This handout will help you learn more about your stellate ganglion block: what to expect, how to get ready, and what to watch for when you get home.

When and where will the block be done?

<table>
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<tr>
<th>Date of procedure:</th>
<th>Homer 2, Memorial Pavilion</th>
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<tbody>
<tr>
<td>Time of procedure:</td>
<td>Royal Jubilee Hospital</td>
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<tr>
<td></td>
<td>1952 Bay Street</td>
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<td>PLEASE ARRIVE 30 MINUTES BEFORE PROCEDURE</td>
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VIHA Pain Program Web site: [www.viha.ca/pain_program](http://www.viha.ca/pain_program)

If you need to cancel, please contact the Pain Program at least 48 hours before your procedure.

What is a stellate ganglion block?

A block is an injection of a local anaesthetic (freezing) near a group of nerves. The freezing “numbs” the nerves and blocks pain signals. When a block is done near a group of nerves called a stellate ganglion, it is called a stellate ganglion block.

A stellate ganglion is a cluster of sympathetic nerves grouped in a star shape.

Sympathetic nerves are small nerves that travel along your spine. The sympathetic nervous system controls sweating, heart rate, blood vessels, pupil dilatation, movement of food through the bowel, and many other body functions. In this case, the stellate ganglions are the ones located in the neck on either side of the voice box.

Why is a stellate ganglion block done?

A stellate ganglion block is usually done to treat or diagnose pain in the arm(s) or face. Blocking the sympathetic nerves can reduce pain, swelling, colour, and sweating changes in these areas. It may improve blood flow and your ability to use your arm(s). Stellate ganglion blocks can also be used to help find out if the sympathetic nerves in your neck are the cause of your arm or face pain. Learning more about the cause of your pain can help you and your doctor decide on the best treatment for you.
Who will do the block?

The Pain Program doctor will explain the procedure to you and do the block. The injection may take only a few minutes. Sometimes an X-ray or CT scan is used to guide the needle in place. If this applies to you, the procedure may take 30 minutes or longer.

Are there any side effects or risks with this procedure?

Although a nerve block is generally safe, no procedure is risk free. Possible side effects and risks are:

- Temporary pain and/or bruising over the injection site.
- Numbness and some weakness of the arm(s). This may last 2-3 hours.
- Allergic reaction to the local anesthetic or contrast dye.
- Pain symptoms do not change or get worse.
- Rare complications include: injection into a vein or artery, injection into the epidural space, vocal cord paralysis, collapsed lung, and infection.

How do I get ready for the nerve block?

- Please review pamphlet: “Simple Steps for a Safe Outpatient Visit”.
- Wear comfortable clothing that is easy to take off and put on. Wear low heeled, non-slip shoes.
- Avoid wearing scented products such as perfume or aftershave.
- Arrange for a responsible person to bring you to the hospital and take you home (by car, taxi or bus). Make sure this person can be contacted by phone at anytime during the day of your procedure. You cannot drive yourself or go home alone in a taxi or bus.
- Make sure you have access to a phone when you get home after the procedure. This is so you can contact the hospital in case you have a reaction to the procedure.
- Tell the Pain Program doctor and nurses if you have any allergies. Make sure to tell them if you have ever had a reaction to the dye used when begin X-rayed.

Stopping medications

- **Important!! Do not stop any medication without direction!**
- We need to know in advance if you are an insulin-dependent diabetic.
- **If you take an injectable blood thinner (e.g. low-molecular weight Heparin), tell your Pain Program doctor or clinic staff at least 7 days before your procedure.**
- If you take any of the following anticoagulants (blood thinners), you will be directed to stop them 7 days before your procedure:
- clopidogrel (Plavix®)
- dabigatran (Pradax®)
- rivaroxaban (Xaralto®)
- warfarin (Coumadin®)
- apixaban (Eliquis®)

- If you take warfarin, ask your family doctor to arrange for an INR blood test to be done the day before your procedure. If your procedure is scheduled on a Monday, the INR can be drawn on admission to hospital. If your INR is too high, your procedure will need to be rescheduled.

- Take all other regular medications with a sip of water on the morning of your block unless your Pain Program doctor has told you not to.

- Do not take your pain medications for at least 4 hours before your procedure. This helps us find out if the stellate ganglion nerves are involved in your pain.

**Eating and drinking:**

This can vary, depending on medications you may receive during the procedure. Your pain doctor or nurse will tell you if they want you to observe the restrictions below:

- **No solid foods** for 5 hours before the procedure. This includes chewing gum and sucking on hard candies.
- Clear fluids are allowed until 3 hours before your procedure time.
- **No fluids at all** in the 3-hour period before your scheduled procedure time.

**Clear fluids include:**

- Water, clear tea, coffee without cream
- Pop, soda, or popsicles
- Jell-O (with no added toppings or fruit)
- Fruit juice without pulp (e.g. apple juice)

**Clear fluids DO NOT include:**

- Milk, non-dairy creamer, protein beverages, dairy beverages, tomato or orange juice with pulp
- Alcoholic beverages

**How is the procedure done?**

- You will have an intravenous (IV) placed in a vein in your arm or hand. In the procedure room, the nurse will check your blood pressure and measure the oxygen in your blood using a clip on the outside of your finger. The nurse may also give you oxygen through your nose or a mask.

- You will lie on your back with your neck and shoulders on a pillow. The area to be injected will be cleaned with an antiseptic solution.

- The doctor will numb the skin and deeper tissues using a very thin needle before inserting the block injection needles.

- Local anaesthetic such as Lidocaine or Bupivacaine is used for the block. You may feel strong pressure, but little pain, during the injection.
Soon after the injection, you should notice that the arm on the side that was injected will feel warm, and/or you may get pain relief. You will also notice:

- Flushing (redness) of the face.
- Drooping of the upper eyelid, elevation of the lower eyelid, constriction of the pupil, and/or a watery red eye.
- Hoarseness of voice, sensation of a “lump in your throat”, or slight difficulty breathing or swallowing.
- Nose feeling “blocked”.

A bandaid will be placed over the injection site. The nurse will continue to check your heart rate and blood pressure until you are ready to go home.

**Care at home**

- **You must not drive the day of your procedure.**
- Resume your regular activities, but take it easy for a day or two. Do not do anything strenuous for at least 24 hours.
- Do not eat hot foods or drink liquids if your voice is hoarse. Drink sips of fluids until your voice sounds normal and you don’t feel like you have a lump in your throat. This usually takes about 6 hours. You can begin to eat soft foods once you can take fluids safely.
- You may shower the day of your procedure. Do not take a tub bath until the day after.
- If the injection site is painful apply ice or a cold pack over the injection site. Put it on and off for about 15 minutes each time.
- You may want to take some pain medication before the local anaesthetic wears off. You can take an anti-inflammatory such as ibuprofen, or take a medication that you normally take for pain.
- If a local anaesthetic was used, your pain may return in a few hours. If alcohol was used, the results may last for several weeks or months. The procedure may need to be repeated.
- Keep a diary of your pain following the injection. This will help when discussing the results of your injection with your doctor.

**Call your family doctor or the Pain Program if you have:**

- Chills or fever of 38.3°C or greater
- Headache
- Redness or drainage at the injection site
- Any other unusual or new symptoms
- Increase in pain or your legs are getting weak
- Redness or drainage at the injection site
- Increase in pain or your legs are getting weak

If your doctor or Pain Program staff is not available, go to the nearest Emergency Department.

The information in this handout is intended only for the person it was given to by the health care team. It does not replace the advice or directions given to you by your doctor.