



Recent Advances in Facial Palsy Management

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Message from the Guest Editor

Dear Colleagues,

Facial palsy is a debilitating symptom, which can arise from a variety of etiologies. The advent of plastic surgery further improved our ability to manage facial palsy.

In this Special Issue, we explore the next set of challenges in the field of facial palsy:

1. How can we mitigate against this with better medication and what are the prognosticators that we can use to identify the late responders?
2. Do motor endplates completely degenerate beyond 18 to 24 months post-onset and if not, what aspect of these specific organs can regenerate with the help of an external neural source?
3. Motor endplate innervation (MEPI) is the key to understanding the way that the facial mimetic muscles work. More detailed anatomical studies are necessary to look at innervation patterns within these muscles.
4. Is there a role for the use of regenerative peripheral nerve interfaces (RPNIs) or direct muscle neurotization in augmenting the motor endplates within facial muscles?
5. What is the future for facial reanimation surgery: transplantation or cybernetics? Do these have implications in parallel components of facial function like eye transplantations?





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