

# Blepharospasm

## WHAT IS BLEPHAROSPASM?

Blepharospasm is a type of focal dystonia, a localized movement disorder that causes abnormal muscle spasms. Typically, symptoms begin after the age of 50, and women are affected more often than men.<sup>1</sup> Patients suffering from the condition experience an involuntary clenching of the muscles that control the eyelid causing uncontrollable blinking, and generally affecting both eyes.

Blepharospasm can diminish a patient's ability to perform everyday activities by interfering with their ability to see due to the lid blocking their eyes. Increased blinking can progress from an inability to open the eyelids to functional blindness.

## WHAT CAUSES BLEPHAROSPASM?

The cause of blepharospasm is unknown. It is a progressive disease that is often misdiagnosed in its early stages. The presenting symptoms of light sensitivity, difficulty in keeping the eyes open, and frequent forceful blinking are initially associated with stress, ocular allergies or nervous habits. As the disease progresses over one to two years, blinking becomes more frequent, forceful and uncontrollable. Remissions are generally rare. The difficulty in diagnosing the condition can lead to an increased number of physician visits. Accurate diagnosis of blepharospasm usually requires consideration of several clinical features and is primarily based on a patient's history.

## HOW IS BLEPHAROSPASM TREATED?

Drug therapy for blepharospasm has limitations and results have been inconsistent.<sup>2</sup> Patients with blepharospasm are generally referred to ophthalmologists or neurologists for treatment, which may include BOTOX<sup>®</sup> (botulinum toxin type A) therapy.

BOTOX<sup>®</sup> was approved by Health Canada for the treatment of blepharospasm associated with dystonia, including benign essential blepharospasm or VII nerve disorders in patients 12 years of age or older in 1990.<sup>3</sup> BOTOX<sup>®</sup> therapy involves the injection of therapeutic doses of purified botulinum toxin protein directly into the muscles surrounding the eye. Derived from the bacterium *Clostridium botulinum*, BOTOX<sup>®</sup> inhibits the release of a neurotransmitter, acetylcholine, from nerve cells, blocking the signals that promote involuntary muscle contractions. The effect is temporary and the treatment needs to be re-administered approximately every three months, depending on the individual patient.

If a functionally impaired patient does not respond to less invasive treatments, surgical therapy to remove some or all of the muscles responsible for eyelid closure (a procedure called protractor myectomy) may be recommended. Patients should speak to a physician to fully understand their treatment options.

- 30 -

**For more information, please contact:**

Jacqueline Zonneville  
NATIONAL Public Relations  
[izonneville@national.ca](mailto:izonneville@national.ca)  
416-848-1398

**REFERENCES:**

- 
- <sup>1</sup> Worldwide Education and Awareness for Movement Disorders (We Move). Blepharospasm. 2004. Available at [http://www.wemove.org/dys/dys\\_fbleph.html](http://www.wemove.org/dys/dys_fbleph.html). Accessed January 2010.
  - <sup>2</sup> Benign Essential Blepharospasm Research Foundation. Blepharospasm. Available at <http://www.blepharospasm.org/med-therapy.html> . Accessed January 2010.
  - <sup>3</sup> BOTOX<sup>®</sup> Canadian Product Monograph. Allergan Canada. 2008.