

# Neck pain

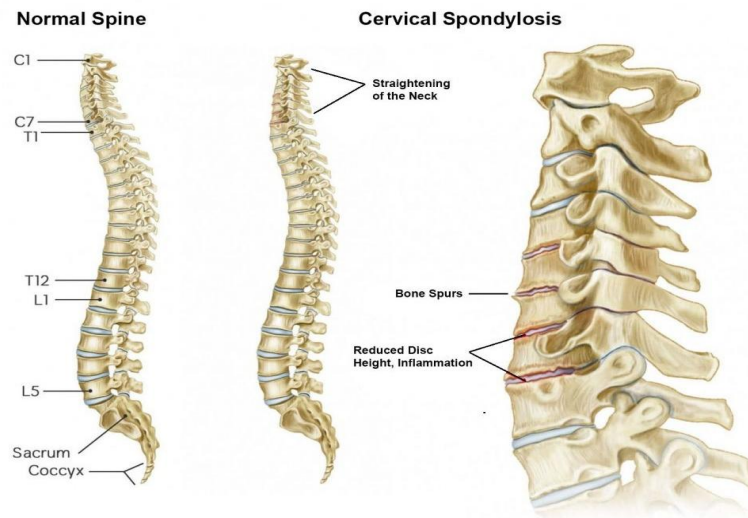
## Patient information factsheet

### What causes neck pain?

- Neck pain is a common issue, but it rarely has a serious medical cause.
- Most people will have neck pain at some point in our lives.
- Usually, neck pain is the result of holding your neck in the same position for too long.
- However, other things can also cause or contribute to neck pain, such as:
  - Worry or stress
  - Sleeping awkwardly
  - An accident, which can cause whiplash (when your head is jerked forwards, backwards or sideways.)
  - A sprain or a strain
  - A flare up of cervical spondylosis (see the section below for more information about this) which can happen as the discs and joints in the spine age.
- Many people develop a stiff and painful neck for no obvious reason.
- It may happen after sitting in a draught or after a minor twisting injury.
- This is called non-specific neck pain.
- This is the most common type of neck pain and usually disappears after a few days, providing you keep gently moving your neck and rest when you need to.
- You can often manage short spells of neck pain yourself using over-the-counter painkillers and gentle stretches.
- However, if your neck problem continues or significantly affects your everyday activities then you should see a Doctor or other healthcare professional.

# Conditions related to neck pain

## Cervical spondylosis



- Spondylosis is quite normal as you get older and happens when the bones and discs in your spine change as they age.
- It's caused by your body naturally adapting to the everyday use that occurs over many years.
- In spondylosis, small lumps of new bone, called osteophytes, grow at the edges of the vertebrae and the facet joints.
- Over some time, the discs in your spine can also start to become thinner.
- These changes can be seen in x-rays and when they happen in the neck it's known as cervical spondylosis.
- They may also occur at the bottom of the spine, where they are known as lumbar spondylosis
- Spondylosis shouldn't affect your everyday life, if you do the right exercises, seek advice from your Doctor and look after your general wellbeing, then your symptoms are more likely to improve.
- Almost everyone will have spondylosis somewhere in the spine at some point in their life and often it doesn't cause any pain at all.
- Although spondylosis doesn't always cause pain, it may increase the risk of having spells of neck pain.
- However, because neck pain tends to come and go over several weeks, it is not usually possible to identify spondylosis as a direct cause.
- Occasionally, if you have spondylosis:
  - You may feel pain or numbness. This occurs if the nerves are irritated or pinched, either by bulging discs or osteophytes.
  - You may have blackouts or dizziness. This happens if the vertebral artery is pinched, as it controls the blood supply to your brain.

- To ease the pain, try to go about your daily activities as usual.
- Improving your posture (how you hold your body) and performing regular neck exercises can also help.
- If you have long-term pain, your Doctor may want to prescribe painkillers or drugs that relax the muscle.
- However, muscle relaxants are rarely offered for more than a few days at a time.
- In rare cases, where there is a problem with your spinal cord or a nerve is being pinched by a slipped disc, surgery may be considered to relieve the nerve pain.
- Spondylosis shouldn't be confused with ankylosing spondylitis, where inflammation of the spine leads to a build-up of calcium on the bones, causing pain and stiffness.

