

BroadcastMed | Dr Patel - BroadcastMed

So it trigeminal neuralgia, fortunately, is a very rare condition.

The word trigeminal refers to the trigeminal nerve, which is the sensory nerve to the face, or the fifth cranial nerve.

Trigeminal neuralgia is a pain syndrome.

These patients have an acute onset of severe pain on one side of the face or the other.

Often this pain is triggered by non-noxious stimuli or non-painful stimuli.

So they'll have pain when they're chewing or eating or even touching their face, or even wind blowing on their face-- sharp, shooting, stabbing pains, often described as electrical sensations in their face.

In many patients, it can be so severe that they can't even eat.

We've had patients that cannot eat or drink for several days because of the pain.

They come and go.

They're paroxysmal.

There are times when they don't have pain.

But when it does occur, it stops them from doing whatever they're doing.

There are many times that the trigeminal neuralgia patient is quite suicidal because of the pain, because it's not being treatable with medical therapy.

The leading theory about what causes trigeminal neuralgia is that there is a blood vessel or an artery that's sitting right along the trigeminal nerve.

Remember, nerves in the head and neck area are very tiny.

And then in a space behind the head, where the nerves left the brain stem, the nerve is suspended in spinal fluid.

And sometimes the artery starts pulsating on it.

So in patients that have failed medical therapy and other conservative ways to treat the pain, we'll typically recommend a surgery known as microvascular decompression, where through a tiny hole in the back of the skull measuring about 10 millimeters wide, we will, under the microscope, look at the nerve and pull that artery off the nerve.

We typically use material known as Teflon wool to keep the artery away from the nerve.

And that's the entire operation.

Surgery is often recommended after we've gotten an MRI scan of the brain, just to make sure there's nothing else going on, such as tumors or aneurysms or other things like that.

In our case, as is shown in the literature and experience of a lot of people who do microvascular decompressions, it has a 90-plus percent chance of curing the pain problem.

The relief of pain after microvascular decompression varies.

Most people, within a day or two after surgery, will say they've had complete relief of pain.

And they start eating, and they can touch their face, and the pain's gone.

There are some patients, small percent-- I would say 10%, 15% of patients-- who the pain is reduced, not completely gone.

But within 10, 14 days, the pain disappears.

Most patients are quite grateful that they've had the surgery.

They've suffered either for months-- some of them come to me, years of symptoms.

And then once they're pain-free, now they can do everything.

Remember, this pain syndrome's so bad that it removes them from activities of daily living.

They can't work because they get pain attacks.

They can't go eat because they get pain attacks.

But once you do the surgery, it restores their lives.

They don't have to take any drugs anymore or pain medicines anymore.

So I think, fortunate that this is a rare condition.

But in those people who have it, this particular procedure is extremely helpful.

And it's really-- it restores people's lives.