



PROCEDURE INFORMATION

OCCIPITAL NERVE BLOCKS/RFA

FOR HEADACHES/MIGRAINES

Occipital nerve blocks are simple procedures for treating headaches and migraines. This information sheet will explain what it is. Your doctor can also explain if this procedure is appropriate for you.

WHAT ARE THE OCCIPITAL NERVES?

The occipital nerves are nerves that provide sensation to the back of the skull. They arise from cervical spinal nerves. They are present on both the left and right sides.

WHAT IS OCCIPITAL NEURALGIA?

You may feel pain if the occipital nerves are irritated or inflamed. Sometimes it feels like simple muscle tension, and other times it can be severe pain.

Pain typically occurs starting at the skull base and may wrap around to the front of the skull and/or to behind the eyes.

HOW DO I KNOW IF I HAVE OCCIPITAL NEURALGIA?

If you touch the area where the back of the skull meets the muscles of the neck, and it elicits headache pains, then you most likely have occipital neuralgia.

Common tests such as x-rays or MRIs do not show if the occipital nerves are causing pain.

WHAT IS AN OCCIPITAL NERVE BLOCK?

In an occipital nerve block, an anesthetic is injected near the occipital nerves. This stops the transmission of pain signals from these nerves.

This procedure may decrease your pain, frequency, intensity, and duration of headaches.

WHAT HAPPENS DURING AN INJECTION?

The injection may start with an IV (medicine given intravenously) to help you relax. A local anesthetic may be used to numb your skin.

The doctor will insert a thin needle near the occipital nerves nerve. Fluoroscopy, a type of x-ray, may be used to ensure the safe and proper position of the needle.

WHAT HAPPENS AFTER AN INJECTION?

You will be monitored for up to 30 minutes after the injection.

When you are ready to leave, the clinic will give you the discharge instructions.

You will also be given a pain diary. It is important to fill this out because it helps your doctor know how the injection is working.

Take it easy for the rest of the day.

You may feel immediate pain relief and numbness in the back of the skull or neck for up to 6 hours after the injection. This tells you the medication has reached the right location.

You can usually return to work the next day, but always check with your doctor.

HOW LONG CAN I EXPECT PAIN RELIEF?

How long you can expect relief depends on how many areas are injured, and on the amount of inflammation.

If your pain goes away for a short time, but then returns, you may be a candidate for radiofrequency ablation (RFA) to the occipital nerves. This procedure provides a more permanent disruption of pain signals.

CONTINUED ON REVERSE...

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WHAT ARE THE POSSIBLE RISKS AND SIDE EFFECTS?

As with all invasive medical procedures, there are potential risks. Risks are rare, but may include infection, bleeding, allergic reaction, headache, dural puncture, temporary numbness or tingling, weakness, and nerve injury.

Side effects are rare and, when they occur, are usually due to the steroid itself. These include, but are not limited to, pain at the injection site, headache, increased blood sugar, water retention, facial flushing, irritability, sleeplessness, burst of energy, and skin discoloration at the injection site.

You should contact your doctor or go to the emergency room if you experience any of the following symptoms: Severe headaches with nausea or vomiting, fever greater than 101°F, loss of control of bowel or bladder function, severe pain, and/or loss of function or feeling in the arms or legs.

THIS PAMPHLET IS FOR GENERAL EDUCATION ONLY. SPECIFIC QUESTIONS OR CONCERNS SHOULD ALWAYS BE DIRECTED TO YOUR PROVIDER. YOUR PROVIDER CAN EXPLAIN POSSIBLE RISKS OR SIDE EFFECTS AND OTHER READILY AVAILABLE TREATMENT OPTIONS