



## Trigeminal Neuralgia – a pain in the... Neck?

Trigeminal Neuralgia is a (quite literally) shocking condition, which causes excruciating pain into the face, jaw and teeth, sensitivity to touch around the cheek, nose, lip and sometimes forehead. It has been described as one of the most painful conditions known to mankind.

Despite the horrific nature of the pain, the causes and mechanisms of TN are not widely known, or at the very least, not agreed upon by researchers and the medical profession. Regular medical treatments include Strong Medication, and quite often decompressive surgery.

The patients with TN that we see at The Headache and Pain Management Centre have usually been seen by any of all of the following Medical Professionals:

- **General Practitioners**
- **Neurologists**
- **Neurosurgeons**
- **Dentists**
- **Facial Surgeons**
- **Psychiatrists**
- **....and many many more**

And yet, despite having been through all the tests, all the scans, and quite often all the treatments that they offer, the shocking pain in the face, sensitivity to touch and the life-altering fear that comes with it still persists.

It leaves people thinking about if the pain will ever end. And quite often, to much darker thoughts than that.

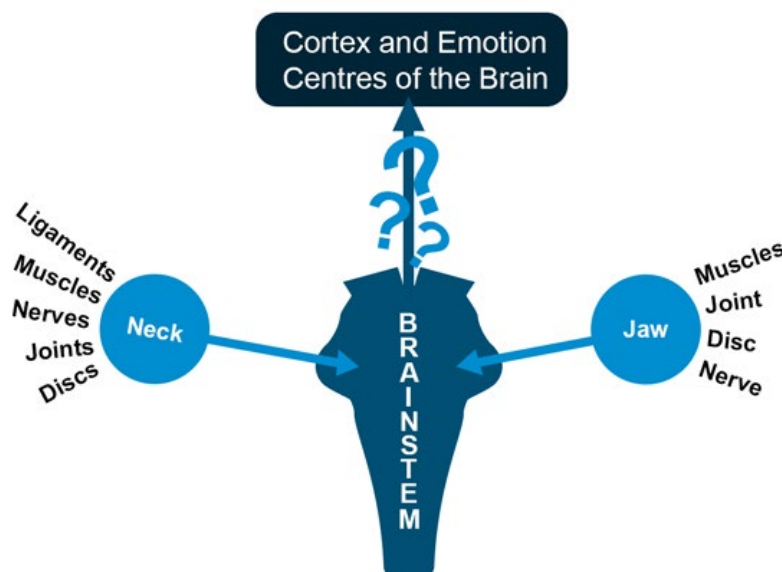
While we never claim to have the all the answers to such a complex condition, we can certainly add a piece to the puzzle – and quite often it's the piece that has been missing.

# The Upper Neck - the Unexpected Culprit in some Facial Pains

The name “**Trigeminal Neuralgia**” literally means “pain in the Trigeminal Nerve”. However, this can be misleading. While at times the pain can be caused by an issue with the Trigeminal Nerve itself – like a direct impact injury, or nerve compression – when TN is diagnosed, all that we really know is that there is pain in the area where the Trigeminal Nerve lives – in the face.

Basically, it means that although it hurts in your face, teeth, lips, and nose – and sometimes can be very sensitive to even touch the skin – the reason for the pain may be coming from elsewhere.

It is a little known fact that the signals that comes from your Trigeminal Nerve, when it gets into your brain, goes to the same place as the signals from the top of your neck (and a couple of other areas as well that are less relevant to TN). What this means, is that if there is an issue with the top of your neck, then it is entirely possible that your brain can get it totally wrong, and assign the problem to your face.



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This causes pain in the face, when there is nothing wrong with the face nerves at all.

It actually happens quite commonly in your body. People living with sciatic nerve pain, have pain in their leg or foot, but the issue is in the lower back. People living with arm pain after a Whiplash injury, actually have an issue with the lower neck.

With TN, when other causes have been ruled out, people living with facial pain may have an issue with the upper neck. The upper neck should be routinely assessed in a person with Trigeminal Neuralgia, by someone very experienced in skilfully assessing it, so that all possible reasons for the pain have been thoroughly checked out.

# How would my Upper Neck be assessed and treated if I have been diagnosed with TN?

**The best way** to assess the Upper Neck is to gently and carefully assess the movement of the top three joints of your neck. This is done by a physiotherapist feeling the movement with their thumbs, and determining if there is a lack of movement there. If there is a lack of movement in one or more of the top three joints (and it is usually on the same side as the facial pain – ie. Right-sided Face Pain = Right sided Neck joint issue), then that would be a green light to begin a course of treatment.

**NB.** It is very important that if you have TN and someone is assessing your neck, that respect is shown for the pain that you are in. It is often extremely sensitive to touch the face, so it is important that whoever assesses the neck is aware of:

- a) Where the therapist's hands are... they would not want to touch the area that is sore
- b) The position of how you are lying – lying face down is often extremely uncomfortable
- c) If the affected area is touched, how long it takes to settle down... the assessment could be over before it starts if the pain is just too bad to bear at the time it is being assessed.

The most common mistake we see from patients that we see at The Headache and Pain Management Centre for the first time, is that previous professionals may identify the correct joint, but due to not being careful around how sensitive the face is to touch, it accidentally serves to irritate the area... effectively scaring patients from having their necks checked again.

**Once it is clear that the neck could be an issue**, then treating the neck becomes the top priority. Usually it takes about 5 sessions to really gauge how progress is going, and the way to tell if treatment is working is:

- The number of attacks per day lessens
- The duration of the attacks lessen
- The intensity of the pain lessens
- The pain begins to respond to less strong forms of medication, or indeed begins to respond to medication.

In the cases we have seen where treatment has been successful (and it does happen surprisingly often), there is very clearly a joint in the upper neck that is not moving as well as it should be. Moving the joint very carefully, in the direction that it needs to move, stops the signal that causes “danger” passing from the neck, and it means your brain no longer sends pain to your face. Of course, if there is no improvement, then perhaps the neck isn't the issue, and more investigation is warranted.

# What is the next step?

**Physiotherapists at The Headache and Pain Management Centre** have all treated TN successfully, and while TN is relatively rare, all of them have seen successful cases in the past three months.

Because no TN case is exactly the same, we spend one hour (or more) in the Initial session to very thoroughly assess if the Upper Neck could be cause, and also assess if there are any other factors that have not yet been considered.

The best way to find out if having your Upper Neck treated would be beneficial is to make an Initial Appointment to see one of our team, to rule the upper neck in or out. Alternatively, our team are very happy to make contact with you via email or telephone, to see if it would be worth making the time to visit.

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