

Living with MS

Trigeminal Neuralgia

Approximately 60% of MS patients deal with chronic pain. One of the most extreme forms of pain an MS patient can experience is trigeminal neuralgia. Trigeminal neuralgia is a type of chronic pain that affects the trigeminal nerve. This nerve carries sensations from your face to your brain. There are two trigeminal nerves, one on the right and one on the left side of your face. Each of the nerves split into three branches: the upper goes to the scalp and forehead, the middle reaches the nose, cheek and upper parts of the jaw and mouth, while the lower goes to the lower parts of the mouth and jaw.

Trigeminal neuralgia is rare in the general population with a prevalence of 0.3%. However, a recent study found that in the MS population approximately 10% of patients deal with trigeminal neuralgia. Trigeminal neuralgia pain is unpredictable and can be triggered by a simple tasks such as eating, yawning, brushing teeth or putting on makeup. Moving your head, talking and hot or cold sensations can also cause the pain of trigeminal neuralgia. Most people report the pain to be an intense searing pain or like an electric shock. Some people also experience numbness and tingling in their face. For some, this pain lasts a couple seconds to a couple minutes while others deal with this pain constantly.

Often time's trigeminal neuralgia is misdiagnosed as a headache, dental pain or even pain associated with shingles. A recent study found that of the 10% of MS patients who deal with trigeminal neuralgia, 15% were diagnosed with trigeminal neuralgia before they were diagnosed with MS and that led to a delay in the diagnosis of MS. In this same study, 17% of the MS patients that were also diagnosed with trigeminal neuralgia, were diagnosed in the same year.

Treatment for trigeminal neuralgia can be difficult. Often, a medication that is used to treat seizures can help calm the nerve endings down and help prevent the pain. Anticonvulsants are medications like carbamazepine, oxcarbazepine, gabapentin and pregabalin. Antispasmodics or muscle relaxers such as baclofen may also be used alone or in combination with a medication like carbamazepine. Opioid pain medications do not usually help pain caused by trigeminal neuralgia. There is some research that indicates botox injections may be helpful when other medications are not working. Or there are surgical options such as a SphenoCath, microvascular decompression, glycerol injections, etc.

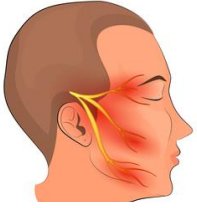
If a patient is not getting relief from one of the previously mentioned options or does not want to take the surgical route, there are complimentary types of interventions that may help. Acupuncture, biofeedback, chiropractic therapy or exercise, specifically yoga, are all potential ways to help alleviate pain. If you are experiencing facial pain, numbness or tingling please discuss this with your MS provider.

<https://msfocusmagazine.org/Magazine/Magazine-Items/Trigeminal-Neuralgia-and-MS>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5649347/>

<https://www.mayoclinic.org/diseases-conditions/trigeminal-neuralgia>

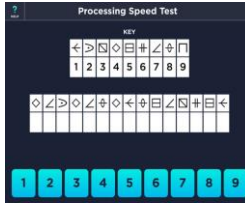
<https://www.ninds.nih.gov/Disorders/Patient-Caregiver-Education/Fact-Sheets/Trigeminal-Neuralgia-Fact-Sheet>



CogEval

The CogEval is an iPad based assessment designed to evaluate cognitive function in patients with multiple sclerosis. It is a two-minute processing speed test that uses attention, psychomotor speed, visual processing and working memory to evaluate cognitive function. It is based on and validated against the Symbol Digit Modalities Test which has been used since the 1980s. It is intended for use only in the healthcare setting and only for MS patients. It is self-administered by the patient and then a healthcare professional can view and record the score using a clinic access code.

Our office is going to start administering this assessment with our patients as a way to track cognitive function and cognitive decline. If you have any questions about this program please give our office a call.



Upcoming Events:

- May 11th – Lincoln MS Walk – our office will have a table in the MS Wellness Village
- May 18th – Omaha MS Walk - our office will have a table in the MS Wellness Village
- Saturday, August 24 – SMC's 4th Annual Health Fair
 - 9am-noon @ Saunders Medical Center
 - Several MS related vendors
 - Free screenings
 - Contact Sam Jack if you have questions or wish to register for heart screenings
- We would like to let our patients know that the MS Clinic will be closed May 27th through May 31st for the International MS Consortium. **Please plan ahead.** Routine medication refills will not be done by our office during this week and routine phone calls will not be returned. Please leave a message on the MS Clinic line at 402-443-1456 for routine needs. If there are any urgent needs during this time please contact Saunders Medical Center at 402-443-1475 to speak with the hospital nurses who will triage the calls.



General Information/Tips

- Due to our increasing patient load, we need to start charging patients who cancel their appointment less than 24 hours in advance.
- Please arrive a half hour before your appointment to ensure there is adequate time for the check in process and our providers do not get behind for other patients.
- To schedule appointments please call registration at 402-443-4191. Our nurse is unable to schedule appointments and will have to transfer you.
- **Please notify Patti at 402-443-4191 ext 533 if you have any change in your medical or prescription insurance. Also please make sure to give registration both cards at check-in.**
- If you have questions regarding the newsletter, please email Sam at sjack@smcne.com.



1760 Co. Rd. "J"
Wahoo, NE 68066
(402) 443-4191



Melissa Fulton, APRN
Abby Chase, APRN
402-443-1456