

Musculoskeletal Physiotherapy Outpatient

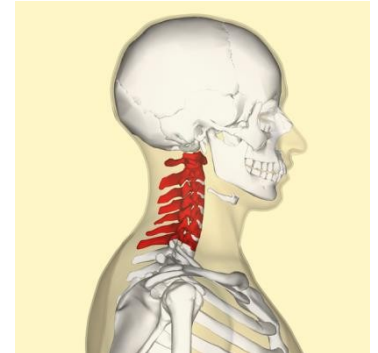
Department Whiplash Advice Leaflet

This information leaflet has been provided by the Physiotherapy department. The following information will give you some advice and exercises to do to help improve your whiplash symptoms while you wait to start your physiotherapy sessions. If you have any queries about the information provided in this leaflet, please call the Physiotherapy department Monday – Friday between 09.00 – 16.00.

What is Whiplash?

Whiplash is the term used to describe a neck injury caused by a sudden movement of the head forwards, backwards or sideways. The sudden movement sometimes causes a slight strain to the small facet joints in the neck – whiplash is also known as a neck sprain. Symptoms often include pain and stiffness in the neck, upper back and shoulders, and some people suffer with dizziness, headaches and a feeling of being more irritable than usual. But it is important to remember that serious or permanent damage is rare. In most cases, pain should improve within 6 - 12 weeks.

The neck / cervical spine is made up of many components. The vertebrae are strong solid blocks of bone and are joined by discs enabling the spine to be strong yet flexible. The ligaments reinforce this structure and the muscles offer more protection. The interaction between all these parts after an injury can change the way we move which also causes pain. In most cases X-rays and MRI's are not needed to diagnose whiplash.



When to Seek Further Advice

If you experience any of the following:

- Pins and needles or tingling on one or both sides of your body
- Weakness or loss of feeling in your arms or legs
- Problems with walking or sitting upright
- Dizziness, fainting, double vision, problems with your speech or swallowing
- Severe pain despite taking paracetamol or ibuprofen
- An "electric shock" feeling in your neck/back which may go into your arms/legs

Contact your GP and ask for an urgent appointment or call 111 as it is important to rule out anything more serious.

Lifestyle Factors

There are many lifestyle factors that can have a negative impact on neck pain. These include quality and quantity of sleep, muscular tension in the neck/shoulder region, increased stress and low mood as well as reduced activity

levels. It is important to be aware of how these factors may be influencing your pain.

Some people experience a strong stress reaction due to the trauma of the injury and may experience nightmares or flashbacks about the accident and finding themselves more irritable than usual. If this is the case talk to your GP or physiotherapist about psychological/wellbeing support that may help.

For the First 48 Hours

Try to maintain a comfortable upright sitting position or if necessary, lie down in a comfortable position for short periods (e.g. 20—30 minutes). Avoid sudden and / or large neck movements, prolonged postures e.g. working at a desk; change posture regularly. If you have been supplied with a collar remove it regularly and perform regular neck movements (as per exercises overleaf) to prevent excess stiffness. As your symptoms ease it is important that you wean yourself out of the collar.

Heat

You may find that applying heat to the sore area helps relieve your pain and any associated muscular tightness/spasm. Use a microwaveable wheat bag or a hot water bottle wrapped in a towel. Keep it on for 15 – 20 minutes, checking your skin regularly to minimise the risk of suffering burn. Repeat up to three times a day.

Posture

There is increasing evidence that posture does not contribute to neck pain as much as once thought. Very few people have perfect posture. Try to avoid sustained positions and gently move your neck and your whole body regularly to help prevent stiffness. See exercises overleaf. Try to stay active, even if at first this means going for gentle walks.

Medication

Do not be afraid to take painkillers to enable you to stay active. Your body's warning systems will not be affected and will still warn you if you are putting yourself at increased risk of aggravating your neck. Taken properly, simple painkillers can be most effective and allow you to keep moving. Your GP or Pharmacist can advise you how you can use medication to manage your neck pain.

Driving

It is important to consider whether your neck pain / stiffness will prevent you from turning your head quickly and checking your blind spots when driving. You may return to driving once when you feel confident that you can safely control your vehicle and perform all manoeuvres. It is advisable to inform the DVLA and your insurance company that you are returning to driving.

Smoking

Evidence has shown that smoking prolongs healing time. Stopping smoking during the healing phase will help ensure optimal recovery from this injury. For advice on smoking cessation and local support available, please refer to the following website: <http://smokefree.nhs.uk> or discuss this with your GP.

Further information

Chartered Society of Physiotherapy:

<https://www.csp.org.uk/conditions/neck-pain/whiplash>

NHS:

<https://www.nhs.uk/conditions/whiplash/>

If you have any queries/concerns about your exercises, please call the physiotherapy department on: 01603 286990.



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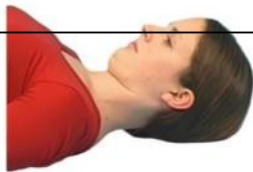
The exercises should be carried out little and often 3 – 4 times a day and only move as far as pain allows.

It is important that you do not push through pain that you would describe as being more than a 5/10.

Any pain or discomfort after you have stopped exercising should settle down within 1 hour of you stopping the exercises.

If your pain is still worse as a result of the exercises, you could be overdoing them, try moving your neck more gently and slowly and consider doing less repetitions.

Lying on your back with your head flat or on a small flat pillow or towel. Lengthen the back of your head up the pillow, gently nodding your chin. Feel your neck grow longer.



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Try to do this with the minimal amount of effort or tension in your neck muscles. Hold approx. 5 secs. Repeat 5 times.

START POSITION: Sit tall on a chair or stool with the back of the head and the shoulder blades on the wall. The shoulders should be relaxed mid position and the plane of the face should be vertical. If possible, have your lower back against the wall as well. Feet flat on the floor. Arms relaxed on your lap.



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ACTION: Gently push down through your feet, lengthen through your whole spine and slowly slide the back of the head up the wall. Keep looking forwards as you gently nod your chin down slightly. Move minimally, only as far as there is no obvious increase in tension of the neck muscles.

Hold for 5 seconds. Slowly ease out of the position. Repeat 3 - 5 times little and often through the day.

Keeping your back straight, as above, lengthen the back of your head, keep looking forwards as you gently nod your chin down slightly. Move minimally, only as far as there is no obvious increase in tension of the neck muscles.



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Hold this position to feel a stretch for 5 seconds or stop if pain starts. Slowly ease out of the position. Repeat 3 - 5 times little and often through the day.

Lift your head, lengthening your neck as you turn your head slowly and gently to one side until you feel a stretch. Do not push through pain and do not worry if you cannot turn your head as far as the picture demonstrates.

Hold for approx. 5 secs. Repeat 3 - 5 times.
Repeat turning your head to the other side.



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Gently and slowly shrug your shoulders up and down.
Then roll your shoulders gently in forwards and backwards in circular motions.

Repeat 5 – 10 times.



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Slowly tilt your head down towards your shoulder, leading with your ear. Go to the point of slight tension but no pain.

Hold the stretch for 5 seconds. Return your head to centre and repeat on the opposite side. Repeat 3 - 5 times on each side.



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Sit up straight on a chair. Place one hand on the outer side of your opposite thigh/knee and the other hand behind you. Slowly twist your upper body, assisting with your hands until you feel a stretch in your side and back. Hold the stretch for 5 seconds. Repeat 3 – 5 times.

For further information please contact: Musculoskeletal Physiotherapy Outpatient
Department Telephone: 01603 286990 Monday to Friday between 09.00 - 16.00.