Everyone Has Neck Pain

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Transforming patient information into patient understanding.

I think more patients experience neck pain than lower back pain. Hardly any patient I talk to has escaped it. Everyone has had it at one time or another.

Neck pain is usually very bad for a couple of days and then it subsides gradually over two to three weeks and as a rule it does not completely disappear. It is a rare patient who does not say they have “neck trouble” when questioned.

Anatomy

The neck (cervical spine as medical people refer to it) is composed of seven bony vertebrae. The bones are separated by seven discs that act as shock absorbers. Many complicated muscles and ligaments hold it together. In addition your spinal cord runs through an opening in the vertebrae and eight very important pairs of nerves come out of the vertebrae on either side.

All of the function of the shoulders, arms and hands come from these nerves.

Pinpointing The Cause

A good medical history and examination is standard as in anything I treat. Most of the time, I will want to see plain x-rays of the cervical spine at the time of the exam.

In many cases I don’t need an MRI study. Don’t think your care is poor if an MRI is not ordered. Every neck that hurts does not need an MRI!

Common Causes

- Poor posture and/or poor body mechanics
- Wear and tear degeneration in discs
- Osteoarthritis
- Soft tissue injury such as a fall or accident
- Fibromyalgia affecting neck and upper back
- Ruptured disc

Treatment

What if I told you most neck pain from a soft tissue origin only lasts about two weeks and simple treatment is surprisingly effective.

- Heat, then ice to reduce pain and inflammation
- Using a special pillow at night to support the head and neck
- Wearing a soft collar for a few days
- Muscle relaxant medication
- Advil, Motrin or similar
- Massage
- Physical therapy measures plus home exercise program
Nothing Helps, Pain Worse

If conservative treatment isn’t helping you could have a more serious problem. These symptoms include:

- shooting pain down one arm
- fever
- numbness, tingling or weakness in one or both arms
- nothing you take helps the pain

There are a few patients who get worse rather than better with conservative treatment. In these cases an MRI is likely. MRI does not mean surgery is a foregone conclusion. You should be aware that neck surgery is occasionally needed and can be successful. It is always a last resort. There are lots of people who have had neck surgery and are not sure it was helpful to them. I hear this every week in the office.

Nutshell

In my opinion the problem is this. The neck and back are very complex structures. Not to say the rest of the musculoskeletal system I deal with isn’t complicated! It is.

The difference is, it is particularly difficult in the neck and back to be sure you have pinpointed the exact source of the patient’s pain before surgery. The surgeon believes that it is, of course.

But if that isn’t the source of the pain or the pain is coming from other places in the neck, guess what? The patient doesn’t get much relief from the surgery.

I see people almost daily who have had multiple back and/or neck surgeries and they still aren’t much better.

I don’t want you to go down that road.

*My patients put their trust in me and what I do improves the quality of their lives.*

Office Website and Gratiot County Herald Archive

What if there was a whole world of musculoskeletal information at one place? There is! [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com) opens up for you the office website, Your Orthopaedic Connection and the Archive of all previous GCH articles I have written for you, your family and friends.

Please check it out. Do yourself a favor.

Be well.

Dr. Haverbush