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Whiplash Associated Disorders

What is WAD?

“Whiplash” or WAD is an umbrella term for any injury to the neck involving rapid, uncontrolled neck flexion (bending forward) followed immediately by neck extension (bending backward) or vice versa. Typically such a motion is the result of rapid and unexpected forward “acceleration” of the head on the body, as seen in rear end motor vehicle accidents, rugby tackles from behind or falls from height.

What exactly have I injured?

Because of the high forces involved in most WADs, there are many structures that may contribute to your symptoms. These range from neck muscles, bones, joint capsule, discs, nerves, ligament and tendons. It is important to note that each WAD is entirely unique and will vary greatly in severity and presentation. Just because you know someone who has suffered from chronic and severe symptoms, it certainly does not mean that you will!

Concerned about your symptoms?

Because of the large number of potential structures involved, WAD symptoms may vary considerably and can include any of the following:

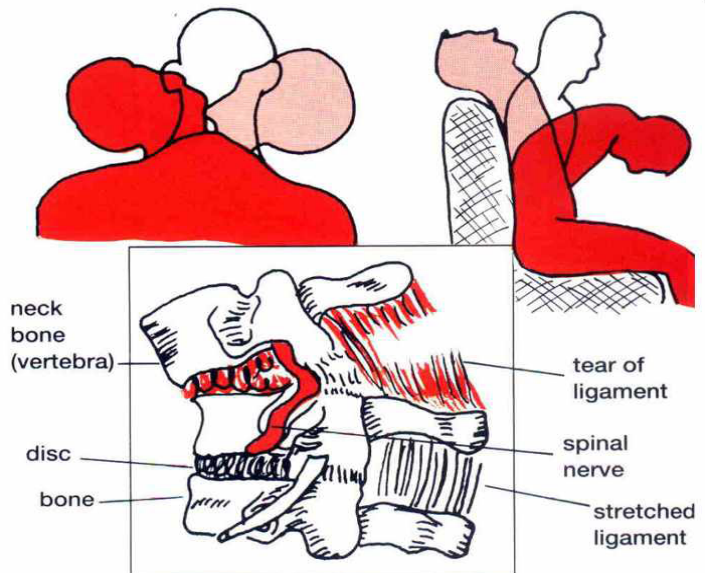
- Neck pain, neck stiffness, shoulder pain, low back pain
- Pain/numbness in the arm and hand
- Head aches
- Dizziness
- Ringing in ears
- Blurred vision
- Concentration or memory problems
- Sleeplessness, tiredness

It is also important that you inform your

physiotherapist or GP of all of your symptoms, even if it may not seem relevant to you. They are here to help and the more information that they have the better equipped that they will be to care for your individual needs.

I didn't hit my head, so why am I getting headaches?

The headaches that you may be experiencing are likely the result of a “pain signal overload” in the neck. Pain is a healthy bodily response to injury. Pain signals are sent to the brain to let us know what actions or positions are likely to cause further harm to the injured structures. Pain signals are carried by nerves from the structure itself to the spinal cord where they join the nerves from elsewhere in the body. The close contact between these nerves allows for the phenomenon known as “pain referral” to occur. Basically the pain signals transmitted through one nerve cause false pain signals to be received from another nerve





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Whiplash Associated Disorders continued...

nearby. The headaches that you are experiencing are a result of this process and with time, as the neck structures heal, the headaches too will likely stop.

What can I do?

In the early stages your physiotherapist may provide gentle pain-relieving manual therapy to the joints involved, massage or dry needling to any muscles in spasm and electrotherapy to decrease inflammation. It may also be important that you begin anti-inflammatory and pain relieving strategies at home. Your physiotherapist will provide you with a regime of ice and gentle pain free movement as well as a targeted stretching and strengthening program. Anti-inflammatory drugs and pain killers may also be beneficial but you must consult your pharmacist or doctor before using them.

You will find a great deal of relief just by listening to your body and avoiding the activities which cause you discomfort. It is equally important though to remain as active as you can, and to continue to do everything that doesn't influence your symptoms.

Stress and anxiety also have the potential to "amplify" your symptoms. Of course there are times when these feelings are unavoidable and everyone will experience them to varying degrees, but by acknowledging that this is a common and manageable disorder and not giving in to panic, you will have won half of the battle.

How long will it take me to recover?

As stated above each case of WAD is entirely unique. Whilst current research is making in-roads into predicting patient outcomes, there is still a great deal that is unknown about the management and outcomes of WAD. Using the strategies outlined above the acute pain may be managed quite effectively within 1-3 weeks of the injury. Full recovery can take anywhere between 12 weeks to 1 year to achieve, with a minority of patients still suffering from occasional symptoms beyond this time.