

Whiplash Injury:

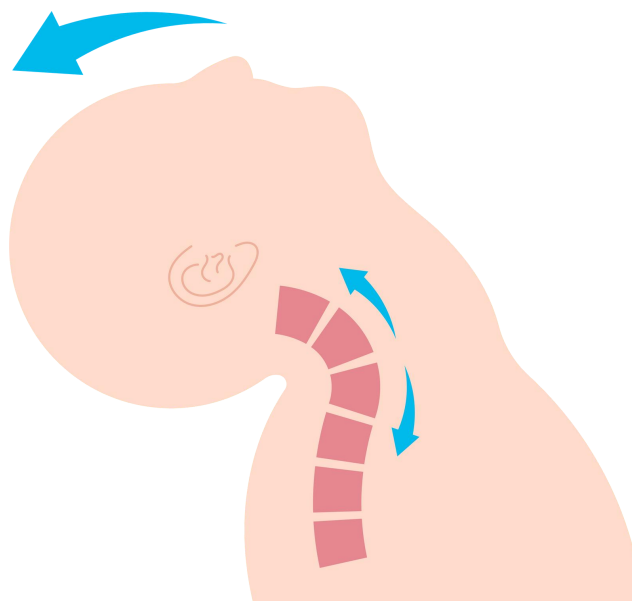
A guide for neck pain after Motor Vehicle Accident

What happened to me?

You have sustained an injury whereby your head has been jerked in a sudden and quick forward – backwards movement. This strains the soft tissues in your neck and results in pain and sensitivity around the neck, shoulder and back.

You may find that the intensity of your pain may not correspond to the injury itself but is more associated with the inflammation or sensitivity of your nerves.

The severity of your pain may not necessarily mean that you have severely damaged your neck.



Should I take painkillers?

Take your medication as prescribed by your doctor. With better pain management, most people report sleeping better and managing their usual activities at home and/or at work.

What can I do to help in my recovery?

Keeping active and positive

Upon discharge, try to keep up with your usual activity. Try to stay at work or return to work as soon as possible even if you have not achieved 100% recovery.

Know that coping with some pain is not harmful to you as you pace your activities and gradually return to your normal daily activities and work. For example, instead of vacuuming the whole house, try to complete one room at a time.

The pain you are feeling is real and it is normal to have some form of apprehension or anxiety initially after an accident. If you do find yourself constantly thinking about the suffering or the accident, discuss this with your doctor or physiotherapist.



Exercise and moving your neck

A physiotherapist will prescribe an individualised treatment programme to help maximize your recovery. In general, it is important to start regularly moving your neck and performing some exercises.

What are the Advice and Tips that I should follow?

■	There is no best resting/sleep posture. The key is to avoid prolong stationary postures and to select the posture that you feel most comfortable in. Even the most comfortable posture doesn't allow you to remain in the same position the whole time.
■	Maintaining a normal life and staying active are very important in your road to recovery. In fact, consciously avoiding activity can cause your recovery to be slower than expected. Doing exercise is important for your recovery
■	It is important to place more focus on improvements in your daily and/or work functions rather than your symptoms.

Can I ever get better?

Aches and pain are part of the body's normal response to stress and trauma and each person responds differently. 40-50% of cases have complete recovery after 12 weeks and most people can continue to perform their daily activities and work requirements despite still experiencing aches and pain. A small percentage of individuals will still have some minor recurring pain after the incident.




Let pain guide how much you can continue with your daily activities:



You may carry on with your usual activities like walking, light housework, deskbound work. Take breaks often.

You may not require painkillers; if required, use the minimal effective dose.


If you are pain-free, you should progressively do more before you perform intensive physical activity.



You may consider carrying on with your usual activities but do less than before and always take regular breaks before your pain gets worse.


You should consider painkillers.

Avoid all intensive activities.



You need to use painkillers unless the risks outweigh the benefits.

Seek advice with your physiotherapist if you're unsure about activity levels.



What are the signs and symptoms that I need to be concerned with?



In some situations, whiplash injuries are serious and result in permanent damage and disability. These need to be seen at Accident & Emergency as soon as they are detected. Some of the warning signs are:

- Issues with vision – seeing more than 1 image of the same object
- Sensation of dizziness or light headedness
- Numbness over one side of your face
- Sudden weakness in your arms / legs leading to falls or near falls (Includes feeling unbalance when walking)
- Difficulty with speaking
- Difficulty swallowing when eating / drinking
- Sensation of nausea and vomiting
- Loss of sensation or increasing difficulty when you pass / stop / control your urine or bowel motion
- Leaking urine or recent need to use pads
- Loss of strength and control in your hands and fingers (having issues buttoning clothes or using chopsticks)
- Sudden excruciating headache or neck pain (worse you have ever felt)



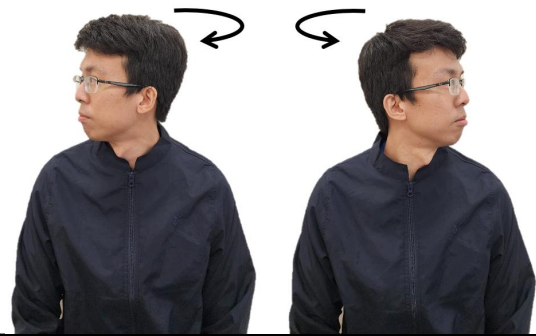
Here are some exercises recommended for you.

Try them within your pain tolerance.

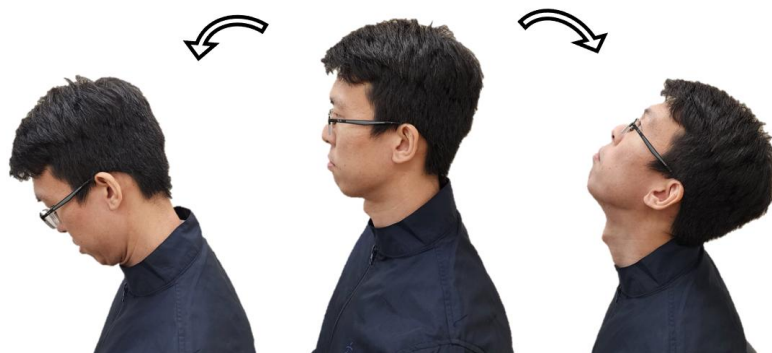
Slowly tilt your head and neck from side to side. Perform _____ reps, _____ times per day.



Slowly turn your head and neck side-to-side. Perform _____ reps, _____ times per day.



Slowly move your head and neck up and down. Perform _____ reps, _____ times per day.



Slowly shrug your shoulders up and down. Perform _____ reps, _____ times per day.



What can I expect after discharge?

Although it is safe for you to be discharged from the hospital, it is normal to still experience pain. The medical team has scheduled you for an appointment with the outpatient physiotherapy department to continue with the next stage of your recovery. It is very important that you follow up to achieve the best outcome. Bring your exercise sheet along with this educational brochure on your initial visit.

If you have any queries, you can always seek advice from your physiotherapist/doctor during your outpatient appointment. In the meantime, it is important to follow this guide until you attend your outpatient physiotherapy appointment.

Contributed by Physiotherapy, Rehabilitation, Allied Health Services

This brochure is produced for educational purposes and should not be used as a substitute for medical diagnosis or treatment. Please seek the advice of a qualified healthcare provider before starting any treatment or if you have any questions related to your health or medical condition.

Information shared is accurate as of December 2023 and subject to revision without prior notice.



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