Van Der Wiel-Friedreich Idiopathic Facial Paralysis: A Case and A Brief Review of the Early Documentation of the Disorder in the Medical Literature

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Abstract

Background: van der Wiel-Friedreich idiopathic facial paralysis is a unilateral, partial, or complete lower motor neuron facial nerve paralysis. The weakness can be associated with mild pain, numbness. The aim of this paper is to present a case of van der Wiel-Douglas-Friedreich idiopathic facial paralysis and to describe the early documentation of the disorder in the medical literature.

Patients and Methods: The case of a six-year old boy with van der Wiel-Friedreich idiopathic facial paralysis is describe and the relevant medical literatures were reviewed to delineate accurately the early documentation of the disorder in the medical literature.

Results: The boy had lower motor neuron left facial nerve paralysis without any other neurological abnormality and was otherwise health, and no identified cause could be found (idiopathic). Based on the available evidence based-practice guideline, the boy was not given steroid therapy. Two weeks after the onset of the illness, the boy showed improvement in his condition. Review of the relevant literature showed that the condition was first described by Stalpart van der Wiel in 1686 and by Nicolaus Anton Friedreich in 1798.

Conclusion: Deep literature review showed that the valuable works of Stalpart van der Wiel and Nicolaus Anton Friedreich who provided the earliest published descriptions have been missed for centuries.

Keywords: Van Der Wiel-Friedreich Palsy; Idiopathic Facial Paralysis

Introduction

Van der Wiel-Friedreich idiopathic facial paralysis is a unilateral, partial, or complete lower motor neuron facial nerve paralysis. The weakness can be associated with mild pain, numbness. Because, the condition is typically self-limited, treatment with oral steroids within 72 hours of the onset is generally recommended for patients 16 years and older, and not for younger children. The aim of this paper is to present a case of van der Wiel-Friedreich idiopathic facial paralysis and to describe the early documentation of the disorder in the medical literature [1].

Patients and Methods

The case of a six-year old boy with van der Wiel-Friedreich idiopathic facial paralysis is describe and the relevant medical literatures were reviewed to delineate accurately the early documentation of the disorder in the medical literature.

Results

The parents of a six-year old boy noticed that their son was developing deviation of the angle of the mouth to right side especially during crying and laughing, and inability to close his left eye. When first seen the boy obviously had lower motor neuron left facial nerve paralysis with complete disappearance of the left naso-labial fold, and he was unable to close his left eye (Figure 1A).

Based on the available evidence based-practice guideline, the boy was not given steroid therapy. Two weeks after the onset of the
illness, the boy showed improvement in his ability to close the left eye and less deviation of the mouth (Figure 1B).

Review of the relevant literature showed that, in 1686, Stalpart van der Wiel (Figure 2) described the occurrence of unilateral facial paralysis of unknown causation in a married lady. The patient complained of a twisting of her mouth from the left to the right side. The affected side was weak and numb, and the eye on the affected side could not be closed properly. The lady was also drooling at one side. The condition described Stalpart van der Wiel had rather a sudden onset and occurred shortly after exposure to “cold”. There was emphasis that the patient experienced recovery of the symptoms after unspecified medicinal treatment, within a few weeks. van der Wiel also reported that the patient developed the condition immediately post-partum [2].

Figure 1A: Early during the course of the illness, the boy had deviation of the angle of the mouth to right side with complete disappearance of the left naso-labial fold, and he was unable to close his left eye.

Figure 1B: Two weeks after the onset of the illness, the boy showed improvement in his ability to close the left eye and less deviation of the mouth.

Figure 2: Cornelis Stalpart van der Wiel (1620-1702).
1798, Nicolaus Anton Friedreich (1761-1836) from Germany published a thesis about idiopathic facial paralysis, and he called the condition “Rheumatic Facial Paralysis” [3].

Discussion

Lee et al (2020) studied the medical records of 53 childhood cases of van der Wiel-Friedreich idiopathic facial paralysis. After a mean follow-up of the patients for 30 days, thirty patients (56%) were completely recovered, 21 patients (40%) were partially recovered, and 2 patients (4%) had not recovered. The patients who experienced complete recovery were significantly younger than those who experienced partial or didn’t recover. Patients under 8 years had a higher complete recovery rate than patients older than 8 years old. Lee et al also found that sex, affected side, and early or late treatment did not influence the recovery rate [4].

Clinical disorders and syndromes in medicine are generally named after the physician or physicians that initially reported them or provided the earliest satisfactory clinical picture or description. However, a large number of rare syndromes have been described throughout the world before the era of the internet which has been associated with an easier access to medical literature. Unfortunately, several disorders have been attributed unfairly and inappropriately to physicians other than those first described them [5-10]. For centuries, van der Wiel-Friedreich idiopathic facial paralysis, was called Bell’s palsy.

Conclusion

Deep literature review showed that the valuable works of Stalpart van der Wiel and Nicolaus Anton Friedreich who provided the earliest published descriptions have been missed for centuries.

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