

Department of Neurosurgery

# Trigeminal Neuralgia TIC Injection

What happens when you come into hospital



# TIC Injection

This leaflet explains what to expect when you are in hospital for a TIC injection and during the recovery period.

he name of your operation is
ou should expect to be in hospital fornights.
Admission date is
Discharge date is
ou will need to stop the following medication:
days before the surgery.

# What is Trigeminal Neuralgia

Trigeminal Neuralgia (TN) is a chronic pain condition which affects the trigeminal or 5th cranial nerve. It is often caused by irritation or damage due to pressure from a nearby blood vessel.

There are two trigeminal nerves in the face, one on each side. The trigeminal nerve splits into three branches and transmits sensations of pain and touch to the face, teeth and mouth. TN is more common in women and affects approx 5 in 100,000 per year.

The symptoms of TN are sudden bursts of pain, often triggered by talking, chewing, brushing your teeth or exposure to cold. Pain is usually on one side of the face only.

# How the TIC injection works

A solution called Glycerol is injected through your check using x-ray guidance to treat the trigeminal nerve. The injection works by disrupting the transmission of pain through the nerve.

#### Risks of TIC injection

Specific risks relating to TIC injection include:

- failure to help pain
- bleeding
- recurrence of pain
- facial numbness
- weakness of the cheek muscle and painful numbness (rare)

The surgeon will discuss the risks with you before the injection and any specific risks relating to you. If you have any questions, please ask the surgeon.

# The day of admission

On the day of admission at 12.00 hrs you need to telephone **01865 231526** to check that a bed is available for you. You will be given a time to come in. Your operation will usually be planned for the next day.

Some people may be asked to come in on the day of their operation. In this case we will tell you when you need to stop eating and drinking and what time to arrive on the day of surgery.

We will always do our best to make sure you have your operation as planned. However, we do have emergency admissions and sometimes a planned operation may have to be postponed.

# Arriving at hospital

Please come to the Neurosciences Ward on level 2 in the West Wing of the John Radcliffe Hospital. Parking is available under and around the West Wing building.

In accordance with our Privacy and Dignity policy we will always try give you a bed in a bay with other people of the same sex and to make sure you have access to the appropriate shower and toilet facilities. During your hospital stay we may need to move you to another bed or ward. In rare circumstances we may have to put men and women in the same bay. In this case we will make every effort to move you to a single sex bay as soon as possible.

With your permission we will list your name and bed number on a poster board so that all our staff know where you are on the ward.

Visiting hours on the ward are from 3pm to 8.30pm. This allows patients to have time to rest. We request that only **2 people** visit at any one time. Flowers are no longer allowed on the wards for the purposes of health and safety and infection control.

The nurse will explain the menu system and how to order food.

You may require some extra tests and your blood pressure, pulse and temperature will be checked. You will be told approximately what time your operation will be and when to stop eating and drinking.

# The operation

The nurse will tell you when to get ready for your operation. You will be asked to wear a theatre gown and special stockings to reduce the risk of a blood clot (deep vein thrombosis) developing in your leg.

The Surgeon will see you before your operation to explain the operation and any risks involved and to answer any questions you may have.

The anaesthetist will also see you to talk to you about the anaesthetic and the associated risks. You will then be asked to sign the consent

form for the operation to go ahead. When it's time the nurse will take you down to the radiology department, where you will be prepared for your operation.

When you are under a general anaesthetic, a needle is passed through your cheek to treat the trigeminal nerve where it leaves the brain by injecting a small amount of glycerol. This disrupts the transmission of pain. We use x-ray guidance to place the needle in the correct position.

# After the operation

You will wake up in the recovery room. You may have a drip in the back of your hand and you will have a dressing on your face.

You will be taken back to the ward and we will monitor your pulse, blood pressure and wound regularly. We will offer you regular pain relief. It is important that you tell a nurse if you are feeling sick or if you have pain so we can help make you comfortable. It is also important that you change your position in bed at least once every 2-3 hours; the nurses will help you if necessary.

When your condition is stable you will be allowed to get out of bed. The next few days should be seen as an important part of the recovery process.

It is not unusual to experience some discomfort, tingling, numbness or pins and needles after your operation. We expect this to settle with time. If you have increased pain, pins and needles or any other new symptoms you should talk to one of the nurses or doctor, or to your GP if you are at home.

#### Going home

A TIC injection is usually done as a day case procedure – i.e. you will come into hospital and go home on the same day. If you have far to travel or medical problems, we may admit you the day before your surgery.

By the time you leave hospital we expect you to be able to care for yourself, walk up and down stairs and sit in a car for the journey home. It may be sensible to make arrangements for help with shopping, housework, gardening and caring for small children.

# Getting back to normal

The length of time that you need to take off work depends on the nature of your job. As a guide you are likely to need about 1 week off work. If possible, try and return to work part-time to start with to allow yourself time to recover. We can give you a sick certificate to cover the time you need to take off work.

Once you are at home you can gradually increase your activity as you feel able, taking care not to do too much too soon. Allow for periods of rest. Painkillers can be constipating so we encourage you to eat food that will help to keep your bowels working well. Drink plenty of water. Moving around will help to reduce the risk of DVT (blood clots in your legs).

#### Wound care

The wound on your face should be clean and dry. It is important to continue taking your painkilling medication as the injection may cause irritation and swelling inside. Avoid extreme temperature to this area. If your wound becomes red, swollen, sore or leaks you should see your GP as soon as possible.

For most patients recovery takes about 2 weeks, although in some cases it may take longer. An out-patient follow-up appointment will be sent to you for approximately 8 weeks after your operation.

# Questions, concerns and further information

If you have any questions that you would like to discuss before you come into hospital or after you have left hospital you can contact one of the Nurse Practitioners on:

#### Direct line **01865 234975**

Or you can contact the hospital switchboard on 01865 741166 and ask to bleep one of us on the following numbers:

Ruth Trout Bleep 6355

Gillian Hemmings Bleep 6225

If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473**. When we receive your call we may transfer you to an interpreter. This can take some time, so please be patient.

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