

# Resting Tone After Masseteric-Facial Nerve Transfer: A Systematic Review

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**Masseteric-Facial Nerve Transfer** is effective in **restoring dynamic voluntary smile**, but its impact on **resting facial tone and spontaneous smile** may be **limited**

## Introduction

- Facial nerve paralysis significantly affects facial symmetry and function, causing functional and psychosocial impairment.
- Masseteric-Facial nerve transfer is a promising technique to improve outcomes, specifically dynamic smile restoration. However, less is known about its impact on resting facial tone and spontaneous smile.
- The aim of this study was to determine whether Masseteric-Facial Nerve Transfer improves resting facial tone and symmetry.

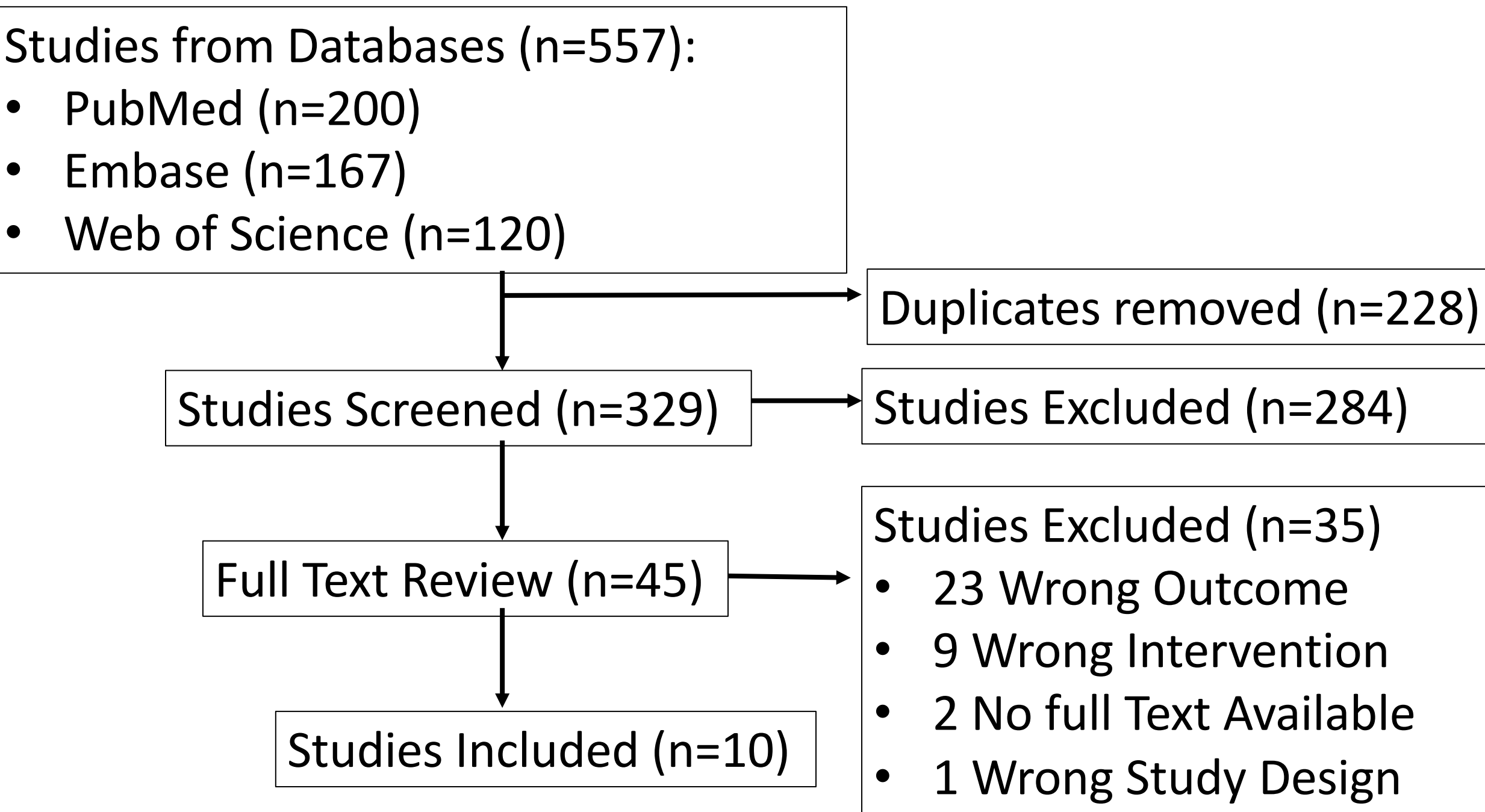
## Methods and Materials

- **Study Design:** PubMed, Embase, Web of Science, and Cochrane library were systematically searched using variations of the following terms:
  - “Facial Paralysis”, “Bells Palsy”, “Facial Nerve”, “Facial Palsy”.
  - “Masseteric Nerve”, “Masseteric Nerve Transfer”, “Masseteric Facial Nerve”

