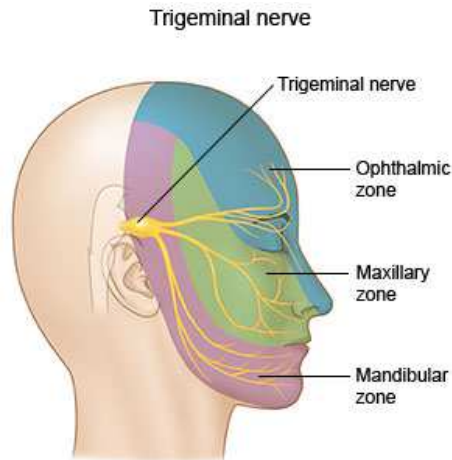


Trigeminal neuralgia is a condition where there is severe nerve pain in the area of the face supplied by the trigeminal nerve. The trigeminal nerve is a special nerve in the face that has three branches. Each branch of the trigeminal nerve carries sensation from different areas of the face to the brain.



## What treatments are available?

Treatment options for trigeminal neuralgia can be separated into medical or surgical therapies. The best treatment plan is made through a thorough discussion with your treating team. Risks and benefits for these therapies can vary between patients.

### Medical therapies

Medical treatment for trigeminal neuralgia can include medications that target nerve related pain. These drugs work by reducing the sensitivity of the trigeminal nerve. Medications are not a cure and recurrence may occur. Ask your doctor about side-effects and contraindications.

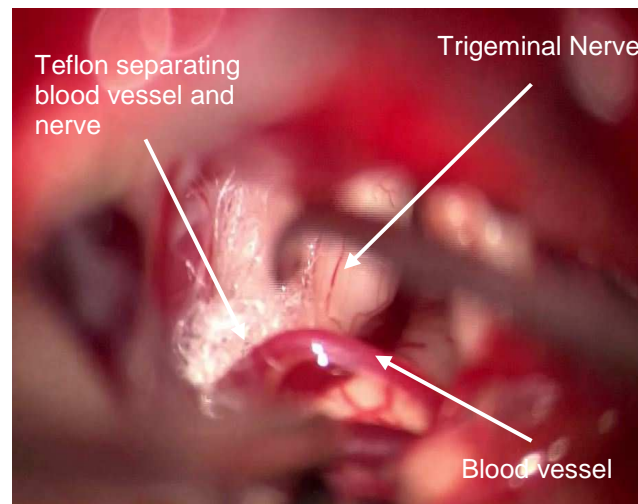
### Surgical therapies

Surgical management options for trigeminal neuralgia include:

1. Microvascular decompression (MVD)
2. Rhizotomy – a procedure that numbs the nerve including:
  - a. Radiofrequency thermocoagulation
  - b. Glycerol injection (chemical injection)
  - c. Mechanical balloon compression
3. Radiosurgery

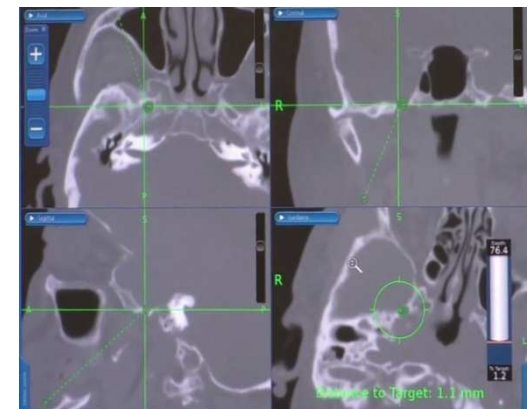
#### 1. Microvascular Decompression

Microvascular decompression is a surgical procedure performed under general anaesthetic. The procedure involves making a small entry in the skull providing access to the trigeminal nerve and the blood vessels that are compressing the trigeminal nerve. Separating the blood vessel from the nerve relieves the pain.



#### 2. Rhizotomy

Rhizotomy can be performed by chemical injection, thermal injury or compression which treats the nerve branch that is responsible for the pain. The procedure can be performed with the patient partially awake with pain relief as required. Being awake allows the neurosurgeon to target the painful nerve branch.



#### 3. Radiosurgery

Radiosurgery uses radiation to treat the trigeminal nerve and achieves a similar effect as rhizotomy. The pain relief unlike a rhizotomy can often have a lag-time of approximately one month.

## After the procedure

Depending on the procedure the hospital stay may vary. The maximum benefit may be seen at different times depending on the treatment option used. Your doctor will organise follow-up appointments to assess your progress.

Ask your doctor for further details and advice for planning recovery.

## Risks, complications & side effects

Risks of surgery may include:

- numbness of the face
- failure to relieve the pain
- infection
- stroke
- other problems

The side-effects vary based on the type of therapy.

Discuss with your doctor regarding more specifics.

## For more information

### Online Resources & Videos

1. Trigeminal Neuralgia Association Australia

<https://www.tnaaustralia.org.au/>

2. Brain Foundation

<https://brainfoundation.org.au/disorders/trigeminal-neuralgia/>

C.I.S. – XXXXXXXX

Consumer Endorsement Date: DD/MM/YYYY

Version No.	Current at	Next Review
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## Consumer Information Sheet

# Treatment for Trigeminal neuralgia



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