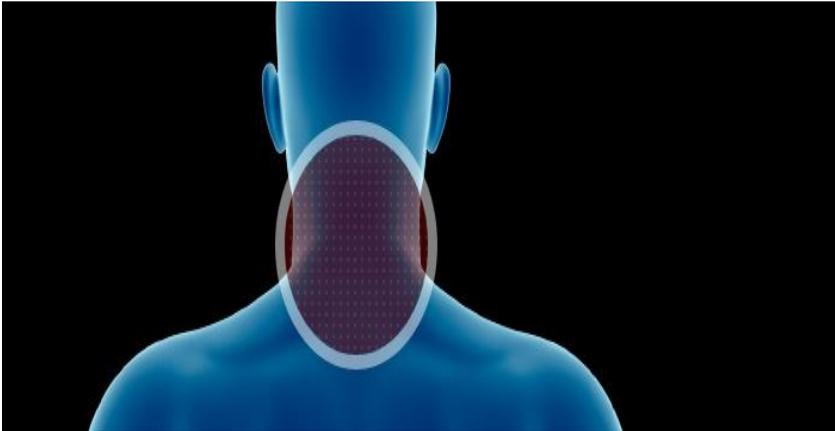


Cervical Sprain (aka “Whiplash”): Information for Patients



St. Vincent's University Hospital
Physiotherapy Department

WHAT IS A CERVICAL SPRAIN (“WHIPLASH”)?

A cervical sprain (or “whiplash”) is an over-stretch of the soft-tissue structures of the neck that occurs, for example, in a car crash, or from contact sports such as boxing or rugby. It is a collective term to describe the symptoms that a person may have if they are involved in events such as these. See across for more information.

WHAT ARE THE SYMPTOMS?

One or more of the following may be present:

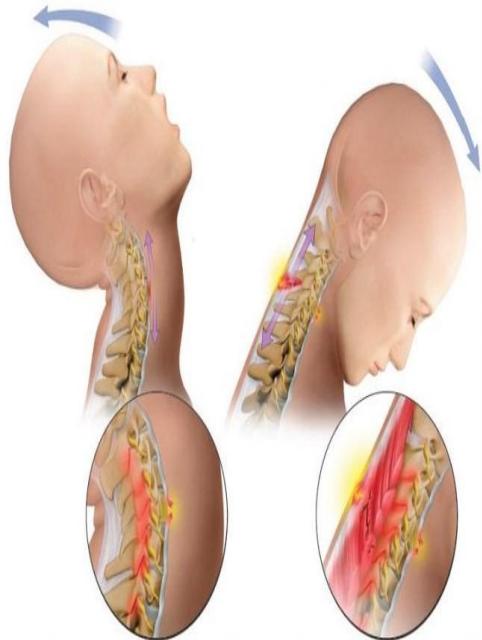
- Neck pain, which may radiate to the shoulders / arms
- Neck stiffness, which may radiate to the shoulders
- Headaches / jaw pain
- Irritability, difficulty concentrating
- Dizziness, arm numbness or pins & needles

WHAT ACTUALLY HAPPENS?



Your neck is made up of seven bones (vertebrae). Between each of these are discs, which act as shock absorbers. Linking the bones together are thick rubber band-like ligaments, which stabilise the neck. Muscles attach to the bones and provide more stability, as well as movement.

In a cervical sprain, your head is thrown backwards, then forwards, as shown, or side-to-side. This causes the muscles and ligaments to be overstretched, giving rise to inflammation and the pain and stiffness that can occur after the injury. These symptoms may not be felt immediately.



HOW IS IT DIAGNOSED?

Tests or scans are usually not required for a diagnosis; rather, it is based on your description of:

- how the injury happened, and
- your symptoms and how long you have had them

Should you be brought to the Emergency Department after your injury, the doctor / nurse will take note of your symptoms and how they started, and perform a detailed examination. They will follow a detailed set of rules to classify the severity of your injury and to decide if further tests / scans are needed, if for example a fracture or spinal injury is suspected.

If you go to see your own doctor after your injury, the examination and diagnosis process will be the same as described above.

It is important for you to remember that most of these injuries are not serious. Symptoms will reduce with time, but they can sometimes take a few months to settle completely.

HOW CAN I MAKE MY SYMPTOMS IMPROVE?

STAY ACTIVE

Your symptoms are a normal reaction to your injury; however, maintaining normal daily activities as much as possible, and generally staying active, is an important factor in your recovery. For the same reason, if you restrict your movement or activity after your injury, you may slow down your recovery. Performing gentle neck and shoulder stretches will help with this (see “Exercises” section).

KEEP PAIN UNDER CONTROL

It is important to take pain relief regularly ; do not wait until the pain is severe. Check with your doctor or pharmacist as to what pain relief medication would be safe for you to use. Always follow the instructions provided when taking pain medications, or ask your doctor or pharmacist if you are unsure. Should you require stronger pain relief, consult your doctor

HOW CAN I MAKE MY SYMPTOMS IMPROVE?

USE OF HEAT

Applying heat can help reduce pain and stiffness. Use either a hot water bottle (wrapped in a towel) or a heat pack (follow the instructions). Apply for no more than 15 minutes.

Do **NOT** WEAR A COLLAR

Using a collar will only have the effect of prolonging your recovery.

EXERCISES

The following exercises will help you to maintain your neck and shoulder movement, helping to reduce pain and stiffness. Do them each 10 times, once every hour.

Remember if they are at first painful, this is only due to stiffness after the injury, which will slowly reduce with time. Gradually increase the range of movement over time.



NECK ROTATION

Turn your head as far as you can comfortably go towards one side. Hold for 5 seconds and repeat to the other side.



NECK FLEXION

Bend your head forward as far as you can comfortably go. Hold for 5 seconds and relax.

EXERCISES



NECK EXTENSION

Lift your head upwards as far as you can comfortably go. Hold 5 seconds and relax.



NECK SIDE FLEXION

Bend your head to one side as far as you can comfortably go. Hold 5 seconds. Now repeat to the other side.



SHOULDER ROLLS

With your hands by your side, “roll” your shoulders in all directions.

FURTHER ADVICE

POSTURE

Aim to keep upright when standing, with shoulders back and back straight. If using a computer, adjust the screen so that it is level with your eyes. When sitting, use a firm chair (preferably not a sofa) and place a cushion or rolled-up towel against the small of your back to help maintain good posture.

SLEEPING

You should not sleep on your stomach. Apart from this, there is no “recommended” sleeping position. However, do not use too many pillows; whether you sleep on your back or side, try to have just enough pillows to keep your head in line with the rest of your body.

DRIVING

Do not drive until you feel able to react and turn your head quickly. It would be advisable to check with your insurer also to see if you will be covered.

You MUST SEE YOUR DOCTOR IF:

- Your eyesight is disturbed
- You have ongoing dizziness which is not settling
- You have severe muscle spasms or notice your neck / head is in an unusual position
- You have extreme pain or your pain is not decreasing over time
- You have severe pins and needles in your neck or arms
- You have arm or leg numbness or weakness

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Physiotherapy Department

St. Vincent's University Hospital

Elm Park, Dublin 4

Direct Telephone Number: 01 2214467

Fax Number: 01 2214001

Web Address: www.svuh.ie

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For larger font size of this leaflet please contact

Eimear Horan (01) 2214491