



Occipital Neuralgia

- Symptoms:
 - Piercing, throbbing, or electric-shock chronic pain in the upper neck, back of the head, and behind the ears, usually on one side of the head
 - Typically, the pain spreads upward and can involve the scalp, forehead, and behind the eyes
 - Scalp tenderness, pain when moving the neck, and sensitivity to light may be present
- Causes:
 - The location of pain is related to the areas supplied by the greater and lesser occipital nerves, which run from where the spinal column meets the neck up the scalp at the back of the head
 - Pain is caused by irritation or injury to the nerves as a result of:
 - Trauma to the back of the head
 - Pinching of the nerves by overly tight neck muscles
 - Compression of the nerve as it leaves the spine (due to osteoarthritis, tumors, or other types of lesions in the neck)
 - Localized inflammation or infection
 - Gout
 - Diabetes
 - Blood vessel inflammation (vasculitis)
 - Frequent lengthy periods of keeping the head in a downward, forward position
 - In many cases, no cause is identified
- Diagnosis:
 - Pain relief after an anesthetic nerve block may confirm the diagnosis
 - Other diagnostic testing (x-rays, MRI, etc) may be ordered to evaluate the cause of pain
- Treatment:
 - Prescription muscle relaxants (such as baclofen)
 - Anticonvulsant drugs (such as gabapentin or topamax)
 - Antidepressant medications (such as nortriptyline)
 - Injections to block the nerve signal (such as Lidocaine or botulinum toxin)
 - Surgical referral may be considered in cases where pain is not relieved with multiple medication trials and patient has reliable but temporary relief with injections.

