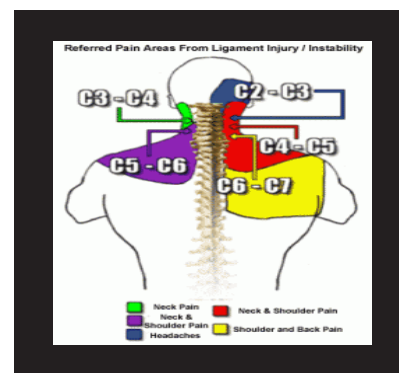
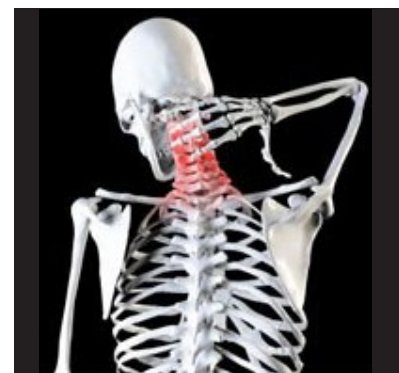


How The Body Works... A Royal Pain in the Neck!

There are two major types of **"PAIN IN THE NECKS"**..... Type one—your neighbor, friend or co-worker and Type two— an actual pain in your own neck. **Sorry**, but we can't help you with the first one.

An actual pain in your own neck can come from several sources. In order to be effective at treating your pain, you must get to the underlying problem, or what HCE physical therapists call "THE DRIVER" of you problem. Neck pain can come from muscle fatigue, ligament strains or small tears, joint irritation or nerve problems. Getting to the bottom of this large list takes a skilled evaluator. It is also important to consider your "history" as it relates to other problems in this area. For instance, people with Rheumatoid Arthritis tend to have signs of degeneration in the upper neck, where it attaches to the head. Careful attention / needs to be given to this area, to ensure the safety of each patient. Once we have ruled out any "systemic" (total body) or specific medical reasons for your neck pain, we would move onto a comprehensive evaluation. We will give an overview of this process, so you can understand how this part of your body is supposed to work. What we do is check for normal function, in detail, and where it is not present, we determine the cause and fix it.

We will start with a closer look directly at the neck itself, although many neck problems come from shoulder or upper back conditions. We will look at those possibilities elsewhere in this edition of *the Connection*. As you can see in the picture to the right, the human neck is made up of seven bones (vertebrae) stacked on top of each other. The shape of the bones is very specific and allows the neck to move in a very well understood way. As a matter of fact, as much as one half (50%) of your rotation (turning your head) happens between your first and second vertebrae. If you come into the clinic with a severe rotation limitation, we would need to take a very close look at this part of your neck. Keep in mind, just because you can't turn your head, DOES NOT MEAN, it needs to be manipulated or cracked. As a matter of fact, letting your neck be cracked without verifying the STABILITY and INTEGRITY of specific ligaments and arteries in your neck, could lead to a stroke or even your death.



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Truths / Myths About Exercise... "Strengthening" Your Neck?

When thinking about exercises for your neck, we really need to focus on a few key concepts: the health of each joint, the quality of each movement and the endurance of the neck and shoulder muscles.

Notice that I did NOT say the raw strength and power of the neck. Obviously, you neck needs to be strong enough to carry the weight of your head and withstand outside forces when we work and play, but doing this is not typically the problem.

When we have trouble with our necks, it is usually because the way we move (or don't move) our head, neck or shoulders begin to wear out our joints, or weaken the neck's soft tissues. The way to combat this is to learn specific exercises to target the upper, middle and lower regions of the neck.

The upper neck can be exercised with specific and small movements of the "head on the neck," such as moving the tip of your nose in a 1-2 inch figure eight pattern.

This is a great exercise to nourish the joints and soft tissue of the upper cervical spine.

[Move like this!](#)



For help with your neck exercises, contact HCE at 866-398-9169.

True Stories... Referred Pain!

Rose, a 52 year old clerical worker, told her supervisor that she was having pain between her shoulder blades in the middle of her back. She didn't recall any specific injury but it was getting worse each month.

