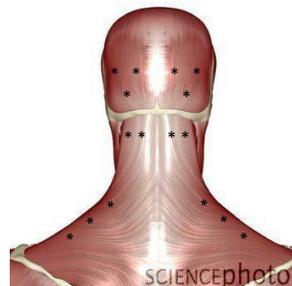
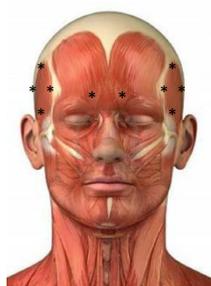




Trigger Point Injections (Occipital Block)

Trigger Point Injections

- Trigger point injections are used to relieve pain in muscle tissue that is knotted and tight.
- Knots are commonly associated with myofascial pain syndrome (chronic, localized pain found in skeletal muscle).
- Tight muscles can often be felt under the skin as hard and rope-like, in contrast with normal muscle tissue that is not constantly contracted.
- Individual trigger points can surround or put pressure on nearby nerves, which causes referred pain when pain signals travel along the nerve to other points in the body.
- Over time, scarring, loss of strength, and limited range of motion can occur and progress.
- The parts of the body most often injected include the neck, arms, and lower back, although any muscle group can be done.
- Trigger point injections are often the recommended treatment for an acute increase (or flare) of the patient's typical chronic myofascial pain that is not responding to other treatment.
- Common trigger point injection sites for migraines:



Trigger Point Injection Medicine

- A mixture of lidocaine and bupivacaine is the most common medication used in trigger point injection. This is the combination used at PIERCEY NEUROLOGY LLC as it offers the benefit of immediate numbing (from the lidocaine) along with longer-acting pain relief (from the bupivacaine).
- Other injection contents may be used, including saline, steroids, and botulinum toxin depending on the clinical situation.
- If a medication other than lidocaine and bupivacaine is used, additional educational information will be reviewed with the patient.

Additional Considerations

- Depending on the type of symptoms you are experiencing and because pain is complex, your provider may recommend an anti-inflammatory medication, such as Toradol, or an anti-nausea medication, such as Zofran, in addition to the trigger injections to help further break your current pain cycle.

How Might the Trigger Injection Help?

- The numbing effect from the trigger point injection medicine may last up to 6 hours.
- During this time, while the pain signal is turned off, your body will be better able to break the flare in the pain cycle.



Post-Injection Care

- A bruise may form at the site of the injection, which can be covered alternately with ice and moist heat for one or two days.
- Moist heat in combination with gentle stretching exercises and massage to the affected area for one or two days increases the probability that the pain will be significantly reduced or will resolve all together.
- Your doctor may also recommend physical therapy or stretching exercises that you can do at home.

What to Look For

- Most trigger point therapy treatments are well-tolerated and without complication. However, as with any invasive procedure, there are some risks and potential complications.
- Any time a needle is put into the body, there is a risk of infection, bleeding, and allergic reaction.
 - The risk of infection or bleeding is similar to having your blood taken at a laboratory.
 - Please remind your provider if you are taking any blood thinners.
 - An allergic reaction to this drug is unlikely, but it is recommended that you seek immediate medical attention if it occurs.
 - Symptoms of an allergic reaction include:
 - Rash
 - Itching
 - Swelling
 - Dizziness
 - Trouble breathing
- Tell your provider immediately if any of these unlikely but serious side effects occur:
 - Drowsiness
 - Mental/mood changes
 - Ringing in the ears
 - Nausea that persists or worsens
 - Dizziness
 - Vision changes
 - Tremors
 - Numbness in an area not injected
 - Non-typical headache
 - Backache
- Discuss with your provider immediately or contact emergency medical help if any of these highly unlikely, but very serious, side effects occur:
 - Fever
 - Unusually fast or slow heart rate
 - Trouble breathing
 - Seizures
 - Chest pain