**Long Term Outcome from Whiplash Neck Pain**

Victims involved in acceleration-deceleration injuries, commonly know as whiplash, will often have early onset of symptoms consistent with Whiplash Associated Disorder (WAD). In fact, epidemiological studies report that as many as 84% of people will demonstrate symptoms of WAD including neck pain, headache, dizziness, upper extremity numbness, lower back and more. A recently published report from the **Bone and Joint Decade 2000-2010 Task Force on Neck Pain and Associated Disorders** found that a significant proportion of patients with WAD developed persistent or recurrent neck pain. In fact, the task force observed that greater than 50% of patients report neck pain greater than 1 year post trauma. Interestingly, the Task Force also found that there was a negative correlation between initial symptom severity, post injury psychological distress, passive coping and intense initial health care utilization.

In follow-up to the Task Force report, in March 2010 researchers published a study titled **The Association Between a Lifetime History of Neck Injury in a Motor Vehicle collision and Future Neck Pain: a Population Based Cohort Study** (Eur Spine J 2010 19:972-981). This study reviewed responses to surveys sent to 919 Saskatchewan adults. The authors found a positive association between history of a neck injury in a motor vehicle collision and the onset of troublesome neck pain. The authors stated that their ***“analysis suggests that a history of neck injury in a motor vehicle collision is a risk factor for developing future troublesome neck pain. The consequences of neck injury in a motor vehicle collision can have long lasting effects and predispose individuals to experience recurrent episodes of neck pain*”.** This recent study is the first North American study to investigate this relationship. The results suggest that the incidence of troublesome neck pain is higher in individuals who have a history of neck injury in a motor vehicle collision. The authors also suggest that the design of the study likely resulted in an underestimation of the incidence of neck pain in this population.

This study is important to practitioners and attorneys for several reasons. First, this large population study establishes a foundation for experts to opine that the long term outcome from a traumatic neck injury can be expected to be greater than the general population. More important, it also supports the position that the symptoms severity of the initial presenting symptoms is not prognostic of the likelihood of future problems. In other words, regardless of the level of pain a patient may have early on after a neck injury they may have more significant pain later on. This late developing pain may be worse than another patient that had the early onset of severe post traumatic pain.

These findings allow for some extrapolation. I believe that this finding of neck pain being potentially worse 6 months and 1 year post trauma to be supportive of delayed or late onset whiplash. After practicing with traumatically injured patients for 25 years, I have observed that the symptoms a patient may present with shortly after a trauma are not suggestive of their presentation in the future. I have had many patients with severe post traumatic pain that completely resolve in just a few weeks. I have had other patients with otherwise minor initial complaints develop chronic neck pains which never totally resolve.

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