Trigeminal Ganglion Blocks

- Glycerol injections
- Balloon Compression
- Radiofrequency Lesioning

Information for patients, relatives and carers

For more information, please contact:
The Pain Management Clinic
Tel: 01904 725395 or 725396
The York Hospital, Wigginton Road, York, YO31 8HE

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What are Trigeminal Ganglion Blocks?

The Trigeminal Nerve carries sensory information from your face and the surface of your eye to your brain. It also controls some of the muscles used to chew. The pain in your face may be relieved by having the root of this nerve (The Trigeminal Ganglion) treated by:

- injecting glycerol into it to dry it out
- compressing it with a small surgical balloon
- cauterizing it with an electric current passed through a needle

The Trigeminal Ganglion lies at the base of the brain just behind the eye. It is approached by passing a needle into your cheek and through a small hole in the base of the skull.

We find that Trigeminal Ganglion Balloon Compression produces the longer lasting and more consistent relief of pain with the least side effects.

What does the procedure involve?

The Trigeminal Balloon Compression is done under general anaesthesia as it is as painful procedure. It is performed under full sterile conditions using x-ray control to guide the placement of the needle and monitor the compression.

The procedure takes about thirty minutes. You will stay overnight for observation.
What happens afterwards?

When you wake up from the anaesthetic you may have a headache and your face may feel numb. You may still have your facial pain or it may have reduced. The pain should reduce over the next few hours.

The effect of the procedure varies from person to person. 90% patients get a significant reduction in their pain which usually lasts for longer than a year. Sometimes the pain recurs within a short period. If this happens the procedure can be repeated.

If your pain improves you can try to reduce the dose of your painkillers gradually and possibly stop taking them if you get long term relief of your pain. If you feel no benefit, continue with your pain killers.

You may find that your face feels numb and be aware that the surface of your eye may also be numb. If this happens you need to take extra care to make sure that you don't get any dirt or inflammation in your eye as you may not feel it.

You may find that the muscles that you use to chew are a little weak for up to six weeks.

You will be reviewed in the out patients clinic about two months after the procedure.
Anticoagulant Medication

You should tell us if you are taking any blood thinning medication such as Warfarin, Clopidogrel and other anticoagulant medications. These may need to be stopped before the procedure.

What are the risks from the procedure?

General Risks from any injection technique:

No procedure is free of risk.

Short term side effects include: Pain at the site of injection; bruising, bleeding, infection, injury to other body structures near to the site of injection.

Long term side effects and complications are uncommon but the possibility cannot be excluded.

Serious complications such as long term significant nerve damage, paralysis or possible fatality are very very rare with a probable risk of one to two in 100,000 or less.
Specific Risks associated with the procedure:

There is a low risk of serious complications from the procedure. But if complications occur, they can be severe as the procedure involves placing a needle near the brain and nerves.

Persistent facial numbness does occur after the procedure. It usually resolves but may continue long term and be annoying or even feel painful (anaesthesia dolorosa) in rare cases (0.6%).

Numbness of the surface of the eye (corneal anaesthesia) can occur (3%) and lead to complications of eye inflammation in rare cases.

Weakness of some of the small muscles used in chewing can occur (7%). This is usually temporary but can be permanent (3%).

The needle may cause bleeding (13%) and you may get a large bruise on your face (3%) which will resolve.

There is a risk of the procedure causing a flare up of shingles (10%); aseptic meningitis (6%); facial nerve palsy (2%)

Advise your doctor if you are allergic to iodine as the procedure uses an iodine containing compound.

You should not have these injections if you are pregnant or if there is any chance that you may be pregnant.
X-ray guidance

There is a very small risk from the x-rays used to guide the procedure. We are all constantly exposed to small amounts of radiation in our daily lives due to natural background radiation in our environment. Rocks, building materials, food and drink, and cosmic radiation from space, all provide a radiation dose that we can't avoid. The effective dose from this procedure is approximately 90 µSv, which is about the same dose as you would receive from natural background radiation living in the UK for two weeks.

This radiation dose gives a risk of fatal cancer of 1 in 220,000. This is approximately the same risk as being hit in your home by a crashing aeroplane and would formally be described as a “trivial” risk.

In addition to the trivial risk of cancer, radiation dose to the eyes can also lead to the development of cataracts. These are only caused by radiation dose to the eyes above about 500 mSv. The radiation dose to your eyes from this procedure is very much lower than the dose at which cataracts would be expected to form.
Your questions

Please ask the nurse or doctor if you have any questions when you come to the Day Unit for your injection.

If you have concerns after your injection which are not answered by this leaflet, please contact your GP for urgent serious problems.

A message can be left for your consultant at the hospital.

Please use the space below to note any questions you have to ask.
Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Dr P Toomey, Consultant Anaesthetist, The York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 725505.

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Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

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PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.
Please telephone or email if you require this information in a different language or format

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