

Department of Neurosciences

Occipital Nerve Stimulation – after your operation Information for patients



Going home

Leaving hospital after implantation of an occipital nerve stimulator can feel a little worrying. We hope that during your stay with us we will have answered many of your questions.

This leaflet has been written to give you further support and guidance about your recovery. We feel it is important that you do not feel alone and worried when you leave hospital. If you need any advice or support after you return home, please contact the Advanced Nurse Practitioners on the telephone numbers at the end of the leaflet. Your GP and Practice Nurse are also there to help, as are our Consultant's secretaries and our service administrator.

You will be discharged without the stimulator being programmed, as it uses a lot of energy and we do not recommend charging it while your wound is still healing. We will see you for follow-up after two weeks, when we will remove your stitches and programme your device.

How do I look after my wound?

Your stitches will need to be removed here at the hospital, so that we can monitor how well your wounds are healing. We will give you the date for this and an advice letter about your stitches, before you leave hospital. The wound on your chest will be covered with a dressing. You will need to keep this wound covered for three days after the surgery. We will give you some more dressings to take home.

You won't have a dressing on the wound on the back of your head, as it will not stick to your hair.

You will be able to shower the day after your surgery, but do not soak in the bath, as this may affect how well your wounds heal. You will need to remove the dressing before you shower, then replace it with a new one afterwards.

Signs to look out for

Inspect your wounds daily. You will need someone else to help you or to use a mirror to check the wound on the back of your head. If you notice any of the signs listed below please contact us (telephone numbers are at the end of this leaflet, and will be on your stitches advice letter):

- any leakage from the wound; this may be brown, green, or clear
- any redness or swelling of the wound or skin around it
- a fever or high temperature above 37.4 degrees centigrade
- pain around the wound. You will have pain from the wound immediately after the surgery, but if it does not settle after a couple of weeks or seems to be getting worse please contact us.

Going home checklist

Before you leave the hospital please check that you have the following:

- tablets and explanation documents
- ID card and information
- arrangements made for getting home
- your belongings
- any values which have been locked away
- the letter for your stitches to be removed.

You will be given an ID card, which explains that you have a medical device implant and what steps should be taken in an emergency. You will also be given information booklets with the equipment that you use to control the device.

Will my medication be changed?

You will probably need to continue taking painkillers for the first few weeks or months, while we adjust your stimulator to get you the best pain relief that we can. Even with the stimulator, you may always need to take some medication to help with pain relief. If you are not sure about the medication you should be taking, please discuss this with us at any time.

Once you get home, if you experience any symptoms which are unusual for you, please speak to the Advanced Nurse Practitioners or On-call Registrar (for out-of-hours emergencies) on the numbers at the end of the leaflet.

What about work?

How quickly you return to work depends on what type of work you do. You may wish to discuss this with us before you go home. You are the best person to decide how well you feel and your limitations, but we are also happy to give you advice.

You are likely to need to take 4 weeks off work. We can give you a sickness certificate for your stay in hospital and when you return home your GP can provide further certificates, if needed.

Care of your device

Do not manipulate (move) or rub your Occipital Nerve Stimulator battery through your skin; this is sometimes called "Twiddler's Syndrome". Doing this can cause damage to your stimulator, movement of the leads, skin erosion (wearing away or thinning of skin), or a feeling of pins and needles at the implant site. Fiddling with the battery may also flip over your device, so that it cannot communicate with the patient programmer or recharging device.

Are there any possible complications I should be aware of?

As with any implanted device an infection could develop. The lead or the stimulator could move within your body or push through your skin. It is also possible that the implanted materials could cause an allergic reaction or immune system response, which might cause your body to reject the implant. There could also be unwanted changes in stimulation. However, these complications are unusual and don't happen very often. If you are concerned about the device or any symptoms, please contact the Advanced Nurse Practitioners (see the end of the leaflet for contact numbers).

Your ONS system might unexpectedly stop working due to the battery wearing out or other causes. This complication, which can include wires becoming dislodged or moving out of position, can happen without warning. Please contact us if your stimulator stops working or does not work every time you need it.

What types of activities can damage or move the lead?

