

Greater occipital nerve injections of methylprednisolone alone or in combination with lidocaine in episodic and chronic cluster headache

Valentina Favoni*¹, Sabina Cevoli ², Giulia Giannini¹, Enrico Farinella¹, Pietro Cortelli¹, Giulia Pierangeli¹

¹Department of Biomedical and NeuroMotor Sciences (DiBiNeM), Alma Mater Studiorum – University of Bologna Italy, IRCCS Istituto delle Scienze Neurologiche, Bologna, Italy
²IRCCS Istituto delle Scienze Neurologiche, Bologna, Italy

Aim

To evaluate the effect of greater occipital nerve (GON) injections of *methylprednisolone alone or in combination with lidocaine* as treatment in cluster headache patients.

Conclusions

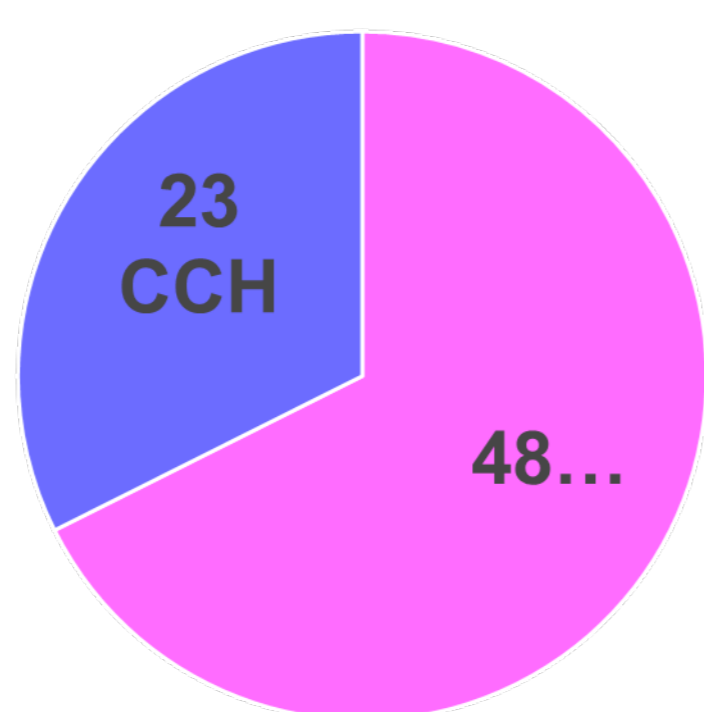
- GON injections of methylprednisolone alone or in combination with lidocaine are both effective in treating cluster headache, with long term effect.
- GON injections of steroids may be superior to anesthetics in combination to anesthetics in treatment of chronic CH.

Methods

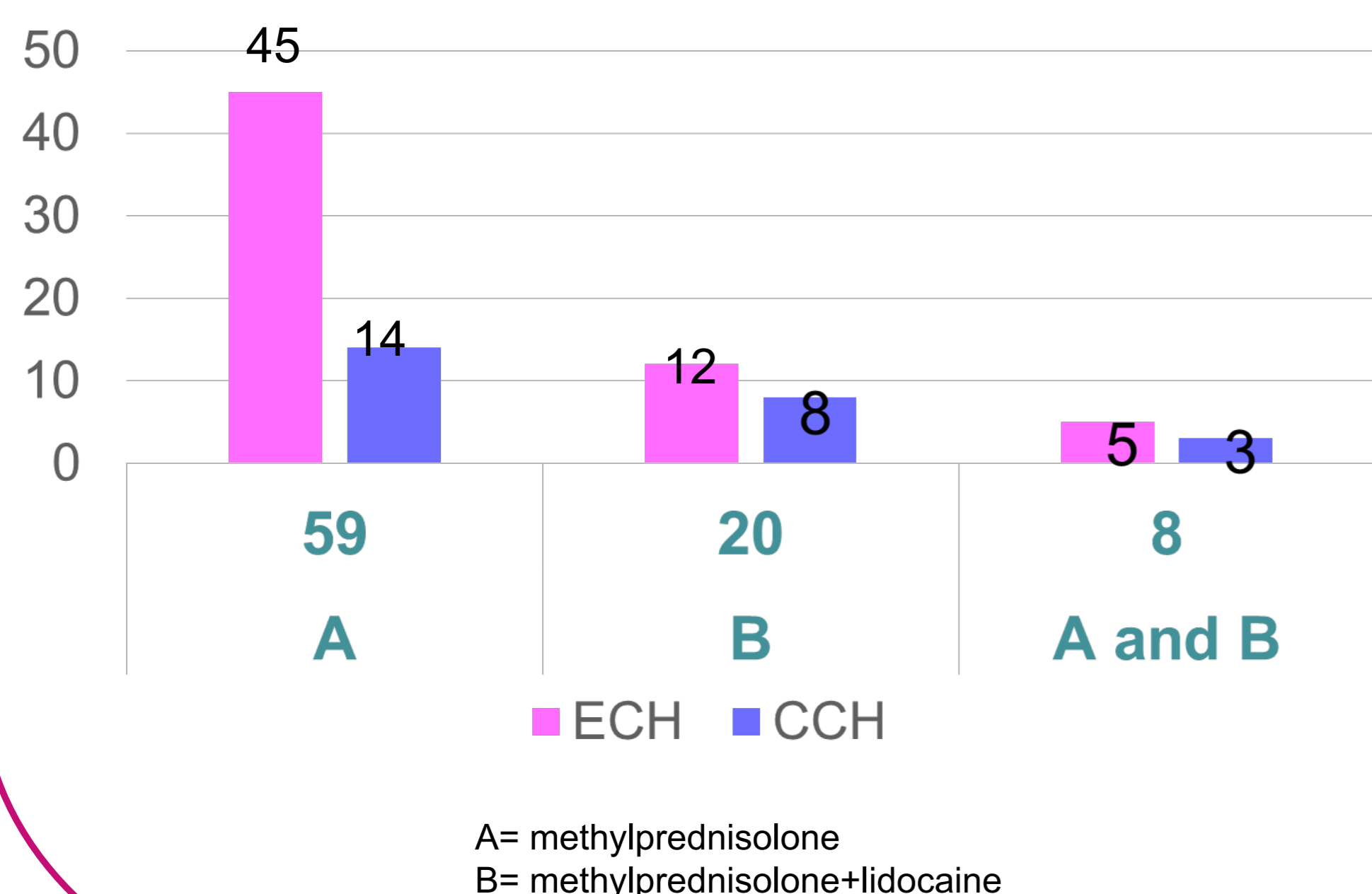
- Patients suffering from active chronic (CCH) and episodic (ECH) CH were prospectively recruited.
- During active bouts, patients received three repeated GON injections every other day of 80 mg of methylprednisolone (A) or a single injection of a 80 mg of methylprednisolone mixed with 2 mL of 2 % lidocaine (B).
- Responders were classified as having a total remission for at least one month.

