

Simple solutions the best for pain in the neck

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It might just be that the most effective solutions to a pain in the neck are the simplest. According to a University of Alberta-led task force assigned the job of finding the best way to take the sting out of neck pain, the often debilitating ailment's best treatment is still more closely associated with a loving spouse's neck rub than anything the advancements of modern medicine have to offer.

The Bone and Joint Decade 2000-2010 Task Force on Neck Pain and its Associated Disorders reports that some alternative therapies such as acupuncture, neck manipulation and massage are better choices for managing most common neck pain than many current practices. Also included in the short-list of best options for relief are exercise, education, low-level laser therapy and pain relievers.

"The evidence shows there are a relatively small number of therapies that provide some relief for a while, but there is no one best option for everyone," said Linda Carroll, U of A professor of epidemiology and task-force principal investigator. "Everything works a little, everything seems to work the same, and different things work for different people."

This international, multi-disciplinary task force that reports to the U of A's School of Public Health scoured 32,000 citations and performed appraisals of more than 1,200 research studies in a seven-year review to pinpoint the best research evidence to prevent, diagnose and manage neck pain.

"One of the things people used to think was that these musculoskeletal



disorders would go away and go away really quickly, but the truth is they are often persistent and recurrent," said Carroll. "About 30-50 per cent of us have had neck pain in the past year. That's a lot, but most of us can carry on our activities as usual."

"Still, one or two people in 20 have significantly limiting neck pain."

Research recently published as a supplement in the journal Spine shows that a neck pain sufferer's best option is a combination of therapies, and that short episodes of care appear to be just as helpful as longer episodes.

"People have to understand that pain relief from these interventions is often modest and often short lived," said Carroll.

The task force's studies found that some forms of treatment should be avoided, such as neck collars, ultrasound and electrical muscle stimulation. Corticosteroid injections and surgery should only be considered if there is associated pain, weakness or numbness in the arm, fracture or serious disease.

Neck pain can strike from anywhere, with no single cause appearing dominant in any research.

"There are risk factors, such as computer work, but most neck pain is not a result of serious injury or disease," said Carroll. "Many factors play a part - overall physical and mental health, the kind of work we do, our daily activities - all of these factors work together to produce neck pain or to protect us from neck pain."

As far as an ounce of prevention is concerned, there is relatively little research on what does or does not prevent neck pain. Ergonomics, cervical pillows or postural improvements may or may not help.



"This is an important body of research that will help improve the quality of patient care by incorporating the best evidence into practice and patient education," said Carroll. "Neck pain can be a stubborn problem - we hope this comprehensive analysis of the evidence will help both sufferers and health care providers better manage this widespread complaint."

On Jan. 13, 2000, the World Health Organization officially declared 2000-2010 The Bone and Joint Decade in an effort to raise awareness and educate the world on the increasing societal impact of musculoskeletal injuries and disorders.

Source: University of Alberta

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