

Key Questions for a Neurosurgeon

- How many years have you been treating people with trigeminal neuralgia (TN)?
- How many procedures do you perform in a year, and when was the last one?
- What percentage of your surgeries are microvascular decompression procedures (MVDs) as opposed to other neurosurgeries?
- What is your personal MVD success rate? What percentage are pain free at one year, two years, five years? (An inability to answer those questions may indicate a lack of follow-up. A less than stellar percentage indicates either poor technique or poor patient selection.)
- How do you define a successful MVD?
 - In most patients, a successful MVD is defined as complete pain-relief without the need for medications. In a minority of patients, the definition may not be as stringent for a variety of reasons.
- What is your personal complication rate?
- Do you treat both the medical and surgical aspects of TN? If not, is there someone you refer to?
- What do you do if you don't find any vascular compressions during surgery?
- If the surgery is not successful, what is your alternative treatment plan?
- What are the risks of the surgery?
- What procedure(s) do you do for TN other than MVD, and if you don't do one, is there someone in your group who does?

Keep in mind...

- If the doctor does not answer these questions to your satisfaction, then you might want to consider a different physician.
- The neurologist and neurosurgeon should take a good history of your symptoms and ask enough questions to be able to come up with a differential diagnosis (e.g., possible causes), especially because some procedures, such as MVD, are only appropriate with a certain type of TN.
- The neurologist or neurosurgeon should have TN or MVD listed as a focus or subspecialty under their name. When searching, include those words to make sure that you find those with substantial experience, even within a multidisciplinary program.