



A Simple Guide To Trigeminal Neuralgia, Diagnosis, Treatment And Related Conditions (A Simple Guide to Medical Conditions)

Kenneth Kee

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Chapter 1

Trigeminal Neuralgia

This elderly gentleman had this condition on the right side of his face for about 12 years

He was on constant painkillers.

The pain was so bad that he had to ask an ENT surgeon to cut off the branch of the nerve that leads to his nose and lip about 10 years ago.

After the surgery, there was no pain for 3 years though he has a bit of facial muscle droop.

However the pain recurred after the third year of surgery.

This time he did not want surgery because of the cost and also because the recurrence occurred even with surgery.

There was also the side effect of a drooped facial muscle.

He was seeing instead a neurologist and his pain was relieved not totally with pain killers and a nerve pain drug called tegretol.

However he had some gastric problem because of the strong pain killer.

Hearing about my injection for osteoarthritis and rheumatism, he came to consult me.

I told him that the injection only worked with joint pain and not nerve pain.

In his case he needed an injection which will kill the nerve.

In those days there was no Botox injection which could kill the nerve.

So what I used was (as recommended by an old medical book) surgical spirit.

This was mixed with a local anesthetic and injection was done into the nerve branch between the nose and lips.

There was a slight droop of the face after the nerve was injected.

Together with some painkiller, antacid and his Tegretol, the pain was reduced considerably.

Each time there was recurrence of pain another injection was given.

He had a total of 4 injections of the surgical spirit before the pain disappeared completely.

He comes to see me together with his wife for rheumatic pain but not for the nerve pain.

Nowadays the new aesthetic or cosmetic physician will probably inject him with Botox which can cost a few thousand dollars.

Sometime an old method worked equally well.

What is Trigeminal Neuralgia?

Trigeminal Neuralgia is a medical disorder that presents as pain along the fifth cranial nerve.

Trigeminal Neuralgia can present as the sudden, lightning-like paroxysms of pain which happens in the pathway of one or more branches of the trigeminal nerve normally on one side of the face.

It is an infrequent condition affecting more women than men.

It is more frequent at the age of 60 years and above

What are the causes of Trigeminal Neuralgia?

1. Compression of the trigeminal nerve by tumors or vascular anomalies (e.g. aneurysm)
2. Trauma- injury to the trigeminal nerve
3. Tumors- pressure of the trigeminal nerve
4. Infections-such as meningeal inflammation of the trigeminal nerve
5. Temporomandibular Joint Syndrome – inflamed temporomandibular joint may compress or produce inflammation in the trigeminal nerve.
6. Multiple sclerosis-the demyelination from multiple sclerosis may be the reason and more frequent in the younger patient.

What are the symptoms of Trigeminal Neuralgia?

The pain is short, lightning-like, paroxysmal and normally severe.

There are recurrent stabbing pains or spontaneous aggravations of pain.

It may occur from a few seconds to 1-2 minutes that is followed by a painless period (refractory).

Occasionally the pain happens in clusters to the extent that the patient believes that it can last for hours.

Typically the maxillary branch is most frequently affected followed by the mandibular, and then the ophthalmic.

Pain usually happen on one side (unilateral), rarely both sides (bilateral).

Pain can happen several times a day.

It seldom happens at night.

There are some triggering factors which can spark off an attack:

A light contact at the trigger zone such as the lips is the most stimulative.

Other triggers are:

1. Shaving,
2. Face washing,
3. Chewing
4. Talking
5. Brushing teeth
6. Sneezing

Introduction

Chapter 1 Trigeminal Neuralgia

Chapter 2 Causes

Chapter 3 Symptoms

Chapter

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Jon Cerrone:

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