

Occipital Neuralgia

Understanding pain arising from nerves at the back of the head

Occipital Neuralgia

Irritation of the occipital nerves causing pain at the back of the head and scalp

What is Occipital Neuralgia?

Occipital neuralgia is a condition where the occipital nerves, which run from the top of the spinal cord up through the scalp, become irritated or inflamed.

This causes pain at the back of the head, scalp, and sometimes behind the eyes.

Common Causes



Compression or irritation of the occipital nerves by muscles in the neck or scalp



Neck injuries or trauma



Cervical spine arthritis or degenerative changes

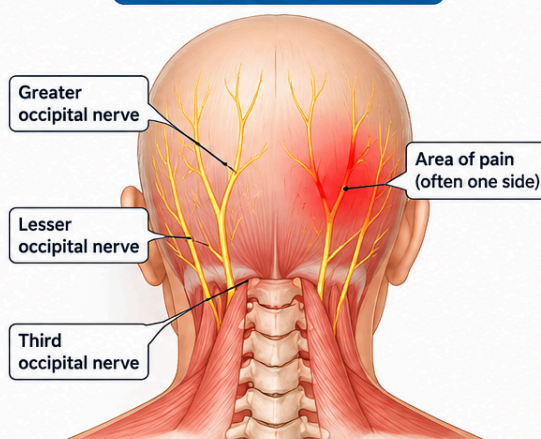


Tumors or other structural problems (rare)

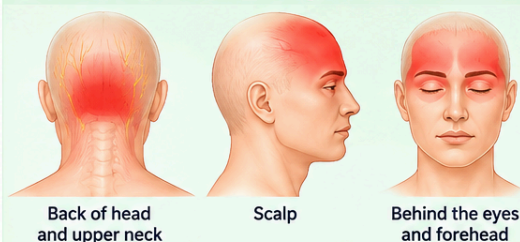


Idiopathic (unknown cause in many cases)

The Occipital Nerves



Areas Where Pain May Be Felt



Common Symptoms



Sharp, stabbing or shooting pain at the back of the head



Pain may radiate to the scalp, behind the eyes or forehead



Sensitivity to light touch on the scalp



Tenderness at the base of the skull



Pain may occur on one or both sides

Key Points

- ✓ Caused by irritation or inflammation of the occipital nerves
- ✓ Can cause sharp, shooting pain at the back of the head and scalp
- ✓ Pain may spread to the forehead or behind the eyes
- ✓ Often triggered by neck muscle tension, injury or cervical spine changes
- ✓ Usually affects one side, but can affect both sides

Understanding occipital neuralgia

Occipital neuralgia can cause brief episodes of sharp, shooting or electric-shock-like pain at the back of the head. Pain may travel across the scalp or towards the forehead or eye. A clinician can help distinguish it from other causes of headache.

IMPORTANT

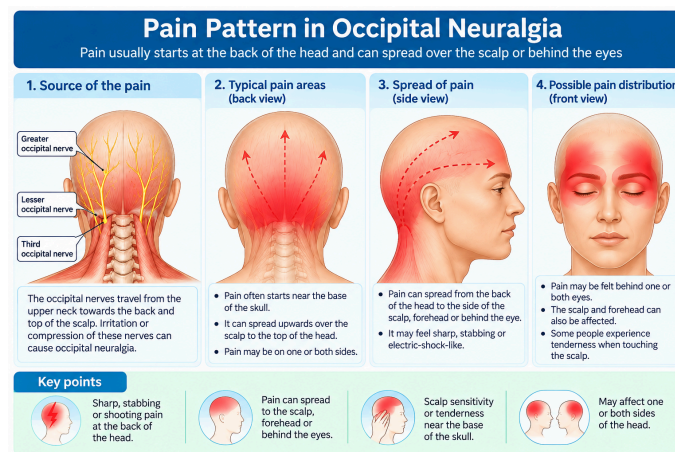
A new sudden, extremely severe headache or new neurological symptoms need urgent medical assessment.

Causes, symptoms and diagnosis

How clinicians assess occipital nerve pain

Why can it happen?

- Tight or irritated neck muscles pressing on a nerve
- Previous neck injury or trauma
- Arthritis or other changes in the upper cervical spine
- Sometimes no clear cause can be identified



How is it diagnosed?

- Your clinician asks about your symptoms, headache pattern and medical history.
- Examination may identify tenderness along the occipital nerves and assess neck movement.
- Imaging is not always needed; scans or an occipital nerve block may be considered in selected cases.

Other causes of headache

Not all pain at the back of the head is occipital neuralgia. Migraine, neck-related headache and other conditions may have overlapping symptoms. Seek an assessment if the diagnosis is uncertain.

Treatment and self-management

Practical steps to ease symptoms and support recovery

What may help?

Gentle movement

Change position regularly and try comfortable neck movement.

Heat or cold

Use a wrapped warm or cool pack briefly, if it helps.