Most activities are safe, but you should always follow your Consultant or Advanced Nurse Practitioner's instructions about work, exercise and hobbies. We will discuss these with you after the surgery.

You will be asked to avoid movements that over-extend your neck (such as turning your head while reversing your car), especially during the first 6 to 8 weeks after the device has been implanted.

Although the device leads in your head are made of flexible material, some seemingly harmless or repetitive movements could cause them to become damaged over time, eventually causing the lead to break. You may then need surgery to replace the broken lead.

Will I be able to drive?

You will be able to drive as soon as you feel ready to do so and you are able to move your neck with no extra pain. However, DVLA guidelines state that you cannot drive within 48 hours of having a general anaesthetic. You should also not go home on public transport after this procedure. You will need to be taken home by car. This will be more comfortable for you and also quicker for you to return to the hospital if there are any complications on the journey home.

What should I do about airport security and shoplifting/theft detectors?

Use care when approaching shoplifting or theft detection devices (such as those found by the doors in libraries and some shops), as these can turn off your device or reset it. Your device may also set the alarms off. Try to stay as far away from the actual detection device as you can.

With airport security, you must show your device identification card. This will be given to you when you leave hospital and explains that you have a stimulator implant. You should request a hand search instead of walking through the security gate, but ask them not to hold the scanning wand near the battery any longer than is needed.

If you must pass through a security screening device:

- Turn your system OFF.
- Approach the centre of the security device and walk through normally.
- Keep as far away as possible from the gate(s).
- Do not linger or lean on the security device.
- After you pass through the security device, turn your system ON again to resume therapy.

Can I travel on an aeroplane?

Yes. Your system should not be affected by aeroplane flights.

Can I go in a hot tub, steam room, or sauna?

Yes, but if you feel a hot sensation in the area around your battery you will need to get out.

Can I scuba dive or enter a hyperbaric chamber?

Do not dive below 33ft (10m) of water or enter a hyperbaric chamber above 2.0 atmospheres absolute (ATA). Exceeding these limits can damage your system.

Before diving or using a hyperbaric chamber, discuss the effects of high pressure on your system with your Consultant or Advanced Nurse Practitioner.

Can I skydive or take part in other highaltitude activities, such as skiing or hiking in the mountains, or flying in a non-commercial aeroplane?

High altitudes should not affect your system. However, you should consider the movements involved in an activity and take care to not put undue stress on your implanted system. For example, the sudden jerking which occurs during skydiving when the parachute opens could dislodge or fracture the leads. You would then need to have additional surgery to repair or replace damaged leads.

Are there any specific medical procedures that could interact with my ONS system?

Please speak with your Advanced Nurse Practitioner before having any future medical procedures. If you need to have an emergency procedure and are not able to contact us beforehand, you will need to make sure your device is turned OFF before the procedure starts. This is to prevent interference from other medical equipment.

There are restrictions and risks associated with having a Magnetic Resonance Imaging (MRI) scan if you have an ONS. Failure to follow appropriate guidelines can cause tissue damage and could result in severe injury or even death. If you need to have an MRI scan, please make sure that the staff carrying out the scan know that you have a stimulator implant. Tell them and show them your ID card. Please make sure your friends and family also know to do this, in case you are unable to tell the staff yourself.

Questions or further information

Please contact us if you have any questions or need any further information.

Advanced Nurse Practitioners - Pain Neuromodulation

Tel: 01865 231 874

(Monday to Friday, 8.00am to 4.00pm)

Personal Assistant to Nurse Practitioners

Tel: **01865 572 466**

(Monday to Friday, 8.00am to 4.00pm)

On-call Registrar - Urgent calls only

Tel: **01865 741 166**

(24 hours, 7 days week)

Departmental address

Department of Neurosciences

Level 3 Offices West Wing John Radcliffe Hospital Headley Way Headington Oxford OX3 9DU

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALSJR@ouh.nhs.uk**

Author: Liz Moir, Advanced Nurse Practitioner – Neuromodulation and Pain Management May 2016

Review: May 2019 Oxford University Hospitals NHS Foundation Trust

Oxford OX3 9DU

www.ouh.nhs.uk/information

