

CLINICAL FEATURES AND MEDICAL MANAGEMENT OF TRIGEMINAL NEURALGIA – A RETROSPECTIVE ANALYSIS OF 61 PATIENTS

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Trigeminal Neuralgia (TN) is one of the classical neuropathic conditions of sudden onset with severe, stabbing pain occurring in the distribution of trigeminal nerve. The pain is typically precipitated by non-painful stimuli such as washing the face, light touch, shaving, eating, smoking and brushing teeth. Pain is characteristically paroxysmal lasting only for a few seconds and is usually of extreme intensity.

This study was undertaken to identify the clinical features and to assess the treatment outcome of patients with TN. The study consisted of 61 patients who attended the Oral Medicine Clinic, Dental Hospital (Teaching) Peradeniya, Sri Lanka, during the four-year period from July 1998 to July 2002. All the cases included in the study were selected on the basis of clinical and radiological diagnosis. The parameters analysed included age of onset, gender, site of involvement, initial response to the medication, exacerbation, drug regimes at the maintenance and side effects.

Results revealed that TN was more common in females (57%) than in males (43%). However, there was no statistically significant difference between sex groups ($p=.249$). Right side of the face was involved with greater frequency ($p=.003$) and the peak incidence was found between 5th and 6th decade of life. There was a greater involvement of the mandibular branch than the maxillary branch ($p=0.015$).

Fifty (82%) patients were treated with CBZ alone and 62% of them showed a good or considerable response within a one-month period. The rest of the patients were treated with various combinations of CBZ, phenytoin and amitriptyline and 64% of them showed good or considerable response. Out of all the patients who showed good or considerable response, 21 (55.2%) patients had acute exacerbation necessitating increasing doses. With regards to the long term management CBZ alone remained effective only in 18 patients (29.5 %) and the rest needed a combination of phenytoin, amitriptyline and sodium valproate. Only 2 patients (3.3%) were completely pain free for more than 4 months and hence their treatment was terminated.

Based on these results it could be concluded that medical treatment is effective in the management of TN pain. Although CBZ gives very good initial results, combination with other drugs is needed for long-term pain control.