

Psychological Profile of Patients with Facial Focal Dystonias

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Introduction: blepharospasm is a focal dystonia of the orbicularis oculi muscles, provoking intermittent or sustained eye closure, sometimes severe enough to cause functional blindness. Basal ganglia connections seem to have a major role in its still largely unknown physiopathology. Though usually idiopathic, in the last decades many authors have been linking it to neuropsychiatric diseases, such as obsessive-compulsive disorder. Hemifacial spasm (HFS) consists in unilateral, sudden and intermittent contraction of muscles innervated by the facial nerve. Unlike blepharospasm, an identifiable etiology is frequent. Current best treatment for both diseases consists in botulinum neurotoxin type A application (BoNT/A).

Objectives: to characterize psychological profile of patients with idiopathic blepharospasm or HFS and analyze significant differences.

Methods: consecutive patients diagnosed with one of the above mentioned diseases, visiting an outpatient clinic of BoNT/A application, were evaluated regarding the existence of stress, depression, and obsessive-compulsive behavior. Personality traits, quality of sleep and quality of life were also analyzed. Validated scales were used to assess these domains.

Results: eighty patients were included, 43 with HFS and 37 with idiopathic blepharospasm. After explanation and agreement, demographic, social and clinical data was collected, in addition to questionnaires. Statistical analysis focuses on group differences and correlation with clinical and psychological parameters.

Conclusions: the proposed involvement of basal ganglia in motor and affective domains of blepharospasm must lead to a comprehensive approach of these patients, including a psychological evaluation and pharmacological treatment directed not only to motor spectrum, as it is currently usual, but also matching coincident psychopathology.