JOSPT PERSPECTIVES FOR PATIENTS

Neck Pain

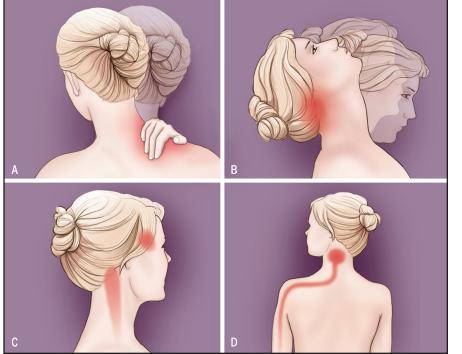
Clinical Practice Guidelines Help Ensure Quality Care

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hat should patients with neck pain expect from physical therapy? Nine years ago, in 2008, physical therapists published the first neck pain clinical practice guidelines. These guidelines have been updated and are now available in the July 2017 issue of the *JOSPT*. As before, these guidelines make recommendations based on best practices from scientific research for evaluation, diagnosis, and nonsurgical treatment of neck pain.

To update these guidelines, physical therapists teamed with

the International Collaboration on Neck Pain to identify leading practices. These revised guidelines provide direction to clinicians as they screen, evaluate, diagnose, and make treatment-based classifications of neck pain. They also outline the best nonsurgical treatment options based on the published literature. At the end of the day, the best care is a combination of the leading science, the clinical expertise of your health care provider, and your input as the patient. These guidelines help inform the first step in this process.



TYPES OF NECK PAIN. The research highlights that most patients with neck pain fall into 1 of 4 groups: (A) neck pain with limited motion, (B) neck pain associated with whiplash, (C) headaches related to neck pain, and (D) neck and nerve-related pain into the arm (also known as radicular pain). The good news is that the evidence supports the use of exercise, manual therapy, and other techniques to help decrease your pain and increase your function.

This JOSPT Perspectives for Patients is based on guidelines by Blanpied et al, titled "Neck Pain: Revision 2017" (J Orthop Sports Phys Ther 2017:47(7):A1-A83. doi:10.2519/jospt.2017.0302).

This Perspectives article was written by a team of *JOSPT*'s editorial board and staff. Deydre S. Teyhen, PT, PhD, Editor, and Jeanne Robertson, Illustrator.

NEW INSIGHTS

The clinicians and researchers who authored these guideline updates reviewed research published from 2007 to 2016. They screened 4000 articles and closely examined 748 of them. They focused on finding the best existing evidence for manual therapy, exercise, education, and other treatment options to help decrease neck pain and improve function. They looked at these treatment options based on whether the patient had (A) neck pain with limited motion, (B) neck pain associated with whiplash from a motor vehicle collision, (C) headaches related to neck pain, and (D) neck and nerve-related pain into the arm (also known as radicular pain).

PRACTICAL ADVICE

Overall, exercise and manual therapy are suggested for many types of neck pain. For those whose pain only permits limited neck motion, the guidelines advocate thoracic manipulation, range-of-motion exercises, and upper back/arm strengthening. If the pain becomes persistent, a more comprehensive approach may be considered. For those with motor vehicle collision-related neck pain, education and early return to normal, non-painful activities that the patient performed before the crash are found to aid recovery. The guidelines' authors also propose manual therapy and exercises to help control pain and improve function. For those with headaches from neck pain, the guidelines suggest manual therapy with neck mobility and upper back strengthening exercises. Finally, for those with neck pain that radiates into the arm, neck traction, stretching and strengthening exercises, and manual therapy may all be helpful.

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