Dr.ATHMA
Holistic Compassionate Care

Greater Occipital Nerve Block

Patient information leaflet

16.10.2025

Your doctor at the Pain Management clinic has suggested that a greater occipital nerve block may help ease your pain. This leaflet will briefly explain the treatment. It is important that you understand the treatment you will be receiving.

What are occipital nerves?
Occipital nerves travel from your cervical spine, in the neck, to the back of the head and scalp.

What is a greater occipital nerve block?

- A greater occipital nerve block is an injection of local anaesthetic and sometimes an anti-inflammatory medicine (steroid) given to the occipital nerves.
- It numbs the occipital nerves which can reduce their activity, giving pain relief from headaches, muscle spasm and tension that the nerves are associated with.

How long does the pain relief last?
It varies from person to person. It may last from a few days to several months.

What are the benefits?
The benefit of the injection is that it may reduce the pain caused by the occipital nerves and help you to mobilise better and improve quality of life.

Are there any risks or side effects?
We are unable to state the exact frequency of some of these occurring as there is little statistical data available from published clinical trials. However, possible risks include:

- Occasionally bruising may occur around the site of the injection.
- The steroid part of the injection can take several weeks to take full effect so the pain may worsen. This is normal and should settle
- Sometimes people can faint during, or after, the injection. We will monitor your blood pressure and ask you to rest after having the injection.

- There is very low risk of infection (0.1% to 0.01% risk of severe infection.) This risk is increased for people with diabetes.
- Allergic reaction to the injection although this is very uncommon and occurs in less than 1 in 7000 procedures. The reaction can be just a rash, or, even more rarely, a life-threatening event. We will provide treatment for this if you have a reaction.
- If you have diabetes, we will monitor your blood sugar levels after the procedure as the steroid can increase them.

Preparing for the procedure

- Please let us know if you are taking anticoagulant medications (blood thinners) such as clopidogrel (Plavix), warfarin or dipyridamole. You may need to stop these before the procedure.
- If you are taking Warfarin, we will need to do a blood test before you have the procedure. Please be aware that this may cause a slight delay to your treatment.
- You can continue to take all other medications as prescribed.
- You may eat and drink as normal if this is done under local anaesthesia and no sedation .

Information and advice for patients on the day of surgery

- You will be admitted to the hospital for the procedure.
- Please note that this is a mixed sex facility.
- When you arrive, a nurse will check you in and may give you a gown to put on.
- The doctor will then explain the procedure once again and ask you to sign a consent form.
- Please make sure that you understand the procedure and ask any question.

During the procedure

- The whole procedure will take approximately 10-20 minutes.
- The doctor will clean the area.
- Identify the nerve using an ultrasound machine.
- The doctor will identify the nerve, may stimulate it with a nerve stimulator and then inject the local anaesthesia and other medications like a small dose of short acting steroid to reduce inflammation to the nerve.

Position during surgery (sitting, standing, lying down?)

- Depending on patient preference, you will be sitting, lying face down on your tummy or on your side.
- You may feel some discomfort when having the injection but this should only last briefly.
- The area injected may feel slightly numb for up to 24 hours after the injection.

After the injection

- You will be asked to wait for approximately 10-20 minutes to check that you feel alright.

- Once you feel ready, and the staff are satisfied with your condition, you may go home, accompanied by family, a friend or relative.
- You should not drive a vehicle yourself or travel on public transport for the rest of the day.
- You can continue with normal activities the day after.
- We advise you to keep the area where the injection was given clean to reduce the risk of infection. The area injected may feel numb

Follow up
After the procedure you will be followed up either as telephone follow up or face to face follow up in 6-8 weeks' time to assess the outcome and plan the next step forward.

If you have any further questions or concerns about the nerve block or neuromodulation, please do not hesitate to speak with your doctor or nurse.

After the procedure you will be followed up either as telephone follow up or face to face follow up in 6-8 weeks' time to assess the outcome and plan the next step forward.

Are there any alternative treatments?

Alternative treatments may include the following in isolation or combined together.
- Self management through lifestyle modifications
- Different medications as tolerated
- Use of a TENS machine / Physiotherapy/Application of heat or cold/ massage/exercises
- Attending a Pain Management Programme.
- Stress management programmes.

Your doctor will discuss other options with you.

Further information
Occipital Nerve Injection