

## What can cause Neck Pain?

Any part of your neck - muscles, bones, joints, tendons, ligaments, or nerves - can cause neck problems. Neck pain is very common. Pain may also come from your shoulder, jaw, head, or upper arms.

Muscle strain or tension often causes neck pain. The problem is usually overuse, such as from sitting at a computer for too long. Sometimes you can strain your neck muscles from sleeping in an awkward position or overdoing it during exercise. Falls or accidents, including car accidents, are another common cause of neck pain. Whiplash, a soft tissue injury to the neck, is also called neck sprain or strain.

Treatment depends on the cause, but may include applying ice, taking pain relievers, getting physical therapy or wearing a cervical collar. You rarely need surgery.

## Cervical spondylosis

### Causes

Cervical spondylosis is caused by chronic wear on the cervical spine. This includes the disks or cushions between the neck vertebrae and the joints between the bones of the cervical spine. There may be abnormal growths or "spurs" on the bones of the spine (vertebrae).

These changes can, over time, press down on (compress) one or more of the nerve roots. In advanced cases, the spinal cord becomes involved. This can affect not just the arms, but the legs as well.

Everyday wear and tear may start these changes. People who are very active at work or in sports may be more likely to have them.

The major risk factor is aging. By age 60, most women and men show signs of cervical spondylosis on x-ray. Other factors that can make a person more likely to develop spondylosis are:

- Being overweight and not exercising
- Having a job that requires heavy lifting or a lot of bending and twisting
- Past neck injury (often several years before)
- Past spine surgery
- Ruptured or slipped disk
- Severe arthritis
- Small fractures to the spine from osteoporosis

### Symptoms

Symptoms often develop slowly over time, but they may start or get worse suddenly. The pain may be mild, or it can be deep and so severe that you are unable to move.

You may feel the pain over the shoulder blade or it may spread to the upper arm, forearm, or (rarely) fingers.

The pain may get worse:

- After standing or sitting
- At night
- When you sneeze, cough, or laugh
- When you bend the neck backwards or walk more than a few yards

You may also have weakness in certain muscles. Sometimes, you may not notice it until your doctor examines you. In other cases, you will notice that you have a hard time lifting your arm, squeezing tightly with one of your hands, or other problems.

Other common symptoms are:

- Neck stiffness that gets worse over time
- Numbness or abnormal sensations in the shoulders, arms, or (rarely) legs
- Headaches, especially in the back of the head

Less common symptoms are:

- Loss of balance
- Loss of control over the bladder or bowels (if there is pressure on the spinal cord)

### Exams and Tests

An exam may show that you have trouble moving your head toward your shoulder and rotating your head.

Your health care provider may ask you to bend your head forward and to the sides while putting slight downward pressure on the top of your head. Increased pain or numbness during this test is usually a sign that there is pressure on a nerve in your spine.

Weakness or loss of feeling can be signs of damage to certain nerve roots or to the spinal cord. Reflexes are often reduced.

### DIAGNOSTIC TESTS

A spine or neck x-ray may be done to look for arthritis or other changes in your spine.

MRI of the neck is done when you have:

- Severe neck or arm pain that does not get better with treatment
- Weakness or numbness in your arms or hands

EMG and nerve conduction velocity test may be done to examine nerve root function.

## Treatment

Even if your neck pain does not go away completely, or it gets more painful at times, learning to take care of your neck and back at home and prevent repeat episodes of your pain can help you avoid surgery.

Your doctor and other health professionals can help you manage your pain and keep you as active as possible.

- Your doctor may refer you for physical therapy. The physical therapist will help you reduce your pain using stretches. The therapist will show you how to do exercises that make your neck muscles stronger.
- You may also see a massage therapist, someone who performs acupuncture, or someone who does spinal manipulation (a chiropractor, osteopathic doctor, or physical therapist). Sometimes a few visits will help with neck pain.
- Cold packs and heat therapy may help your pain during flare-ups.

A type of talk therapy called cognitive behavioral therapy may be helpful if the pain is having a serious impact on your life. This technique helps you better understand your pain and teaches you how to manage it.

A number of different medications can help with your back pain.

- Nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin, naproxen sodium (Aleve), and ibuprofen (Advil) can help with the pain. Always talk with your doctor if you need to take these drugs every day. Side effects may include stomach ulcers or bleeding, and liver or kidney damage.
- Low doses of prescription medicines used to treat seizures (called anticonvulsants) or depression (antidepressants) may help some patients whose long-term back pain has made it hard for them to work or interferes with daily activities.
- Your doctor may give you pain medicines called narcotics or opioids to use when the pain is very severe. These medicines are rarely, if ever, used to treat neck pain on a daily basis.

If the pain does not respond to these treatments, or you have a loss of movement or feeling, surgery is considered. Surgery is done to relieve the pressure on the nerves or spinal cord.

- Foraminotomy
- Laminectomy
- Spinal fusion

## Outlook (Prognosis)

Most patients with cervical spondylosis will have some long-term symptoms. These symptoms will often get worse and then improve. However, symptoms should improve with treatment and do not need surgery.

Many people with this problem are able to maintain active lives. However, some patients will have to live with chronic pain.

#### Possible Complications

- Inability to hold in feces (fecal incontinence) or urine (urinary incontinence)
- Loss of muscle function or feeling
- Permanent disability (occasionally)
- Poor balance

#### When to Contact a Medical Professional

Call your health care provider if:

- The condition becomes worse
- There are signs of complications
- You develop new symptoms (such as loss of movement or feeling in an area of the body)
- You lose control of your bladder or bowels (call right away)