

# Neck Pain: What Patients Need to Know

Each year, millions of people experience neck pain due to injury or spine conditions. A detailed patient health history and a thorough description of the injury and/or pain are the first steps in designing a treatment plan to relieve neck pain.



## Types of Neck Pain

- **Acute neck pain** is the most common. This type of pain usually resolves within a few days or possibly weeks. The patient usually describes sudden onset of neck stiffness, difficulty rotating the neck, and/or a severe, sharp pain with movement.
- **Chronic neck pain** can range from irritating to debilitating, and can affect just the neck, or can radiate to the shoulder, arm and hand. Chronic neck pain often is caused by conditions that indicate damaged vertebrae, discs, tendons, ligaments or nerve roots in the cervical spine, often from long ago.

## Common Causes and Symptoms of Neck Pain

- **Soft tissue damage.** Lifting a heavy object, strain from activity, extended time in an uncomfortable position, or sudden trauma can damage the soft tissue (muscles, ligaments and tendons) in the neck. This damage can cause stiffness or pain that hurts more when moving the neck. Usually pain subsides within one to two days, but if pain is severe, or is accompanied by arm pain, numbness or tingling, it is advisable to visit a chiropractor or other healthcare professional for a diagnosis and possible treatment.
- **Cervical disc herniation.** A herniated disc in the neck puts direct pressure on the nerve roots in the cervical spine, causing pain and/or numbness that travels to the shoulders, arm and possibly hands. The pain, referred to as cervical radiculopathy, typically is felt on just one side of the body, and the location of the pain depends on which nerve root the herniated disc is affecting.
- **Cervical degenerative disc disease.** Most people, starting in their 20s, experience natural wear and tear on their intervertebral discs. For some, this deterioration can lead to stiffness and pain in the neck that can radiate to the shoulders, arms and hands. Typically, patients experience low-level pain with occasional flare ups that are usually triggered by certain positions or activities.
- **Osteoarthritis.** Usually occurring in patients 60 or older, friction between the facet joints in the spine causes inflammation, producing pain and stiffness. The pain is often worst early in the morning and at the end of the day, and tends to feel better when the neck is moving.
- **Cervical stenosis.** Includes two types: (1) Cervical foraminal stenosis (or lateral stenosis): Friction between the facet joints in the neck may cause the development of bone spurs, which impinge on the cervical nerve roots. Symptoms develop slowly over the course of several years and tend to worsen during certain activities or neck positions. Pain and numbness often occur on one side of the upper body in the shoulder, arm and hand. (2) Central stenosis: This is narrowing of the central canal where the spinal cord travels and pressure here from facet joint arthritis as well as thickening of surrounding ligaments combined at times with disc degeneration and thinning, results in spinal cord pressure. Here, numbness, pain and/or weakness in the legs (one or both) can occur. This type is more serious and may prompt co-management or referral for an MRI and possibly surgical decompression in some cases.

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# Treatment Options for Neck Pain

While most cases of neck pain resolve on their own, severe or chronic neck pain requires the help of a spine professional. A treatment plan will be tailored to the patient's health history and the type and severity of pain.

## **Rest**

A short period of rest is especially helpful for acute neck pain due to soft tissue injuries. The muscles, tendons and ligaments in the neck receive an abundant blood supply which brings the necessary nutrients and proteins for the tissue to heal.

## **Heat/Ice**

Heat and ice packs help relieve most types of neck pain, particularly in more acute cases. Usually ice or heat is applied for approximately 20 minutes and repeated every 1 - 2 hours. Most people use ice first, but some people find more relief with heat. The two may be alternated which functions like a "pump" to remove swelling.

## **Medications**

Over-the-counter or prescription medications may help to relieve neck pain. Non-steroidal anti-inflammatory drugs (NSAIDs) or oral steroids reduce inflammation, a common cause of pain.

## **Chiropractic Manipulation**

Chiropractic manual manipulation focuses on improving spinal function to increase spinal range of motion, decrease pain and inflammation, and improve overall physical functioning.

- Chiropractic manipulation typically involves a controlled, sudden force applied to a spinal segment to normalize motion and improve function. Adjustments may be performed using high-velocity or low-velocity techniques.
- Reducing joint restriction and restoring function allows the local inflammation and pain reflex responses to begin to subside.
- In some cases, an accompanying, audible release of gas (joint cavitation or cracking) that is caused by the release of oxygen, nitrogen, and carbon dioxide, may be heard. This is a phenomenon and has no known physiological effect, but signifies that pressure was released from the joint.
- A relieving sensation is usually perceived. Less frequently, minor discomfort may occur (that usually resolves within a few hours) if the surrounding muscles are in spasm or tense.

## **Physical Therapy, Exercise and Stretching**

Aerobic, strengthening and stretching exercises are common recommendations for neck pain. Spinal health specialists, such as chiropractors, physical therapists and physiatrists, design exercise programs based on the patient's history, diagnosis and level of pain.

## **Beyond Chiropractic Care**

As appropriate, a chiropractor may refer a patient to other healthcare professionals as part of the patient's treatment plan, such as a physical therapist, physiatrist, pain management physician or spine surgeon. For example, if the pain is severe or has not improved within a reasonable time frame, a chiropractor may refer the patient for an epidural steroid injection or a surgery consult.

