



Botulinum Toxin for facial pain from trigeminal neuralgia

What is trigeminal neuralgia (TN)?

Trigeminal neuralgia (TN) is a condition that causes sudden, severe facial pain. The pain can feel like an electric shock and usually lasts from a few seconds to up to two minutes. The pain can make every day activities such as talking, eating, drinking and touching the face very difficult. This can have a major impact on a person's quality of life.

Trigeminal neuralgia affects the trigeminal nerve, which carries sensation from the face to the brain. The pain usually affects one or more areas of the face supplied by this nerve.

There are a number of medicines and surgical treatments available. However, some people continue to experience severe pain, have side effects from the treatment, or are unable to receive them due to other health problems or because there is not suitable area to target.

What is botulinum toxin?

OnabotulinumtoxinA, one brand of which is Botox, is a licensed treatment for people with chronic migraine that has not improved with other treatments. It has been used successfully for more than 10 years, with its benefits shown in clinical trials.

It is also used to treat a range of other neurological and non-neurological conditions.

OnabotulinumtoxinA is a purified protein made by a specific type of bacterium. It works by blocking the chemical signals that cause muscles to tighten and send pain signals.

Why is it used in trigeminal neuralgia?

Recent small studies suggest that OnabotulinumtoxinA may help reduce pain in people with trigeminal neuralgia who cannot tolerate or do not respond to standard treatments.

It may work by reducing the pain signals carried by the trigeminal nerve.

OnabotulinumtoxinA is not currently licensed to treat trigeminal neuralgia. However, medicines are sometimes used in neurology for conditions they are not specifically licensed to treat when there is evidence that they may benefit patients. This is known as 'real-world evidence'.

Using OnabotulinumtoxinA in this way could help build evidence for further research and, in time, lead to new treatment options for people with trigeminal neuralgia.

How is it done?

The treatment involves a number of small injections of OnabotulinumtoxinA (branded Botox®) into the face and head. You will usually have between 10 and 30 injection sites, depending on where you experience pain and which branches of the trigeminal nerve are affected.

Some injections may also be given in areas of the head used in the standard Botox treatment for chronic migraine.

The procedure usually takes around 10–15 minutes.

What are the benefits?

The aim of treatment is to reduce how often you have facial pain, how severe it is and how long it lasts.

If the treatment is effective, it may allow you to reduce some of your pain medication and could improve your quality of life, sleep and ability to carry out everyday activities.

Possible side effects?

Botox is generally well tolerated. The injections may cause a brief stinging or sharp sensation. If your skin is sensitive, the injections may temporarily make your facial pain worse.

Other possible side effects include:

- Pain, redness, minor bleeding or swelling where the injections are given
- Temporary weakness of the face, which may affect mouth movement or smiling
- A drooping eyelid
- Headache
- Neck pain, depending on where the injections are given

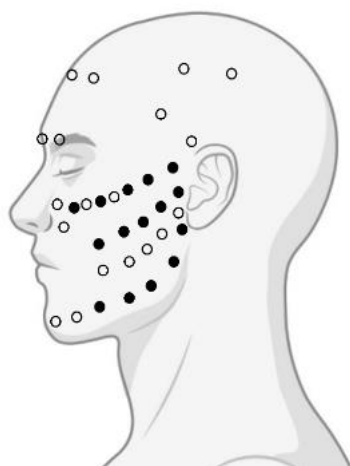
Facial weakness is more likely when injections are given closer to the mouth. If this happens, it can take a few months to fully resolve.

You can safely drive home after the procedure and continue with your usual activities. We recommend that you do not rub the areas where you have had injections, or wash or dye your hair or face, for 24 hours afterwards.

How long does the effect last?

The effects of the treatment usually last around 10–12 weeks, although this can vary from person to person. The treatment does not work immediately, and it may take some time before you notice an improvement.

Treatment is usually repeated every 12 weeks to maintain the benefit. Regular reviews with a specialist will help assess how well the treatment is working and whether any changes are needed.



Potential facial Botox injection sites for trigeminal facial pain.

The injection sites will be tailored to your individual pain and symptoms.

Solid dots show the usual approximate locations for injections. Circles show additional areas where injections may be given, depending on your pain.

There is currently no agreed national or international standard for where Botox should be injected to treat trigeminal facial pain.

Who should not have facial botox?

The use of botox is not recommended for -

- People who have had recent botulinum toxin for other reasons.
- People with neuromuscular conditions such as myasthenia gravis.
- Those who are taking certain medications - muscle relaxants, antibiotics (such as aminoglycosides – gentamicin).
- Those with infection or inflammation where the injections would be given
- Those with bleeding disorders.
- Pregnant or breast-feeding women – For more information please see Bumps website [Bumps - Best use of medicines in pregnancy](#)

Do I have to have this treatment or continue with it?

As with any treatment options, you need to agree for botulinum toxin to be given and continued. You will be asked to sign a consent form before beginning treatment but can withdraw your agreement to continue at any time if you are not happy to continue. This will not affect your other treatment or care from your consultant neurologist.

Further queries?

If you have any further queries, or would like more information, please contact the Headache team, Department of Neurology at Queen Elizabeth Hospital Birmingham B15 2TH – Headache@uhb.nhs.uk.

Disclaimer: Botox treatment for this indication should only be delivered by clinicians and health care providers with appropriate training and experience in headache and facial pain management.

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