



Stellate Ganglion Block For The Treatment Of Pain

What is a stellate ganglion block?

A stellate ganglion block is an injection to a specific area in the neck through which nerves known as sympathetic nerves pass to your hand, arm, head, neck and chest. A stellate ganglion block will block these nerves to try to reduce your pain. The injection most commonly contains local anaesthetic. The injection is usually undertaken alongside other treatments such as physiotherapy.

Is this the right treatment for me?

Other treatment options will be discussed with you before deciding to go ahead with the injection(s) and your consent is needed. The decision on whether or not to go ahead with the injection is a shared decision between you and your doctor. Your doctor will be able to provide you with up-to-date information about the likelihood of this being a successful treatment for you and how this treatment fits into the best pathway of care. If you are undecided about whether or not to have injection(s) then further advice and information to make this informed decision can be provided. Please speak to your doctor for more information. If your health has changed, it is important to let your doctor know;

- If you have an infection in your body or on the skin of your back, your doctor will postpone the treatment until the infection is cleared
- If you have been started on anticoagulant or antiplatelet medicines that “thin the blood” such as warfarin, heparin or clopidogrel, this may require extra preparation
- If you have any allergies

You must also inform the doctor if there is any chance that you could be pregnant. Finally, if you are planning to fly or travel abroad within two weeks after the injections, please let your doctor know as it may be best to change the date of the injections.

What will happen to me during the treatment?

Before the injection, your doctor will discuss the procedure with you. Your doctor will either obtain your consent before the injection or confirm this consent if it was previously given. The treatment will take place in a dedicated area with trained personnel. An X-ray machine (or other forms of image guidance) will often be used to enable accurate injection. Not all doctors undertake these injections in exactly the same way but the following usually happens;

- You will be prepared for the procedure as per local protocol
- Observations such as blood pressure and pulse rate may be made
- A small needle (cannula) will be placed in the back of your hand
- You will be carefully positioned and the skin around the injection site(s) will be cleaned with an antiseptic solution or spray; this can feel very cold
- You will feel a stinging sensation as local anaesthetic is injected to numb the skin and surrounding tissues. Your doctor will warn you of this first
- The doctor will make a single injection in front of your neck just to the side and below your voicebox or ‘Adam’s apple’ advancing the needle until contact is made with the bony vertebra whilst keeping the needle away from your windpipe. When the injections are made, you may feel pressure, tightness or a pushing sensation. If there is any discomfort, do let the doctor know

What will happen to me after the injections?

After the injections you will be taken to a recovery or ward area where nursing staff will observe you. Sometimes you will be asked to lay flat for about 30 minutes or longer. You will be assisted to sit up and your blood pressure and pulse will be checked. You will be advised when to get dressed and be given assistance to help to ensure that you can stand safely after the procedure.

When will I be able to go home from hospital after my injections?

You will usually be able to return home within a few hours after the injection and in some cases much sooner, depending on how long your doctor or nurse want you to stay for recovery. Please ensure that you have made arrangements for someone to collect you after the procedure. Failure to do so will likely result in your procedure being cancelled. It is unsafe for you to drive home immediately after the procedure. If you do so your motor insurance will be invalid.

What can I do after my procedure?

Ideally, you should arrange for someone to stay with you for 24 hours but, failing that, you should at least have access to a telephone. You should not drive, operate machinery, sign legal documents, provide childcare unsupervised or drink alcohol until fit to do so. If in doubt, please discuss these issues with your doctor for further advice.

When can I return to work after the procedure?

This will vary between individuals and may depend on the nature of your work. It is difficult to give general advice and so you should discuss this with your doctor.

Will I experience any side-effects?

As with any procedure, side-effects may occur. These are usually minor but there are risks with this procedure. Side-effects may include;

- Mild redness and warmth of your hand, arm and neck, short-lived nasal stuffiness, redness of the eye and a drooping eyelid on the side of injection. This may last up to 8-12 hours. This implies the sympathetic nerves have been blocked. In the head and neck, this is referred to as Horner's syndrome.
- Hoarseness of the voice due to temporary block of nerves to the voice box. The nursing staff will ensure that you are able to swallow effectively by trying liquids first and later soft foods
- Mild local tenderness and/or bruising at the site of the injection. This usually settles over the first few days
- The local anaesthetic may rarely spread causing some numbness and/or weakness in your legs (lumbar injections) or arm (cervical injections). Should this occur, the effect is temporary and will rapidly resolve over minutes or rarely hours
- Very rarely local anaesthetic may spread or be injected closer to your spinal cord leading to more generalised weakness. This occurs very rarely shortly after the procedure and requires medical attention
- Infection. This is rare. You should seek medical help if there is local warmth or redness over the site of injection with tenderness and/or you feel hot and unwell. This may require antibiotic treatment
- Injection into the vertebral artery. This occurs very rarely but can lead to collapse and loss of consciousness requiring medical treatment
- Injection treatments are not always effective and may not help your pain
- Pneumothorax (puncture of the lung). This is rarely a risk as the needle is usually advanced above the level of the lung
- Injury to the oesophagus causing severe life-threatening infection (Mediastinitis)

What can I expect in the days afterwards?

You may experience some soreness or aching at the injection site. Please keep the area of the injection dry for 24 hours following the procedure. Do not worry if your pain feels worse for a few days as this sometimes happens. Take your regular pain killers and medications as normal and this should settle down. Try to keep on the move about the house whilst avoiding anything too strenuous.

What should I do in the weeks after the injections?

As your pain decreases, you should try to gently increase your exercise. Simple activities like a daily walk, using an exercise bike or swimming on your back will help to improve your muscle tone and strengthen your muscles. It is best to increase your activities slowly. Try not to overdo things on a good day so that you end up paying for it with more pain the following day.

What follow-up will be arranged?

Though practice may vary, a letter will usually be sent to your GP and your doctor will advise on what to do after the procedure. You may be asked to make a call to the pain department, be given a form to fill in, or given a telephone review or other appointment.

Is there anything else I need to consider before the procedure?

- Please bring your glasses if you need them for reading
- Always bring a list of all current medication
- Continue to take your medication as usual on the treatment day



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