### Whiplash

- Whiplash occurs when your head is jerked forwards, backwards or sideways.
- This happens most commonly in car accidents and sports injuries.
- The pain is caused by the unnatural stretching of the tissues that hold the bones of your neck in place. There is often a delay of 24 to 48 hours before you feel any pain or stiffness from whiplash.
- Although whiplash can badly strain your neck, seat belts and properly adjusted headrests in cars help to prevent serious injuries.
- Try to ensure that your headrest, and that of everyone else in the car, isn't too low or pushed too far back.
- Most whiplash improves within a few days or weeks.
- Make sure you go about your normal daily activities and keep your neck mobile.
- You can take painkillers, such as paracetamol, and you can try physiotherapy or gentle exercises to prevent long-term problems and get you back to normal as soon as possible.
- Try to avoid using soft collars that prevent your neck from moving, as these can slow down your rate of recovery.

### Tension

- Most of your muscles relax completely when they're not being used, but some muscles must work all the time to keep your body upright.
- Muscles at the back of your neck must always be active, otherwise your head would fall forwards when you're sitting or standing.
- When you're worried or stressed, you often tighten these muscles even more, which can cause neck pain and tension headaches.

- Tension headaches are very common and are sometimes wrongly called migraines.
- Relaxation techniques are often a good way to treat tension. You might want to try meditating or joining a class that promotes mindfulness or self-awareness, such as yoga, tai chi and Pilates.

### Slipped discs

- A slipped or bulging disc occurs when the cartilage that cushions the vertebrae in the spine pushes out.
- Although discs are designed to move, occasionally they slip or bulge out of their normal position.
- If a slipped disc is pressing on a nerve, the neck pain you feel can be accompanied by:
  - pain shooting down one or both arms.
  - numbness.
  - pins and needles.
  - weakness.
- This will often settle by itself or following self-help treatments, but occasionally you may need further treatment, especially if symptoms continue after several weeks.
- Try to keep active and gradually increase the amount of exercise you do.
- You can also take non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, and painkillers, such as paracetamol.
- NSAIDs are not suitable for everyone, so speak to a pharmacist if you're unsure.
- In some cases, your Doctor may want to prescribe something stronger or ask you to have a magnetic resonance imaging (MRI) scan.
- It's unlikely that you'll need surgery for a slipped disc.

### Stenosis and myelopathy

- Rarely, disc bulges and osteophytes can cause narrowing of the spinal canal, which is called spinal stenosis.
- This can affect the spinal cord and cause weakness in arms and legs, a condition known as myelopathy.
- Symptoms associated with myelopathy and stenosis can get worse.
- It is important to let your Doctor know if you are experiencing any symptoms which could be a sign of nerve problems; including walking difficulties, falls or clumsiness.
- Your doctor may send you for an MRI scan or refer you to a specialist.

## Should I see a Doctor?

If your neck pain lasts more than a few weeks, you should see a healthcare professional. You should also speak to them if you:

- have symptoms other than pain and stiffness.
- have pain, tingling, numbness or weakness in your arms or legs.
- have sudden severe pain after a fall or injury.
- suddenly develop neck stiffness along with difficulty lifting both arms above your head.

Some rare causes of neck pain include:

- a fracture
- an infection
- a tumour
- inflammation - which can happen in ankylosing spondylitis or meningitis

If you suspect you have any of the above, see your Doctor urgently.

## What can I do to help myself?

- Over the counter painkillers
- Exercises, including neck stretches, walking, swimming
- Relaxation
- Using heat and ice packs
- Gentle massage
- Changing posture regularly

## Exercises



- Stand or sit tall and pull yourself up as if there is a rope pulling the back of your head upward.
- Turn your head to one side to look over your shoulder, without moving your head forwards.
- Return to the centre then repeat.



- Stand or sit upright.
- Look at an object at eye level and slowly move your head back, tucking your chin.
- Guide the movement by placing your finger on your chin.
- Return to the starting position and repeat.



- Stand facing a wall with your arms straight and hands on the wall.
- Keep your back straight.
- Bend your elbows to move closer to the wall and squeeze your shoulder blades together and then straighten your arms and push shoulder blades apart.



- Sit comfortably in a chair.
- Slowly raise your shoulders up to your ears.
- Do not bring your ear to your shoulder.

## References

<https://versusarthritis.org/about-arthritis/conditions/neck-pain/>

<https://www.nhs.uk/conditions/cervical-spondylosis/>

## Contact our service

### MSK CATS and Physiotherapy Services

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## Contact our Trust

If you have a compliment, complaint or concern, please contact our Patient Advice and Liaison Service (PALS) on **020 7288 5551** or [whh-tr.PALS@nhs.net](mailto:whh-tr.PALS@nhs.net).

If you need a large print, audio or translated copy of this leaflet, please email [whh-tr.patient-information@nhs.net](mailto:whh-tr.patient-information@nhs.net). We will try our best to meet your needs.

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