Results

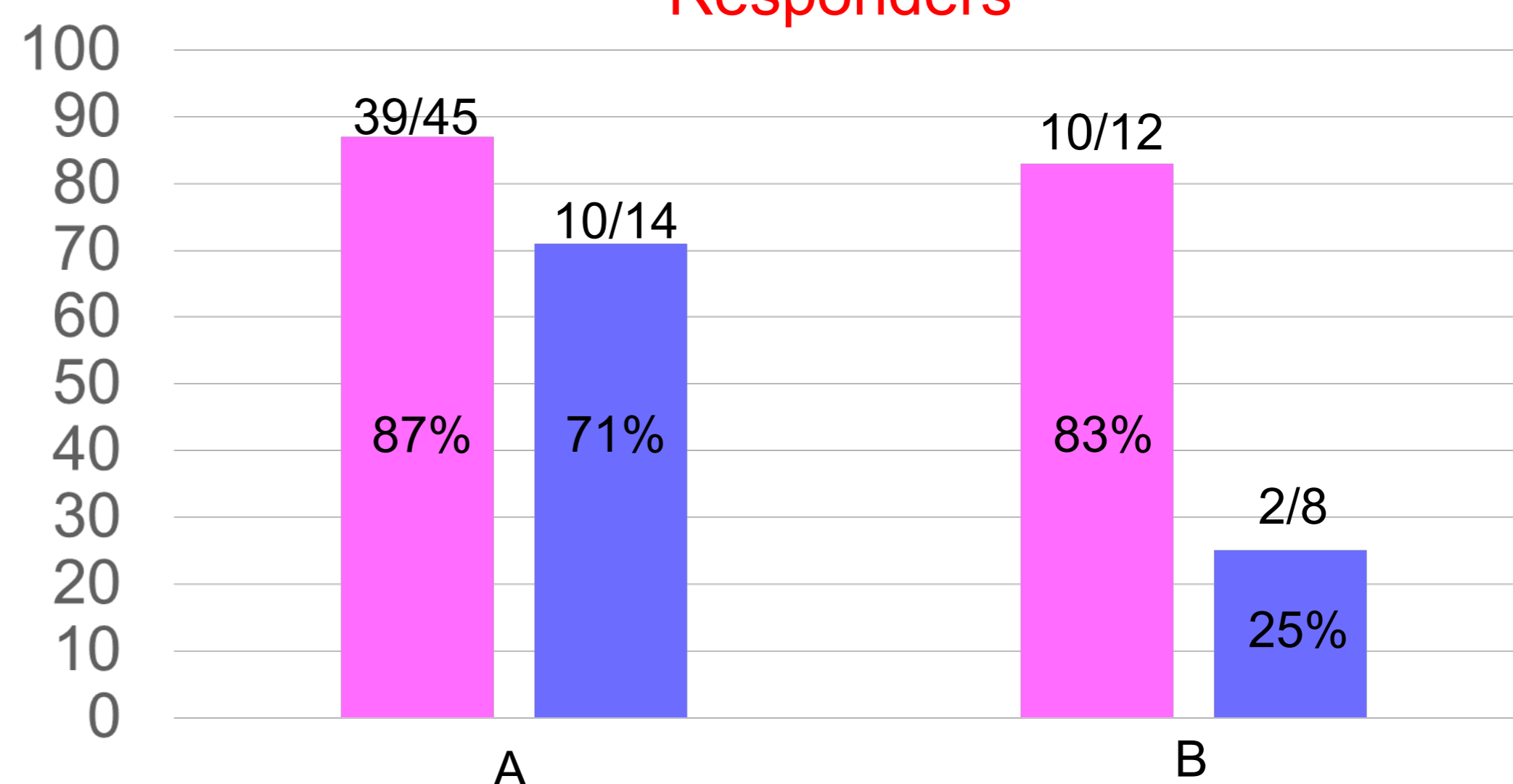
71 patients were enrolled



Treatment



Responders



- Responders were 49/59 (83%) in A e 12/20 (60%) in B.
- Remission lasted between 2 months and 30 months in both A and B.
- Among patients that received both treatments, 6 of 8 achieved the same effect either with A or B.
- No serious adverse event were reported.

References

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