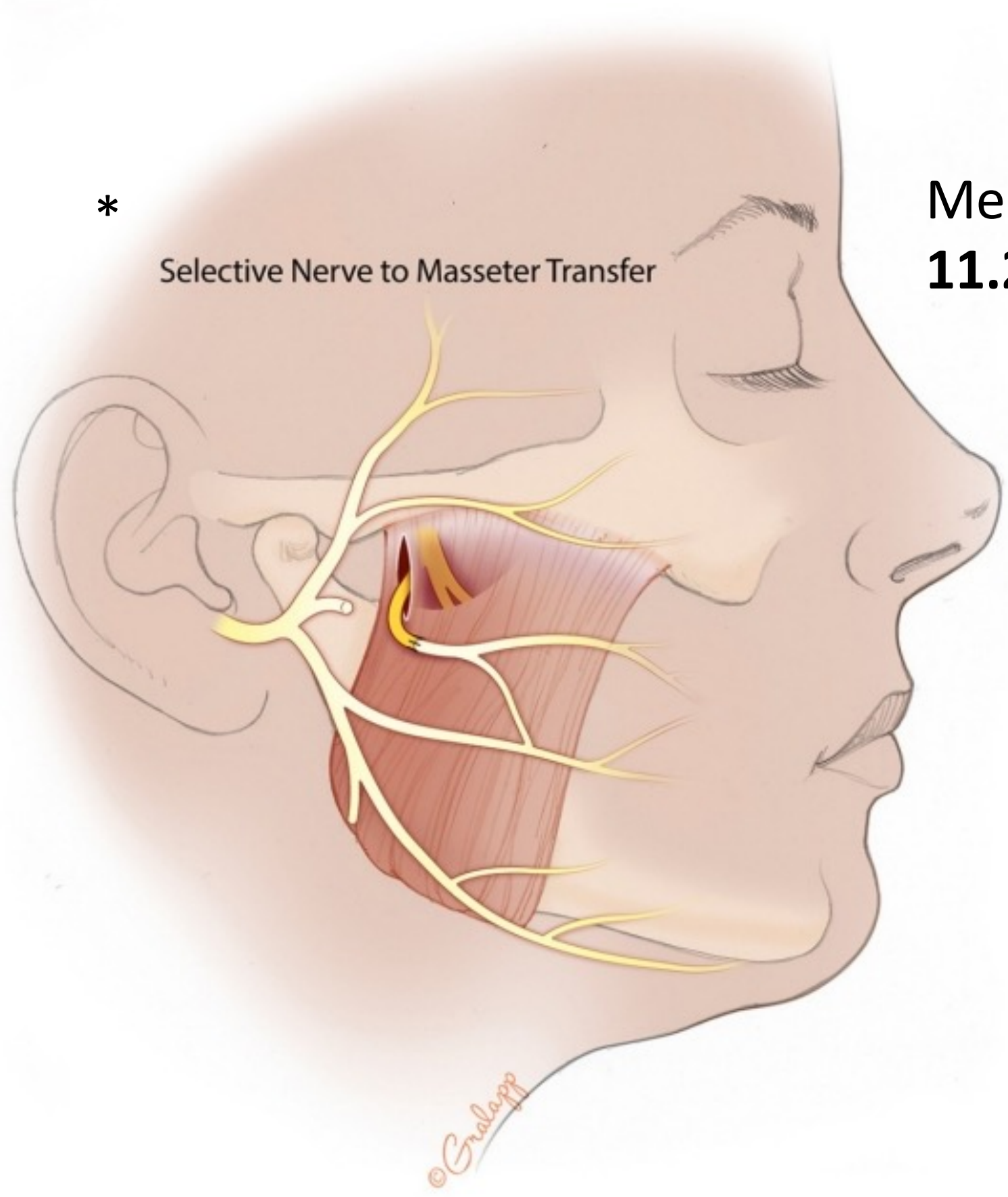
### PICO Criteria

- **Population:** Patients with confirmed facial paralysis
- **Intervention:** Masseteric-Facial Nerve Transfer
- **Comparison:** None
- **Outcomes:** Clinician graded scales (Sunnybrook Facial Grading scale, eFACE) and facial measurement

## Results



## Results



Median time from symptom onset to V-VII transfer:  
**11.2 months** (range: 7.3 – 93.6 months)

Most common physician-graded outcomes used:

- eFACE Static Scores
- Facial Asymmetry Index
- Sunnybrook Facial Grading System (Resting Symmetry)

- Only 2 studies demonstrated statistically significant gains in resting symmetry.
- Most cohorts showed no measurable change in resting tone.
- Subjective improvement in resting tone occurred in select patients.
  - One study found subjective improvements after V-VII transfer while another only found subjective improvement when combined with static suspension.

## Discussion

- Overall, findings were mixed, but most found no statistically significant differences in resting tone postoperatively after V-VII transfer.
- Outcomes reported across studies were variable, and therefore meta-analysis could not be performed.
- Future studies should include validated physician-graded scoring or other objective metrics to measure resting symmetry.

## Contact

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