



Oxford University Hospitals
NHS Foundation Trust

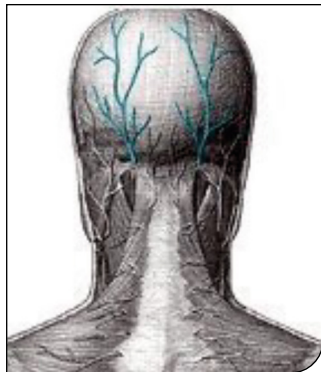
Greater Occipital Nerve (GON) Injection

Information for patients



What is it?

GON injection involves injecting a small dose of local anaesthetic (lidocaine) and steroid (methylprednisolone) around the greater occipital nerve, which is located at the back of the head, at the top of the neck.



Why is it done?

In people with chronic or disabling headaches, it has been shown that injecting the GON, as part of a headache management plan, can provide temporary benefits in approximately two out of three cases. These benefits are typically short-lived and may last a few weeks, but on occasion people get considerably longer periods of relief. The headaches may ease in frequency or severity or stop for a period. In about one in three cases, the injection does not provide any benefits.

Please note that there is usually no advantage to giving the injection to someone whose headaches are in remission. If your headaches have settled down between the time of booking the injection and the appointment itself, please discuss this with us first.

Are there side-effects?

As with any injection, there is a small risk of bleeding or bruising at the injection site, and a theoretical risk of infection, which has not been a problem in our experience. On rare occasions, people describe a worsening of the headache, which is usually quite short lived. Some people can experience dizziness after the injection, which is why we advise you to remain for half an hour afterwards to ensure that you feel okay before going home.

On a couple of occasions (less than 1% of injections to date) patients have experienced a small area of hair loss at the site of injection, as shown in the photograph on our consent form (attached). This is obviously more likely to be a cosmetic issue in those with short hair rather than long hair and is a rare complication of the injection.

If you have any questions or concerns about the injection, please feel free to discuss them with the doctor prior to proceeding with the injection.

What does it feel like?

Prior to carrying out the injection, the clinician will feel around the area to locate the tender spot which is suitable for injection. This process can be uncomfortable. The injection itself uses a fine needle and, while the local anaesthetic can sting a little, the procedure is generally well tolerated and only takes a couple of minutes. People often report hearing the fluid being injected, due to the site of the injection,



but again this is not bothersome for most people. The area of skin is swabbed with alcohol prior to the injection and we will ask you to apply a little pressure to the area afterward to minimise bruising.

How soon can I go home?

Because some people can feel dizzy after the injection, we ask you to wait for half an hour following the procedure to ensure that you feel well, and check with the nursing staff before leaving.

Will it help my headache?

This is difficult to predict with any certainty, but your doctor will have arranged it because they felt that the injection is worth trying, and overall, most people do benefit from it. Please note that, in people who have had this injection previously, the benefit can vary a bit from one occasion to the next. Our experience is that the injection is most helpful when given at the point which is most tender, so establishing the "right spot" prior to injection gives us the best chance of success.

What happens next?

When you are ready to go home you will be given a form to complete and return (to your consultant's secretary) one month after the injection. This gives us feedback as to whether the injection has been helpful or not. Usually, if there has been no benefit from the injection in the first seven to ten days, then it is unlikely to occur after this.

Notes

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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September 2024
Review: September 2027
Oxford University Hospitals NHS Foundation Trust
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