Frequently Asked Questions: Whiplash

What is whiplash?

The term *whiplash* refers to either a sudden unexpected back and forth movement of the neck/back or an injury to some part of the neck caused by that motion.



What part is injured?

Evidence suggests that different soft tissues are injured with different severities of injury. Muscles, ligaments, discs, nerves, or some combination of these may be hurt, or in some cases, nothing is damaged at all. Injuries to any of these soft tissues can produce similar symptoms. It's not always necessary to know precisely what has been damaged, since treatments for most soft-tissue injuries are similar. Nerve damage, if it occurs, is the most problematic.

• Who is most likely to get whiplash? Studies show young women with flexible necks who are not very muscular are more prone to whiplash. So too are frail or elderly people with neck arthritis. But while these two groups may suffer more whiplash, their return to usual activities is generally about the same as others.

What about X-rays and scans?

In more severe cases, X-rays may be recommended to check for bony injuries, but they don't show soft-tissue damage. X-rays are also useful to check for other neck problems such as arthritis. CT and MRI scans are generally not useful in whiplash.

Neck and shoulder pain seem pretty common - are they?

Yes. Two of every three people suffer neck and shoulder pain, and it's more common as you age. Sedentary or inactive persons get neck aches (commonly called kinks) very similar to whiplash symptoms. It's important to keep your neck in good physical shape, especially if you've already suffered a whiplash injury. There are also a few diseases that can cause neck aches that require medical attention.

What treatments are helpful?

Most uncomplicated whiplash cases respond to a simple approach:









