Review

The Role of Acupuncture in the Management of Bell’s Palsy: A Review of the Evidence and Perspectives in Emergency Care

Alan Wang 1,2,3,4

1 Auckland Bioengineering Institute, The University of Auckland, Auckland 1010, New Zealand; alan.wang@auckland.ac.nz
2 Faculty of Medical and Health Sciences, The University of Auckland, Auckland 1010, New Zealand
3 Centre for Co-Created Ageing Research, The University of Auckland, Auckland 1010, New Zealand
4 Centre for Brain Research, The University of Auckland, Auckland 1010, New Zealand

Abstract: Bell’s Palsy poses a significant challenge in emergency care settings due to its sudden onset and potential long-term consequences. This review paper explores the current evidence and perspectives on the use of acupuncture as a complementary approach in the emergency management of Bell’s Palsy. A comprehensive search of electronic databases was conducted to identify relevant studies regarding acupuncture in Bell’s Palsy management. The key findings and viewpoints were synthesized to provide an overview of the efficacy, safety, and clinical considerations associated with acupuncture in emergency care settings. This review highlights a growing body of evidence supporting the use of acupuncture as an adjunctive therapy for Bell’s Palsy. Studies suggest that acupuncture may help alleviate symptoms, promote nerve regeneration, and improve functional outcomes when combined with standard medical treatments. Furthermore, acupuncture is generally well tolerated and devoid of serious adverse effects, making it a potentially valuable intervention in emergency settings. While further research is needed to elucidate the mechanisms underlying the therapeutic effects of acupuncture in Bell’s Palsy, current evidence suggests that it holds promise as a non-invasive and cost-effective adjunctive therapy in emergency care. Clinicians should consider integrating acupuncture into comprehensive treatment protocols for Bell’s Palsy, taking into account patient preferences, clinical expertise, and available resources.

Keywords: Bell’s Palsy; acupuncture; emergency care; complementary therapy; integrative medicine; facial paralysis

1. Introduction

Bell’s Palsy, a sudden onset of facial paralysis of unknown etiology, poses a significant challenge in emergency care settings due to its acute presentation and potential long-term sequelae. With an annual incidence of approximately 20–30 cases per 100,000 individuals worldwide, Bell’s Palsy is one of the most common causes of facial nerve paralysis, often requiring immediate medical attention [1,2]. The condition typically manifests unilaterally, affecting the facial muscles on one side of the face, leading to facial distortion, difficulty in closing the eye, drooling, and impaired speech articulation [3]. While most cases of Bell’s Palsy resolve spontaneously within weeks to months, a subset of patients may experience persistent facial weakness, functional impairment, and psychological distress [4].

In the management of Bell’s Palsy, conventional treatments such as corticosteroids and antiviral agents aim to reduce inflammation, alleviate symptoms, and promote nerve recovery [5]. However, the complexity of Bell’s Palsy and the variability in patient response to standard treatments necessitate the exploration of alternative therapeutic approaches. Emerging evidence suggests a potential role for complementary therapies, such as acupuncture, in optimizing outcomes for patients with Bell’s Palsy. Acupuncture, rooted in traditional Chinese medicine principles, involves the strategic insertion of fine needles into
specific acupoints along the body’s meridians to regulate the flow of qi (vital energy) and restore balance within the body’s energy system [6]. By stimulating nerve pathways and eliciting neurophysiological responses, acupuncture is hypothesized to exert therapeutic effects beyond symptomatic relief.

Despite the growing interest in acupuncture as a complementary therapy for Bell’s Palsy, the exact mechanisms underlying its therapeutic effects remain incompletely understood. Recent studies have proposed several potential mechanisms of action, shedding light on the multifaceted nature of acupuncture’s impact on the pathophysiology of Bell’s Palsy [7,8]. Acupuncture’s ability to modulate inflammation is of particular interest, as evidenced by its regulatory effects on cytokine levels and immune responses [9]. By attenuating the inflammatory cascade implicated in the pathogenesis of Bell’s Palsy, acupuncture may help alleviate facial paralysis and associated symptoms [10]. Furthermore, acupuncture-induced neuroplastic changes within the central nervous system offer insights into its capacity to facilitate functional recovery of the facial nerve and associated musculature [11]. Synaptic remodeling and enhanced neuronal connectivity may contribute to the restoration of motor function and the resolution of facial asymmetry [12].

Moreover, acupuncture’s impact on blood flow dynamics presents another potential mechanism underlying its therapeutic effects in Bell’s Palsy. Enhanced blood flow and microcirculation at the site of needle insertion have been observed, which may promote tissue healing and regeneration [13,14]. This phenomenon could facilitate the delivery of oxygen and nutrients to affected facial tissues, thereby supporting the recovery process and mitigating the severity of symptoms. The cumulative evidence suggests that acupuncture operates through a complex interplay of biological mechanisms, offering promising avenues for optimizing outcomes in the management of Bell’s Palsy.

This paper aims to review the evidence and perspectives on the use of acupuncture as a complementary therapy in the emergency management of Bell’s Palsy. By synthesizing findings from clinical trials, observational studies, and expert opinions, this review seeks to elucidate the efficacy, safety, and clinical considerations associated with acupuncture in the acute management of Bell’s Palsy in emergency care settings. Furthermore, this paper will explore patient perspectives, shared decision-making principles, and future research directions in integrating acupuncture into comprehensive treatment protocols for Bell’s Palsy.

2. Methods

A comprehensive literature search was conducted to identify relevant studies on the use of acupuncture as a complementary approach in the emergency management of Bell’s palsy. Electronic databases including PubMed, Embase, Cochrane Library, and Web of Science were searched from inception to 2023. The search strategy utilized a combination of keywords and medical subject headings (MeSH) terms related to Bell’s palsy, acupuncture, emergency care, and complementary therapies.

Studies were included if they met the following criteria: they investigated the use of acupuncture as a complementary therapy for Bell’s palsy, included patients presenting with Bell’s palsy in emergency care settings, reported outcomes related to efficacy, safety, or patient satisfaction with acupuncture treatment, were published in peer-reviewed journals, and were available in English language. The titles and abstracts of the identified articles were screened for eligibility. Full-text articles of potentially relevant studies were then assessed for inclusion based on the predefined selection criteria.

The methodological quality of the included studies was evaluated using appropriate tools, such as the Cochrane Risk of Bias Tool for randomized controlled trials and the Newcastle–Ottawa Scale for observational studies. The studies were assessed for risk of bias, methodological limitations, and the overall quality of evidence. A narrative synthesis approach was employed to summarize the findings of the included studies.
3. Theoretical Basis and Mechanisms of Acupuncture in Bell’s Palsy

Acupuncture, a cornerstone of traditional Chinese medicine (TCM), operates on principles deeply rooted in the concept of restoring balance and harmony within the body’s energetic pathways. According to TCM theory, the body’s vital energy, known as qi, flows through meridians, and disruptions in this flow can lead to various health ailments, including Bell’s Palsy. Acupuncture aims to restore the smooth flow of qi by stimulating specific acupoints along the meridians, thereby rebalancing the body’s energy and promoting healing. Additionally, TCM considers the interconnectedness of the body, mind, and spirit, acknowledging that physical ailments can stem from emotional or psychological imbalances. Therefore, acupuncture treatments often address not only the physical symptoms but also the emotional well-being of the individual, promoting holistic healing [10].

Recent studies have reported a percentage change in improvement ranging from 71% to 85% with antiviral and corticosteroid medication in Bell’s palsy cases [5,15]. Understanding this degree of improvement underscores the potential benefit of adjunctive acupuncture therapy, which has been associated with additional improvement rates ranging from 10% to 25% [13,16–18]. Moreover, Bell’s palsy is known to exhibit a spontaneous recovery rate of approximately 70–80% within six months of onset [1], highlighting the importance of considering the natural course of the condition when evaluating treatment options.

Acupuncture in Bell’s Palsy operates through several proposed mechanisms, each addressing different aspects of the condition’s pathophysiology. One such mechanism involves its anti-inflammatory properties. By regulating pro-inflammatory cytokines and mediators, acupuncture mitigates inflammation, reducing tissue damage and creating a conducive environment for nerve regeneration. Moreover, acupuncture fosters neuroplasticity, promoting synaptic remodeling and neuronal connectivity in the central nervous system, crucial for functional recovery [12].

Another significant facet of acupuncture’s efficacy lies in its ability to enhance blood flow and microcirculation at the affected site. This improvement facilitates the delivery of essential nutrients, oxygen, and immune cells, expediting tissue healing and regeneration. By both addressing the underlying inflammation and promoting neuroregeneration, acupuncture plays a vital role in alleviating symptoms and enhancing the overall quality of life for Bell’s Palsy patients [14].

Furthermore, acupuncture’s therapeutic effects extend to promoting neuroregeneration, which is pivotal for restoring facial nerve function in Bell’s Palsy. By inducing synaptic remodeling, neuronal connectivity, and axonal regeneration, acupuncture facilitates the restoration of facial muscle strength and mobility, leading to improved facial symmetry and function [10]. Additionally, its ability to optimize blood flow and microcirculation aids in clearing metabolic waste products and inflammatory mediators, further contributing to tissue repair and the resolution of inflammation. Through these multifaceted mechanisms, acupuncture offers comprehensive and effective treatment for Bell’s Palsy, warranting its consideration as an adjunctive therapy in clinical practice [11].

4. Evidence for Acupuncture in the Emergency Management of Bell’s Palsy

Clinical trials and observational studies have extensively explored the efficacy and safety of acupuncture as an adjunctive therapy in managing Bell’s Palsy. Kim et al. [13] conducted a comprehensive systematic review and meta-analysis, evaluating the effectiveness of acupuncture for Bell’s Palsy. Their analysis incorporated a range of randomized controlled trials (RCTs) comparing acupuncture with conventional treatments or sham acupuncture. The results from the meta-analysis revealed promising outcomes, indicating that acupuncture significantly enhanced the recovery rate and improved facial nerve function outcomes compared to conventional treatments alone. Moreover, acupuncture demonstrated a favorable safety profile, with fewer reported adverse effects, underscoring its potential as a complementary therapy for Bell’s Palsy.

Building upon these findings, additional studies such as Zhang et al. [7], Lu et al. [6], and Choi et al. [15] have contributed to the evidence base supporting the use of acupuncture
in Bell’s Palsy management. Zhang et al. [7] conducted a Cochrane review assessing the effectiveness of acupuncture for Bell’s Palsy, highlighting its potential benefits in improving facial nerve function and accelerating recovery. Similarly, Lu et al. [6] proposed a systematic review protocol to further investigate the role of acupuncture in Bell’s Palsy, emphasizing the need for the rigorous evaluation and synthesis of available evidence to inform clinical practice and guideline recommendations. Furthermore, Choi et al. [19] explored the relationship between the effect of acupuncture and needling sensation and manipulation, shedding light on the potential mechanisms underlying acupuncture’s therapeutic effects in Bell’s Palsy.

In addition to systematic reviews and meta-analyses, individual RCTs have contributed valuable insights into the efficacy of acupuncture in Bell’s Palsy. For instance, Li et al. [16] conducted a randomized controlled trial comparing acupuncture with sham acupuncture in Bell’s Palsy patients, demonstrating significant improvements in facial nerve function and quality of life measures in the acupuncture group. Similarly, Yang et al. [20] investigated the efficacy of electroacupuncture combined with rehabilitation exercises, revealing superior outcomes compared to rehabilitation exercises alone. These studies collectively support the growing body of evidence highlighting the potential of acupuncture as an effective adjunctive therapy for Bell’s Palsy, warranting further investigation and integration into clinical practice.

Several key findings have emerged from the literature regarding the benefits of acupuncture in Bell’s Palsy management. Firstly, acupuncture has been consistently associated with improvements in facial nerve function, as evidenced by enhanced muscle strength, reductions in synkinesis, and the restoration of facial symmetry. Studies such as those by Li et al. [16] and Yang et al. [20] have reported significant improvements in facial nerve function scores and muscle strength following acupuncture treatment. Additionally, acupuncture has been found to provide effective pain relief for Bell’s Palsy patients, alleviating discomfort associated with facial paralysis and neuralgia. This pain-relieving effect is thought to be mediated through acupuncture’s modulation of pain perception pathways and its anti-inflammatory properties. Furthermore, acupuncture has been shown to improve overall functional outcomes, including speech articulation, eating ability, and social interactions, thereby enhancing the quality of life for Bell’s Palsy patients.

Despite the accumulating evidence supporting the efficacy of acupuncture in Bell’s Palsy management, several limitations and controversies persist in the literature. Firstly, the heterogeneity of acupuncture protocols and treatment regimens across studies makes it challenging to establish standardized guidelines for acupuncture practice in Bell’s Palsy. Variations in acupuncture techniques, such as the needling depth, frequency of sessions, and selection of acupoints, may contribute to inconsistencies in treatment outcomes and hinder direct comparisons between studies. Additionally, the lack of placebo-controlled trials with adequate blinding poses challenges in interpreting the true efficacy of acupuncture, as placebo effects and patient expectations may influence treatment outcomes. Moreover, while acupuncture is generally considered safe when performed by trained practitioners, adverse events such as needle pain, hematoma formation, and local irritation have been reported, highlighting the importance of proper training and supervision in acupuncture practice [21].

The efficacy of acupuncture in the treatment of Bell’s palsy has prompted discussions regarding its cultural influences and potential placebo effects. While Bell’s palsy often resolves spontaneously, the role of acupuncture, particularly in Asian countries where it is a traditional therapy, raises questions about cultural beliefs and philosophical perspectives influencing treatment outcomes. Studies have shown variations in acupuncture utilization and acceptance between Eastern and Western populations, suggesting that cultural factors may indeed impact perceptions of acupuncture’s efficacy [22]. Furthermore, the placebo effect is a pertinent consideration in acupuncture research, with some participants attributing its benefits to psychosomatic factors or mind–body interactions [23]. However, placebo responses are complex and multifaceted, with individual beliefs and expectations
playing significant roles. While acknowledging these factors, it is essential to critically evaluate acupuncture’s therapeutic effects through robust research methodologies that account for cultural nuances and placebo responses. By doing so, we can gain a more nuanced understanding of acupuncture’s role in Bell’s palsy treatment and its potential implications for clinical practice.

In addition to exploring the efficacy of acupuncture in Bell’s palsy management, it is crucial to delve into how metabolic control, particularly in cases associated with Diabetes Mellitus (DM), influences treatment outcomes. Understanding whether acupuncture yields similar efficacy in patients with DM compared to those without this condition is essential for informing clinical practice. Research addressing this specific aspect can provide valuable insights into the nuanced considerations needed when applying acupuncture as a complementary therapy for Bell’s palsy, especially in populations with comorbidities such as DM.

The efficacy of acupuncture therapy can be influenced by various factors, including patient compliance and the experience of the practitioner. The technical complexity of acupuncture, coupled with variations in the needle depth and strength applied by different practitioners, can introduce variability in treatment outcomes and pose challenges in assessing trial consistency. These factors underscore the importance of standardized protocols, rigorous practitioner training, and comprehensive outcome assessments to ensure the reliability and reproducibility of acupuncture interventions in clinical trials.

Moving forward, future research endeavors should aim to address the existing gaps and controversies in the literature to further elucidate the role of acupuncture in Bell’s Palsy management. Well-designed randomized controlled trials with larger sample sizes and standardized acupuncture protocols are warranted to provide robust evidence of acupuncture’s efficacy and optimize treatment outcomes. Additionally, comparative effectiveness studies comparing acupuncture with conventional treatments and other complementary therapies could offer valuable insights into the relative benefits and limitations of different treatment modalities. Furthermore, interdisciplinary collaboration between clinicians, researchers, and traditional Chinese medicine practitioners is essential to integrate acupuncture into comprehensive care pathways for Bell’s Palsy patients, ensuring personalized and holistic approaches to treatment and rehabilitation.

5. Clinical Considerations and Practical Applications

Acupuncture, a key component of traditional Chinese medicine, encompasses various techniques aimed at restoring balance and promoting healing in patients with Bell’s Palsy. Among the commonly used techniques, manual acupuncture involves the insertion of fine needles into specific acupoints along the affected meridians, targeting areas associated with facial nerve innervation and motor function [13]. The selection of acupoints may vary based on individual presentations and symptomatology, but often includes points such as Hegu (LI4), Fengchi (GB20), Yangbai (GB14), Yifeng (SJ17), Taiyang (EX-HN5), Jiache (ST6), and Dicang (ST4) to address facial paralysis, pain, and inflammation [6,13,16,19,24,25]. Additionally, electroacupuncture, which involves the application of electrical stimulation to acupuncture needles, has gained popularity for its potential to enhance nerve regeneration and muscle activation in Bell’s Palsy patients [7]. Electroacupuncture techniques may include continuous or intermittent electrical stimulation at varying frequencies and intensities, tailored to individual patient needs and treatment goals.

In emergency care settings, the timely initiation of acupuncture therapy is crucial to maximize therapeutic benefits and expedite recovery in Bell’s Palsy patients. Acupuncture treatments are typically initiated as soon as the diagnosis is confirmed, ideally within the first few days of symptom onset, to capitalize on the window of opportunity for neural plasticity and tissue regeneration [13]. The frequency and duration of acupuncture sessions may vary depending on the severity of symptoms, patients’ responses to treatment, and individualized treatment plans. In acute settings, frequent acupuncture sessions may be warranted, with daily or alternate-day treatments recommended to achieve optimal
outcomes [7]. As symptoms improve and stabilize, the frequency of acupuncture sessions may be tapered down, transitioning to maintenance or follow-up treatments to consolidate gains and prevent recurrence [6]. Additionally, the duration of acupuncture treatment may range from several days to weeks, with ongoing assessment and adjustments made based on patients’ progress and treatment goals.

Moving forward, future research endeavors should aim to address the existing gaps and controversies in the literature to further elucidate the role of acupuncture in Bell’s Palsy management. Well-designed randomized controlled trials with larger sample sizes and standardized acupuncture protocols are warranted to provide robust evidence of acupuncture’s efficacy and optimize treatment outcomes [13]. Additionally, comparative effectiveness studies comparing acupuncture with conventional treatments and other complementary therapies could offer valuable insights into the relative benefits and limitations of different treatment modalities [7]. Furthermore, interdisciplinary collaboration between clinicians, researchers, and traditional Chinese medicine practitioners is essential to integrate acupuncture into comprehensive care pathways for Bell’s Palsy patients, ensuring personalized and holistic approaches to treatment and rehabilitation [6].

The integration of acupuncture into comprehensive treatment protocols for Bell’s Palsy in emergency departments represents a significant advancement in patient-centered care. Acupuncture, as a complementary therapy, offers a unique approach to addressing the diverse symptoms associated with Bell’s Palsy, including facial paralysis, pain, and functional impairment. By incorporating acupuncture alongside conventional treatments such as corticosteroids and antiviral agents, emergency departments can provide a more holistic and personalized approach to managing Bell’s Palsy. Recent research studies have shown the advantages of acupuncture intervention during the acute stage of Bell’s Palsy, indicating potential enhancements in recovery time and outcomes [22]. Furthermore, real-world evidence from Korea has suggested that early acupuncture decreased Bell’s Palsy recurrence, offering additional support for its integration into comprehensive treatment protocols [24]. The integration of acupuncture into emergency care protocols not only expands the therapeutic options available, but also promotes interdisciplinary collaboration between emergency care providers and licensed acupuncturists, fostering a more integrative and patient-centered approach to healthcare delivery.

To facilitate the seamless integration of acupuncture into emergency care protocols for Bell’s Palsy, ongoing education and training programs are essential for emergency department staff. Training programs should encompass the principles and techniques of acupuncture, safety considerations, and protocols for patient assessment and treatment. By equipping emergency care providers with the knowledge and skills necessary to incorporate acupuncture into their practice, healthcare institutions can ensure the consistent and standardized delivery of acupuncture interventions. Additionally, collaborative initiatives between emergency departments and traditional Chinese medicine clinics can provide opportunities for shared decision-making and coordinated care for Bell’s Palsy patients. Through these collaborative efforts and continued research, the integration of acupuncture into comprehensive treatment protocols holds promise for enhancing patient outcomes and satisfaction in emergency care settings.

6. Safety and Adverse Effects of Acupuncture

Acupuncture is generally regarded as a safe therapeutic intervention for the management of various medical conditions, including Bell’s Palsy. Numerous studies and systematic reviews have reported a favorable safety profile associated with acupuncture treatment. Commonly reported adverse events include minor discomfort at the site of needle insertion, mild bruising, and temporary fatigue or dizziness, which are typically transient and self-limiting [10,19]. Serious adverse events are rare and often attributed to practitioner error, such as improper needling technique or inadequate sterilization procedures. Moreover, acupuncture-related complications such as pneumothorax or infection are exceedingly rare when performed by trained and licensed practitioners in accordance
with established safety guidelines [10]. Despite its overall safety, certain contraindications may exist for acupuncture treatment, including patients with bleeding disorders, severe cardiovascular conditions, or compromised immune function, where the risk of adverse events may outweigh the potential benefits [26].

In contrast to conventional medical treatments such as corticosteroids and antiviral agents commonly used for Bell’s Palsy, acupuncture offers distinct advantages in safety and tolerability. While corticosteroids are often prescribed to reduce inflammation and accelerate nerve recovery in Bell’s Palsy patients, they carry potential side effects, including gastrointestinal disturbances, immunosuppression, and mood changes [15]. Similarly, antiviral agents like valaciclovir may lead to adverse effects such as nausea, headache, and renal dysfunction [5]. However, acupuncture poses a lower risk of systemic side effects and drug interactions, making it a safer alternative for patients with contraindications or intolerance to conventional treatments. Furthermore, acupuncture’s holistic approach to addressing underlying imbalances in the body’s energy flow may offer long-term benefits beyond symptom relief, enhancing its appeal as a safe and effective treatment option for Bell’s Palsy. The observed variability in acupuncture protocols for treating Bell’s Palsy underscores the necessity for establishing standardized protocols to integrate acupuncture into comprehensive treatment regimens. Further research is imperative to address this variability and provide clear guidelines for the effective use of acupuncture in managing Bell’s Palsy.

Overall, while both acupuncture and conventional medical treatments play valuable roles in the management of Bell’s Palsy, the safety profile of acupuncture offers distinct advantages, particularly in patients with contraindications or concerns regarding adverse effects associated with pharmacological interventions. By integrating acupuncture into comprehensive treatment protocols for Bell’s Palsy, healthcare providers can offer patients a broader range of therapeutic options tailored to individual needs and preferences, ultimately enhancing patient safety and satisfaction.

Recommendations for monitoring and managing the potential adverse effects of acupuncture in emergency care settings are essential to ensure patient safety and optimize treatment outcomes. Close monitoring of patients during and after acupuncture sessions is paramount to promptly identify and address any adverse reactions or complications. Emergency care providers should be trained to recognize common adverse events associated with acupuncture, such as needle site discomfort, fainting, or local bruising, and equipped with appropriate interventions to manage these occurrences effectively. Additionally, maintaining strict adherence to infection control protocols, including the proper sterilization of acupuncture needles and ensuring a clean treatment environment, is imperative to minimize the risk of infection transmission. In cases where adverse events occur, timely documentation and reporting are crucial for quality assurance and the continuous improvement of acupuncture practice in emergency care settings. By implementing standardized protocols for monitoring and managing adverse effects, emergency departments can enhance patient safety and confidence in the use of acupuncture as a complementary therapy for Bell’s Palsy and other conditions.

7. Patient Perspectives and Shared Decision-Making

The exploration of patients’ experiences, preferences, and perceptions regarding acupuncture as a treatment for Bell’s Palsy provides valuable insights into the acceptability and effectiveness of acupuncture interventions from the patient’s perspective. Qualitative research studies have highlighted various aspects of patient experiences with acupuncture, shedding light on factors influencing treatment adherence, satisfaction, and perceived outcomes [16,27]. Patients with Bell’s Palsy may express diverse preferences regarding acupuncture treatment, including their comfort level with needle insertion, the importance of practitioner–patient rapport, and the perceived holistic benefits of acupuncture in addressing the physical, emotional, and psychosocial aspects of their condition [19,28]. Understanding patient preferences and perceptions can inform healthcare providers in
tailoring acupuncture interventions to meet individual needs and preferences, thereby enhancing treatment engagement and effectiveness.

Moreover, patients’ experiences with acupuncture for Bell’s Palsy may encompass a range of subjective outcomes, including improvements in facial nerve function, pain relief, and an overall improvement in well-being. Qualitative studies have documented patients’ perceptions of acupuncture as a non-invasive, natural therapy that complements conventional treatments, offering hope and empowerment in their journey towards recovery [22,23]. Patients may report positive experiences, such as reduced facial paralysis, enhanced facial symmetry, and improved quality of life, following acupuncture treatment, reinforcing their confidence in acupuncture as a viable treatment option for Bell’s Palsy. By exploring patient-reported outcomes and experiences, healthcare providers can gain valuable insights into the holistic impact of acupuncture on Bell’s Palsy management and tailor treatment approaches to align with patient-centered care principles.

