

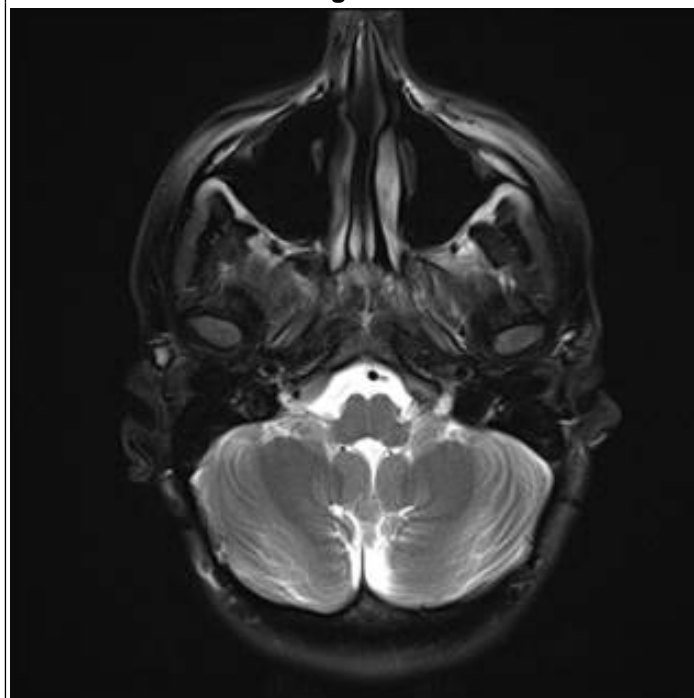
Introduction

Glossopharyngeal neuralgia (GPN) is classically diagnosed by throat, ear, and neck pain in the distribution of the glossopharyngeal nerve. Bilateral occurrences are rare. We describe a case of bilateral GPN, for which staged surgeries were performed successfully. The patient was a 24-year-old female with a history of a complex facial pain syndrome since the age of 14. She had been treated extensively medically and received invasive treatments for her intractable facial pain, including microvascular decompressions for bilateral trigeminal neuralgia, and a right sided retrosigmoid craniectomy for rhizotomy of the glossopharyngeal nerve and sectioning of the upper rootlets of the vagus nerve, which resulted in complete resolution of her right-sided pain. Two years later, she developed left-sided GPN.

Methods

We performed a left retrosigmoid craniectomy for left-sided GPN with sectioning of the glossopharyngeal nerve and upper rootlets of the vagus nerve.

Figure 1



MRI of the head showed the CN XI/X complex with no obvious vascular compression or tumor.

Results

This surgery resulted in complete relief of the pain, without producing life-threatening cardiac issues or oropharyngeal collapse post-operatively.

Conclusions

Staged surgical treatment for bilateral glossopharyngeal neuralgia can be performed safely. Long-term pain management is critical for patients suffering from chronic facial pain syndromes.

Learning Objectives

By the conclusion of this session, participants should be able to understand that: **1)** Staged surgeries for bilateral glossopharyngeal neuralgia can be done safely, **2)** Conducting a thorough pre-operative evaluation for swallowing and cardiac functions is critical, **3)** Long-term follow-up for pain management is important in patients with chronic pain syndromes