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Whiplash Neck Sprain

A **whiplash neck sprain** (also know as just **whiplash**) is common after a road traffic accident. Symptoms usually ease and go without any specific treatment. It is best to keep the neck active and moving. If required, painkillers can ease pain.

What is a whiplash neck sprain?

A whiplash neck sprain occurs when your head is suddenly jolted backwards and forwards (or forwards then backwards) in a whip-like movement, or is suddenly forcibly rotated. This can cause some neck muscles and ligaments to stretch more than normal (sprain).

The common cause is when you are in a vehicle that is hit from behind by another vehicle. Being in a vehicle hit from the side or front can also cause a whiplash sprain.

Damage to the spine or spinal cord sometimes occurs from a severe whiplash accident. This is uncommon and is not dealt with in this article. This article deals only with the common whiplash sprain to neck muscles and ligaments. It assumes that you have been assessed by a doctor and serious neck injury has been ruled out.

Who gets a whiplash neck sprain?

Whiplash neck sprains are common. Many people involved in road traffic accidents develop neck pain (with or without other injuries). Women are more prone than men are to a whiplash, as their neck muscles are less strong.

Some people are surprised at having symptoms after a minor road traffic accident. Even slow vehicle bumps may cause enough jerking of the neck to cause symptoms.

Less commonly, a whiplash can occur after a sporting injury, or even with everyday activities such as jolting the neck when you trip or fall.

What are the symptoms of a whiplash neck sprain?

- Pain and stiffness in the neck. It may take several hours after the accident for symptoms to appear. The pain and stiffness often become worse on the day after the accident. In about half of cases, the pain first develops the day after the accident.
 Turning or bending the neck may be difficult.
- You may also feel pain or stiffness in the shoulders or down the arms.
- There may be pain and stiffness in the upper and lower part of the back.
- Headache is a common symptom.
- Dizziness, blurred vision, pain in the jaw or pain on swallowing, and unusual sensations of the facial skin may occur for a short while, but soon go. Tell a doctor if any of these persist.
- Some people feel tired and irritable for a few days and find it difficult to concentrate.

How is a whiplash neck sprain diagnosed?

Your doctor will usually be able to diagnose whiplash from the description of the way the accident occurred, the typical symptoms, and by examining you. An examination of your neck and arms can check that there are no signs of damage to the bones of your spine (vertebrae) or to your spinal nerves or spinal cord. If these are suspected then further tests may be recommended.

What are the treatments for a whiplash neck sprain?

Exercise your neck and keep active

Aim to keep your neck moving as normally as possible. At first the pain may be bad and you may need to rest the neck for a day or so. However, gently exercise the neck as soon as you are able. You should not let it 'stiffen up'.

Gradually try to increase the range of neck movements. Every few hours gently move the neck in each direction. Do this several times a day. As far as possible, continue with normal activities. You will not cause damage to your neck by moving it.

Medicines for whiplash

Painkillers are often helpful and may be recommended by your doctor.

• Paracetamol at full strength is often sufficient. For an adult this is two 500 mg tablets, four times a day.

- Anti-inflammatory painkillers. These may be used alone or at the same time as paracetamol. They include ibuprofen which you can buy at pharmacies or get on prescription. Other types such as diclofenac or naproxen need a prescription. Some people with stomach ulcers, asthma, high blood pressure, kidney failure, or heart failure may not be able to take anti-inflammatory painkillers.
- A stronger painkiller such as codeine is an option if anti-inflammatories do not suit or do not work well. Codeine is often taken in addition to paracetamol.
- A muscle relaxant such as diazepam is occasionally prescribed for a few days if your neck muscles become very tense and make the pain worse.

Other treatments

Some other treatments which may be advised include:

Agood posture may help. Check that your sitting position at work or at the computer is not poor (that is, not with your head flexed forward with a stooped back). Sit upright. Yoga, pilates, and the Alexander Technique all improve neck posture but their value in treating neck pain is uncertain.

A firm supporting pillow seems to help some people when sleeping. Try not to use more than one pillow.

Physiotherapy

- Various treatments may be advised by a physiotherapist if the pain is not settling. These include traction, heat, manipulation, etc. However, what is often most helpful is the advice a physiotherapist can give on exercises to do at home.
- A common situation is for a doctor to advise on painkillers and gentle neck exercises. If symptoms do not begin to settle over a week or so, you may then be referred to a physiotherapist to help with pain relief and for advice on specific neck exercises.

Treatment may vary and you should go back to see a doctor:

- If the pain becomes worse.
- If the pain persists beyond 4-6 weeks.
- If other symptoms develop such as loss of feeling (numbness), weakness, or persistent pins and needles in part of an arm or hand. These may indicate irritation to or pressure on a nerve emerging from the spinal cord.

Other pain-relieving techniques may be tried if the pain becomes persistent (chronic). Chronic neck pain is also sometimes associated with anxiety and depression which may also need to be treated.

What is the outlook (prognosis) after a whiplash neck sprain?

This will depend on the severity of the sprain but the outlook is very good in most cases. Symptoms often begin to improve after a few days. Most people make a full recovery within a few weeks. However, in a small number of people, some symptoms persist long-term.

Can whiplash neck sprains be prevented?

Modern vehicles are increasingly designed to minimise the impact of collisions on the neck. However, all vehicles include head restraints on vehicle seats which may prevent some whiplash sprains. The head restraint should be as high as the top of the head. This may stop the head from jolting backwards in a road traffic accident.

However, up to 3 in 4 head restraints are not correctly adjusted. Head restraints may make a journey less comfortable when they are correctly adjusted as they will not allow your head to lie back. However, if you have had whiplash, you may be more particular about correctly adjusting the head restraint for yourself and for other passengers.

Further reading & references

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Author: Dr Colin Tidy	Peer Reviewer: Dr John Cox	
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