

# Stellate ganglion block

[Stellate ganglion blocks](#) have been shown to provide effective pain relief in a number of different conditions involving the upper body. This was demonstrated in a 65-year-old woman who had experienced severe debilitating pain in her left temporomandibular joint (TMJ) and the surrounding area of her face for over 10 years. The pain was unresponsive to indomethacin, carbamazepine, sodium valproate, gabapentin, lithium, melatonin and amitriptyline. She had also had four surgical procedures to the TMJ without success. The pain was partially responsive to Syndol tablets and pregabalin, although the use of pregabalin was limited by its adverse effects. The patient underwent 13 ultrasound-guided stellate ganglion blocks over a 24-month period which demonstrated 90% pain relief for up to 10 weeks. Pulsed radiofrequency lesioning showed no benefit over stellate ganglion block. More recently, [tapentadol](#) was found to be effective and this replaced the stellate ganglion blocks <sup>1)</sup>.

<sup>1)</sup>

Jones GP, Tripathi SS. Successful use of stellate ganglion block and a new centrally acting analgesic with dual mode of action in a resistant temporomandibular joint pain. BMJ Case Rep. 2014 May 20;2014. pii: bcr2013203308. doi: 10.1136/bcr-2013-203308. PubMed PMID: 24849638.

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