

Stellate Ganglion Blocks

Patient Information Sheet

1. What is a stellate ganglion block?

A stellate ganglion block (sympathetic block) is an injection of local anesthetic into the front of the neck that is typically ordered by your doctor for pain located in the head, neck, chest, or arm caused by sympathetically maintained pain (reflex sympathetic dystrophy), causalgia (nerve injury), herpes zoster (shingles), or intractable angina. Stellate ganglion blocks are also used to see if blood flow can be improved in circulation problems typically from Raynaud's or CREST.

Stellate ganglion blocks may be therapeutic and /or diagnostic. One of three things may happen.

1. The pain does not go away and there is other evidence of a sympathetic block – the pain is not responsive to sympathetic blocks – this is of diagnostic value.
2. The pain does not go away and there is not good evidence of a sympathetic block – the block is a technical failure.
3. The pain goes away after the injection and stays away longer than the life of the local anesthetic – the block was of therapeutic value. The procedure will most likely have to be repeated to get long lasting benefit. The spacing of injections will be based on how long the pain relief is between injections (usually you will get longer benefit after each injection).

Note: The procedure can not be performed if you have an active infection, flu, cold, fever, very high blood pressure, or if you are on blood thinners. Please make your doctor aware of any of these conditions. *This is for your safety!*

2. What are the risks of the procedure?

The risks of the procedure, though infrequent, include seizure – if the medication is injected into a blood vessel; pneumothorax (collapsed lung); brachial plexus block (numb arm that lasts for hours); spinal or epidural block (temporary weakness or numbness from the neck down); allergy to medication, nerve damage, and bruising at the injection site.

There are some expected changes that result from blocking the sympathetic nerves. These changes last for the life of the local anesthetic (about 4-6 hours). They include drooping of the eyelid on the injected side (Horner's sign), "bloodshot eye" on the injected side, stuffy nose on the injected side and a temperature increase on the injected side. You may also develop hoarseness.

3. Will the injection hurt a lot?

The doctor has to press on your neck to locate the area to be injected. Many patients find this awkward and somewhat uncomfortable. The injection itself is done using a very small needle. The local anesthetic stings/burns going in.

4. What happens during the actual procedure?

After signing a consent form and checking your blood pressure the procedure will be done in the fluoroscopy (x-ray) room with you lying on your back. The front of the neck is then cleansed with an antiseptic soap and a drape is placed. The doctor will press on your neck to identify where to place the needle. At this time we'll ask that you try not to talk, cough, or swallow. When the needle is in the correct place, the medicine (local anesthetic) is put in through the needle. The needle is removed and the procedure is complete. This usually takes about 5-10 minutes. The medicine can take 10-20 minutes to

take full effect. You will be watched during that time. Your doctor will be checking to see if the expected changes take place as well as see what effect, if any, there is on your pain. Your vital signs will be checked. You will be escorted to the recovery area where you will be offered something to eat and drink. You will be monitored in the recovery area for 15 minutes. Your pain level will then be re-assessed and you will be discharged to leave with your ride.

Should your procedure be performed at the hospital, you will recover and be discharged per hospital protocol.

5. **How will I feel after the injection?**

Your neck may be tender or bruised feeling after the injection. One eye will be droopy. This may affect your sense of balance. You may become hoarse; if you do you must be careful swallowing.

If your arm gets numb or heavy you will have to protect it (maybe by using a sling) until sensation returns – usually 4-6 hours. You may take your usual pain medication after the injection.

It is important that you keep track of the amount of pain relief as well as how long the pain relief lasted.

6. **Will I have any restrictions on the day of the procedure?**

Do not eat or drink for 6 hours prior to the procedure. You may take your medications for blood pressure or heart with a sip of water. You may also take your pain medication with a sip of water if you are able to tolerate it on an empty stomach. **If you are DIABETIC or take BLOOD THINNERS, you will need to contact the office prior to your procedure** for instructions, unless you received instructions when you scheduled the appointment. Be aware that some types of blood thinners must be stopped several days prior to your injection which will require the approval of your prescribing physician.

You may not drive for the remainder of the day after your procedure. An adult must be present to drive you home or to go with you in a taxi or on public transportation. **The procedure will be canceled if you don't have a responsible adult with you!!! This is for your safety.**

No heat is to be used in the injected area for the remainder of the day.

No tub bath or soaking in water (i.e. pool, jacuzzi, etc.) for the remainder of the day.

You may return to eating and drinking as usual after your procedure. **Be careful swallowing after the injection (sips of water first) especially if you become hoarse.**

7. **For what reasons should I call the Murphy Pain Center after the injection?**

If you experience new shortness of breath 24-48 hours after the injection or any signs of infection in the area of the injection, you should call the Murphy Pain Center right away at 502-736-3636.