Using Heat and Cold Packs for Occipital Neuralgia

Can help to reduce pain, ease muscle tension and improve comfort

Cold Packs

May help in the early stages or during flare-ups

Benefits

- Can reduce inflammation and nerve irritation
- May help to numb the area and reduce pain
- Often useful after activity or a flare-up of symptoms

How to use

- Use for 10–15 minutes at a time
- Can be repeated every 2–3 hours if needed
- Wrap the cold pack in a thin towel or cloth (do not apply directly to the skin)

Heat Packs

May help with muscle tension and stiffness

Benefits

- Helps to relax tight neck muscles
- Can improve blood flow to the area
- May reduce stiffness and improve movement
- Often useful for ongoing or persistent symptoms

How to use

- Use for 15–20 minutes at a time
- Can be repeated every 2–3 hours if needed
- Use a warm (not hot) pack and wrap in a towel or cloth (do not apply directly to the skin)

Top Tips

- Use a towel or cloth to protect your skin.
- Sit or lie in a comfortable position with good neck support.
- You can choose heat, cold or alternate between them, depending on what helps most.
- Listen to your body and stop if symptoms worsen.

Which is best for you?

- Cold packs are often helpful in the early stages or during acute flare-ups when pain and inflammation are increased.
- Heat packs may be more helpful for ongoing tightness, stiffness or muscle tension.
- Some people find that alternating between heat and cold provides the best relief.
- Everyone is different – try both and see what works best for you.

Safety Tips

- Do not apply heat or cold directly to the skin.
- Do not use for longer than 20 minutes at a time.
- Check your skin afterwards for redness, irritation or numbness.
- Do not use heat if you have reduced sensation in the area, poor circulation, or certain medical conditions (e.g. diabetes) – seek advice from your healthcare professional.

Treatment from your healthcare team

Physiotherapy may address neck movement, muscle tension and activity tolerance.

A pharmacist or prescriber can advise on suitable pain relief or nerve-pain medicines.

For persistent symptoms, a specialist may consider a nerve block or other procedures.

Helpful daily habits

- Take regular breaks from screens and sustained neck positions.
- Keep a symptom diary to identify patterns and triggers.
- Increase activities gradually within comfortable limits.

Gentle exercises and safety

Move comfortably - stop if an exercise increases symptoms

9 Stretching Exercises to Relieve Neck Pain

Gentle exercises to reduce muscle tension, improve flexibility and support a healthy neck

1 Neck Glide (Chin Tuck)



Hold
5 seconds
Repeat
5 times

- Sit or stand with good posture.
- Gently draw your chin backwards (as if making a double chin).
- Keep your head level and do not look down.

2 Neck Extension



Hold
5 seconds
Repeat
5 times

- Sit or stand comfortably.
- Look up towards the ceiling.
- Keep your shoulders relaxed.
- Do not force the movement.

3 Neck Rotation



Hold
5 seconds
each side
Repeat
5 times

- Sit or stand with shoulders relaxed.
- Turn your head slowly to the right.
- Return to the centre and then to the left.
- Keep your chin level.

4 Lateral Flexion (Side Bend)



Hold
5 seconds
each side
Repeat
5 times

- Sit or stand comfortably.
- Gently bring your right ear towards your right shoulder.
- Return to the centre and repeat on the left.
- Keep your shoulders relaxed.

5 Upper Trapezius Stretch



Hold
15-30 seconds
each side
Repeat
3 times

- Sit on a chair with good posture.
- Place one hand on the side of your head.
- Gently pull your head towards your shoulder until you feel a stretch on the opposite side of your neck.
- Keep your shoulders down.

6 Levator Scapulae Stretch



Hold
15-30 seconds
each side
Repeat
3 times

- Sit comfortably.
- Turn your head to the right, then gently look down towards your armpit.
- Use your hand to gently increase the stretch.
- Repeat on the other side.

7 Shoulder Shrugs



Hold
5 seconds
Repeat
10 times

- Sit or stand with your arms by your sides.
- Slowly lift your shoulders up towards your ears.
- Hold for 5 seconds, then relax and lower.
- Keep the movement slow and controlled.

8 Shoulder Blade Squeeze



Hold
5 seconds
Repeat
10 times

- Sit or stand with good posture.
- Gently squeeze your shoulder blades together.
- Hold for 5 seconds, then relax.
- Keep your shoulders down and avoid lifting them up.

9 Chest Opener Stretch



Hold
15-30 seconds
Repeat
3 times

- Stand with your hands clasped behind you (or hold a towel).
- Gently straighten your arms and lift them away from your body.
- Open your chest and look slightly upwards.
- Keep your shoulders relaxed.

When to seek urgent help

Seek urgent medical assessment for a sudden extremely severe headache, new weakness or numbness, vision or speech changes, fever with neck stiffness, or symptoms after significant injury. Call 999 in an emergency; NHS 111 can advise if you are unsure.

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