Madison Neurology LLC: Compiled for Educational Purposes. Not for Clinical Use.

MADISON NEUROLOGY LLC

608 403 0000

Neurology Care 7 days a Week. Because Your Brain Matters.

Trigeminal Neuralgia

Patient education guide · Headache & Facial Pain · Madison Neurology LLC

What is it?

Trigeminal neuralgia causes sudden, severe, electric-shock-like jolts of facial pain on one side, lasting seconds, triggered by the lightest touch — chewing, talking, brushing teeth, or a breeze on the face. It affects the trigeminal nerve, which carries sensation from the face. It is one of the most painful conditions known, and one of the most treatable.

How does it happen?

The classic cause is a blood vessel pressing on the trigeminal nerve root where it enters the brainstem, wearing away its insulating myelin and causing short-circuits of pain. It can also be caused by multiple sclerosis or, rarely, a tumor — which is why MRI is always performed. It typically begins after age 50.

Common symptoms

- Sudden, stabbing or electric-shock facial pain, always one-sided
- Attacks lasting seconds, occurring in bursts, sometimes dozens per day
- Trigger zones: touching the cheek, chewing, talking, cold wind
- Pain-free intervals between jolts; fear of triggering attacks
- Weight loss or social withdrawal in severe, untreated cases

How is it diagnosed?

Diagnosis is clinical from the characteristic description. A dedicated brain MRI (with fine cuts through the nerve) looks for vessel compression and excludes MS or tumors.

How is it treated?

Carbamazepine or oxcarbazepine are first-line and control pain in most patients; alternatives include baclofen, lamotrigine, and others. When medications fail or cause side effects, procedures are highly

effective: microvascular decompression (moving the offending vessel off the nerve — the most durable option), radiosurgery (focused radiation), or percutaneous nerve procedures (rhizotomy). Pain relief after surgery is often immediate.

What does the future hold?

Most patients achieve excellent control. Medications work for years in many, though doses may rise over time; surgery offers long-lasting relief, with microvascular decompression giving the most durable results. Periods of remission are common, especially early in the course.

Questions patients commonly ask

Q: Why does a light touch cause such terrible pain?

A: The nerve's insulation is damaged where the vessel compresses it, so gentle touch signals short-circuit into pain signals.

Q: Is it related to dental problems?

A: It is frequently mistaken for tooth pain — and teeth are sometimes needlessly extracted. The pattern (triggered jolts, normal dental exam) points to the nerve.

Q: If medications stop working, is surgery worth it?

A: For appropriate candidates, yes — microvascular decompression provides long-term pain freedom in the majority, often immediately.

National support groups & resources

- **Facial Pain Association** — facepain.org
- **American Academy of Neurology — Brain & Life patient resources** — brainandlife.org
- **National Organization for Rare Disorders** — rarediseases.org — 1-800-999-6673

(Organization contact details were current at the time of compilation; please verify online.)

Disclaimer — please read

This material is provided by Madison Neurology LLC for general educational purposes only. It is not medical advice, is not a substitute for the independent judgment of a qualified healthcare professional, and does not create a physician-patient relationship. Do not disregard, avoid, or delay seeking professional medical advice, diagnosis, or treatment because of anything in this material. Individual conditions, treatments, and outcomes vary; only your own healthcare team can evaluate your specific situation. If you think you may be experiencing a medical emergency, call 911 or go to the nearest emergency department immediately. To the fullest extent permitted by law, Madison Neurology LLC, its providers, and staff disclaim all liability for any loss, injury, or damage arising from the use of, reliance on, or inability to use this information. Organization contact details are provided as a courtesy, were current at the time of compilation, and may change; Madison Neurology LLC is not responsible for the content of external organizations.