Rose was taking time off of work to see several different types of healthcare providers that were treating the problem area in several different ways. Nothing was helping. Rose was getting frustrated.

Rose's supervisor suggested she contact HCE and talk to one of their physical therapists. Rose told the HCE PT what was happening and sent in some movement videos. The therapist identified abnormal movements in Rose's neck and asked Rose to press in a specific area, to Rose's surprise, it was tender.

The HCE PT had correctly determined that Rose's problems was REFERRED pain, (see picture 2, page 1) possibly coming from a ligament laxity / strain in her lower neck. Rose began some specific exercises, the abnormal movement was corrected and the pain resolved in two weeks. Understanding the human movement system is critical for good outcomes!

How the Body Works... From Pg 1 A Royal Pain in the Neck!

Another thing that needs to be checked with this apparent "stiffness" in the neck is if the joints are truly stiff or the actually moving too much. The body could be "protecting" itself from excessive movement or hypermobility. Obviously, if the joints are moving too much, then stretching or cracking them is exactly what you DON'T WANT TO DO! How would you or your HCE physical therapist figure this out? There are two primary ways.

The first method is with their hands. The HCE physical therapist has several techniques to specifically assess the movement of the exact joints in question and can feel normal, stiff or hypermobile movements at these joints. Usually, the patient can feel the difference between a normal joint and an abnormal joint once the HCE therapist points out the difference. The second method to figure out what is going on is to change the "workload" on the suspicious area. If you were originally checked in sitting or standing, then the weight of your head (fighting gravity) is the main part of the "workload" in question. If we lay you down (thereby reducing the effect of gravity) and ask you to repeat the movement, two things are possible. First, there is no change. This COULD mean that there is true stiffness in the joints or other tissues being moved. Decreasing the pressure on these tissues would have NOT impact if they are really stiff. However, if the body was just protecting itself because it was too loose or hypermobile and could NOT control the movement when the full weight of the head was fighting gravity, it is likely that laying you down would produce a greater range of motion and less pain with the movement.

Along the same line of thought, if I ask you to move repeatedly in either a test or an exercise and your motion gets worse, you may have a deep joint or ligament hypermobility or an endurance issue with the muscles doing the work. If you actually got increased movements (range of motion), then you were probably stiff in the first place and the repeated movements are helping to work out that stiffness. Everything that has been discussed so far related to the upper neck and rotation is actually true for all the other movement patterns of the rest of the neck. By watching you move in all directions, the skilled HCE therapist can most likely touch exactly where you are tender, even if you don't tell them.

One final thought to consider. You should see that a quality evaluation consists of testing and retesting in the same visit. This is the only way to see if the therapist is correct in what they think is THE DRIVER and has selected the correct treatment technique. If you are experiencing any type of neck or shoulder problems, please consider contacting HCE for assistance.

Healthy / Unhealthy Habits... *Do you sleep on your stomach?*

SLEEP, God's gift to mankind! Sleep serves a great purpose. It allows our bodies and minds to get a break and recharge. However, this can only happen if we are "at rest" while sleeping.

What do we mean by "at rest?" To be "at rest" our mind and body needs to be fully relaxed. All our body parts (head/neck, shoulders, low back, etc.) need to be supported against the tug of gravity and their own weight. Many patients tell me the only way they can get to sleep is on their stomach. Of course,

they need to turn their head to one side or the other (often to the same side each night) or they can't breath. These patients tell me this position is the only way they can get their minds and body's to relax. Most of the patients I have this conversation with are HEADACHE, NECK or SHOULDER patients.

What MIGHT be happening in this position? In this position, we potentially can be cutting the blood flow and oxygen supply to our brains to a dangerously low level. The "vertebral artery"

runs THROUGH the bones of our neck and gets twisted at 90 degrees when we sleep on our stomach. In most cases, this is fine because the artery on the other side is sufficient to supply the brain.

However, if you have a problem with the opposite side's artery, you could be in trouble. If you are a stomach sleeper, contact your HCE therapist to investigate this further.

Sleep well, but for the right reasons!