Furthermore, patient–provider communication and shared decision-making play pivotal roles in shaping patients’ experiences and perceptions of acupuncture for Bell’s Palsy. Open dialog between patients and healthcare providers regarding treatment expectations, potential benefits, and any concerns or misconceptions about acupuncture can foster trust, engagement, and collaborative decision-making [27,28]. Patient-centered care approaches that prioritize individual preferences, values, and treatment goals can enhance treatment satisfaction and adherence, ultimately leading to improved clinical outcomes. By incorporating patient perspectives into the design and delivery of acupuncture interventions for Bell’s Palsy, healthcare providers can ensure patient-centered care that addresses the unique needs and preferences of each individual, thereby optimizing treatment outcomes and overall patient satisfaction.

The discussion of shared decision-making principles and strategies for involving patients in treatment decisions involving acupuncture is essential for promoting patient-centered care and enhancing treatment outcomes. Shared decision-making (SDM) emphasizes collaborative partnerships between healthcare providers and patients, where both parties contribute to treatment decisions based on the best available evidence and individual preferences [29]. In the context of acupuncture for Bell’s Palsy, SDM principles involve transparent communication, active listening, and mutual respect between patients and healthcare providers. By engaging patients in discussions about their treatment options, including the potential benefits, risks, and alternatives to acupuncture, healthcare providers can empower patients to make informed decisions that align with their values and goals.

Various strategies can facilitate SDM in acupuncture treatment decisions for Bell’s Palsy patients. These may include providing patients with evidence-based information about acupuncture, such as its mechanism of action, efficacy, and safety profile, in a clear and understandable manner [28,29]. Additionally, healthcare providers can elicit patients’ preferences, beliefs, and treatment goals through open-ended questions and active listening, allowing patients to express their concerns, expectations, and treatment priorities. Decision aids, such as informational pamphlets, videos, or online resources, can also support SDM by presenting treatment options and their associated risks and benefits in an accessible format, facilitating shared deliberation and informed decision-making [29,30]. By incorporating SDM principles and strategies into clinical practice, healthcare providers can enhance patient engagement, satisfaction, and adherence to acupuncture treatment for Bell’s Palsy, ultimately improving treatment outcomes and patient-centered care delivery.

8. Conclusions

This review provides a comprehensive examination of the use of acupuncture as a complementary therapy for Bell’s Palsy within emergency care settings. The collective evidence suggests that acupuncture offers promising benefits in alleviating symptoms, promoting facial nerve recovery, and enhancing overall patient well-being. By targeting specific acupoints and stimulating neural pathways, acupuncture may modulate inflammation, improve neuroplasticity, and enhance blood flow, thereby facilitating the restoration
of facial function in Bell’s Palsy patients. Furthermore, patient experiences and preferences play a crucial role in shaping treatment engagement and satisfaction, highlighting the importance of incorporating shared decision-making principles into clinical practice.

The implications for clinical practice are significant, as the integration of acupuncture into comprehensive treatment protocols for Bell’s Palsy has the potential to enhance patient outcomes and satisfaction. Healthcare providers in emergency care settings should prioritize patient-centered approaches that involve shared decision-making and individualized treatment planning. Moreover, ongoing education and training programs are essential to ensure that emergency care providers are equipped with the necessary knowledge and skills to deliver acupuncture interventions safely and effectively. By fostering interdisciplinary collaboration and adhering to evidence-based guidelines, healthcare institutions can optimize the use of acupuncture as a valuable adjunctive therapy for Bell’s Palsy in emergency care settings.

Looking ahead, future research endeavors should focus on addressing existing gaps in the literature and further elucidating the mechanisms underlying acupuncture’s therapeutic effects in Bell’s Palsy. Well-designed clinical trials with larger sample sizes and standardized acupuncture protocols are needed to provide robust evidence of acupuncture’s efficacy and safety. Comparative effectiveness studies comparing acupuncture with conventional treatments and other complementary therapies could offer valuable insights into the relative benefits and limitations of different treatment modalities. Through collaborative efforts and continued research, the use of acupuncture for Bell’s Palsy in emergency care settings can be refined and optimized, ultimately improving patient outcomes and quality of care.

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