

Discharge following Occipital Nerve Stimulation

You have been given this leaflet because you have been implanted with an Occipital Nerve stimulator for treatment of your chronic pain condition. This leaflet contains answers to some of the questions patients most often ask when they go home. It is intended as a guide. If you have any specific queries that are not answered here, please discuss these with your nurse or doctor.

Going home and contact

You may feel concerned about the thought of returning home after your operation. Hopefully during your stay with us your questions will have been answered. This leaflet has been designed by the Neuromodulation team to give you support and guidance about your recovery at home.

We feel it is important that you do not feel alone and isolated at home, so please do not hesitate to call us if you need specific advice. Your neuromodulation nurse has an answer phone system which you can reach on **020 8725 2332**.

Alternatively your GP and practice nurse are there to help as is Mr Pereira's secretary who can be contacted on **020 8725 4173**. You can also contact the neurosurgical wards.

We do not advise using the stimulator for the first two weeks to avoid the need to charge the device whilst your wound is still healing.

How do I look after my wounds?

Your stitches will need to be removed here at the hospital so that we can monitor how the wound is healing. We will give you a date for this before you go home. The wound on your chest will be covered with a dressing and you will need to keep this wound covered for three days after the surgery. We will provide you with spare dressings to take home.

You won't have a dressing to the wound on the back of your head as it will not stick to your hair.

You will be able to shower the day after your surgery but not soak in the bath, as this may affect how well your wounds heal.

Signs to look out for

Inspect your wounds daily, you will need someone else to help you or to use a mirror to check the wound on the back of your head. In the event of:

- Any leakage from the wound. This may be brown, green or clear.
- An increase in soreness or very bad itching after initial improvement post-operatively.

- Redness or any swelling or pain at or around the wound site.
- Any fever/high temperature.

Please also contact the Neuromodulation team at the Hospital.

Care of your device

Do not manipulate (move) or rub your Occipital Nerve Stimulator battery through your skin; this is sometimes called “Twiddler’s Syndrome”. Doing so can cause damage to your stimulator, movement of the leads, skin erosion (wearing away or thinning of the skin) or a feeling of pins and needles at the implant site. Fiddling with the battery may also flip your device over and stop it being able to communicate with your controller or charger.

What types of activities can damage or move the lead?

Most activities are safe, but you should always follow the advice from your Doctor or Nurse regarding work, hobbies and exercise.

You will be asked to avoid movements that over-extend your neck (such as turning your head whilst reversing your car). This is especially important during the first six weeks after the device is implanted.

Although the device leads in your head are made of flexible material, some seemingly harmless or repetitive movements could cause them to become damaged over time, eventually causing the lead to break. You may then need surgery to replace the broken lead.

Will my medication be changed?

You will probably need to continue taking painkillers for the first few weeks or months, while we adjust your stimulator to give you the best pain relief that we can. Even with the stimulator, you may always need to take some medication to help you with pain relief. If you are unsure about the medication you are taking please discuss this with your Nurse or Doctor.

Once you get home, if you experience any symptoms that are unusual for you, please consult your GP, or contact the ward or Nurse Specialist.

What about work?

How quickly you return to work depends on what you do. You should discuss this with your Doctor before you leave hospital. You are the best person to decide how well you feel. A period of four to six weeks off work is not unusual. If you need a sickness certificate please ask for this before you go home, otherwise please speak to your GP.

Will I be able to drive?

You will be able to drive as soon as you feel ready to do so and you are able to move your neck with no extra pain. However, DVLA guidelines state that you cannot drive with 48 hours of having a general anaesthetic. You should also not go home on public transport after this procedure. You will need to be taken home by car. This will be more comfortable and will also be quicker for you to return to hospital if there are any complications on the journey home.

What about complications?

As with any implanted device, an infection could develop. The lead or stimulator could move within your body or push through your skin. It is also possible that the implanted materials could cause an allergic reaction or immune response, which might cause your body to reject the implant. There could also be unwanted changes in stimulation. However, these complications are unusual and don't happen very often. If you are concerned about the device or any symptoms please contact the Nurse Specialist.

Your ONS might unexpectedly stop working due to the battery wearing out or other causes. This complication, which can include wires being dislodged or moving out of position can happen without any warning. Please contact us if your stimulator is not working as it should.

What should I do about airport security and shoplifting/theft detectors?

Use care when approaching shoplifting or theft detection devices (such as those found by the doors in libraries and some shops), as these can turn off your device or reset it. Your device might also set off the alarms. Try to stay as far away from the actual detection device as you can.

With airport security, you must show them your device identification card. This will be given to you when you leave hospital and it explains that you have a stimulator implant. You should request a hand search instead of walking through the security gate, but ask them not to hold the scanning wand near the battery any longer than is needed.

If you must pass through a security screening device:

- Turn OFF your system
- Approach the centre of the security device and walk through normally
- Keep as far away from the gates as possible
- Do not linger or lean on the security device
- After you pass through the security device, turn ON your system again to resume therapy.

Can I travel on an aeroplane?

Yes, your system should not be affected by aeroplane flights.

Can I go in a hot tub, steam room or sauna?

Yes, but if you feel a hot sensation in the area around your battery you will have to get out.

Can I scuba dive or enter a hyperbaric chamber?

Do not dive below 33ft (10m) of water or enter a hyperbaric chamber above 2.0 atmospheres absolute (ATA). Exceeding these limits can damage your stimulator.

Before using a hyperbaric chamber, discuss the effects of high pressure on your system with your Doctor.

Can I skydive or take part in other high altitude activities such as skiing or flying non-commercial aeroplanes?

High altitudes should not affect your system. However, you should consider the movements involved in any activity and not put undue stress on your implanted system. For example, the sudden jerking which occurs during skydiving when the parachute opens could dislodge or fracture the leads. You would then need to have additional surgery to repair or replace the damaged leads.

What medical procedures could interact with my ONS system?

Please speak to your Doctor or Nurse before any future medical procedures. If you need to have an emergency procedure and are not able to contact us beforehand, you will have to make sure your device is turned OFF before the procedure starts. This is to prevent interference from other medical equipment.

There are restrictions and risks associated with having a Magnetic Resonance Image (MRI) scan if you have an ONS. Failure to follow appropriate guidelines can cause tissue damage, or could result in severe injury or even death. If you need to have an MRI scan, please make sure the staff carrying out the scan know that you have a stimulator implant and show them your ID card. Please make sure your friends and family also know to do this, in case you are unable to tell the staff yourself.

Going home checklist

- Tablets and a discharge summary
- Any of your own tablets
- Transport – your own or hospital transport if necessary
- All your belongings, including any valuable we have locked away.

Follow up

You will have been given an Outpatient appointment – either before you leave the ward or sent in the post. If you have not received anything four weeks after your discharge please contact Mr Pereira's secretary or the Clinical Nurse Specialist.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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