occur in both eyes without an apparent environmental cause. "Benign" indicates the condition is not life-threatening, and "essential" means that it occurs on its own without outside stimulation. The most effective therapy for BEB is a form of botulinum toxin called BOTOX.

Blepharospasm describes any abnormally forceful or frequent blinking. It can be a normal reaction to very bright lights, to eye drops that burn, to a foreign body irritating the eye, or to dry eyes. The diagnosis of BEB may be missed or delayed for years while doctors look for causes of excessive blinking. Often blepharospasm begins with excessive reflex blinking and is worsened by bright lights, fatigue, or emotional tension. Early blepharospasm may be attributed to dry eyes. The patient with blepharospasm may also have dry eyes and may obtain some relief with tear drops. She may be sensitive to lights and benefit from specially tinted FL41 lenses.

BEB occurs in middle age and affects more women than men. BEB may reflect malfunctioning of a part of the brain called the *basal ganglia*, involved in coordinating movements. In most patients blepharospasm develops with no known precipitating factors. As the condition progresses, spasms occur more frequently during the day, and interfere with the patient keeping her eyes open to do ordinary tasks such as driving, reading, shopping, and walking. The eyelids may remain forcefully closed for seconds, minutes or even hours. The spasms do not occur in sleep, and some people find that after a good night's sleep, the spasms do not recur for several hours. Many patients develop sensory tricks such as gum chewing, whistling, humming, or singing that enable them to keep their eyes open in order to drive or read.



Untreated BEB



Botox Injection Sites



After Botox Treatment

## **Meige Syndrome**

Patients with BEB have involuntary spasms of eye closure, and abnormal sustained muscle contractions. Although it starts out affecting the eyelids, it comes to affect the rest of the face and neck, especially the mouth with lip pursing, chin thrusting and grimacing. When blepharospasm progresses to involve the mouth and jaw it is called “Meige Syndrome” or oromandibular dystonia. This too is treated with BOTOX.

## **Botulinum Toxin**

Therapeutic botulinum toxin, called “BOTOX” is the most effective treatment for blepharospasm. A drop of the medicine is injected under the skin at affected sites on both sides of the face. The injections take effect over the next few days, relaxing and weakening the little muscles just under the skin, and preventing spasms. Most neuro-ophthalmologists and some neurologists perform BOTOX injections. It is done in the doctor’s office and usually takes only 10 or 15 minutes. The effect wears off in about 3 months and the injections must be repeated. Most patients have no side effects from the injections but some minor bruising can occur at the injection sites, and temporary lid drooping and double vision occasionally occur.

## **Apraxia of Lid Opening**

Apraxia of lid opening is a condition in which the patient has difficulty opening the eyelids. Apraxia of lid opening is commonly associated with blepharospasm. A blepharospasm patient with apraxia will typically have spasms closing the eyelids and then, after the spasm stops, still have difficulty re-opening the eyelids. Patients with apraxia typically elevate their brows in an attempt to open their eyelids or use their fingers to pry open their eyelids. Just as blepharospasm reflects a problem in the part of the brain responsible for closing the eyelids, apraxia is caused by a problem with the part of the brain responsible for opening the eyelids. BOTOX may not be completely successful in treating apraxia and drugs may be prescribed.

## **Frequently Asked Questions**

*Can I catch botulism from the BOTOX shots?*

*No. BOTOX is injected just under the skin and does not affect the rest of the body. The small amount of botulinum toxin injected is a fraction of the dose that causes botulism.*

*Do the shots hurt?*

*BOTOX is injected through a very tiny needle to avoid pain. Most patients report only mild discomfort lasting seconds.*