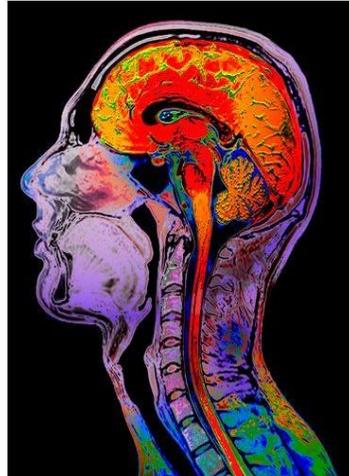
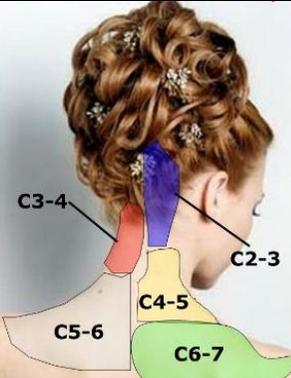


HEAD AND NECK CONDITIONS



<u>Condition</u>	<u>Causes</u>	<u>Symptoms</u>
Discogenic Pain Syndrome	Pain originating from the Intervertebral disc as a result of direct trauma, overuse, postural, disc degeneration, and sudden unguarded movements.	Immediate/ delayed onset pain. Pain radiation into shoulders and back, headaches, muscle spasm, possible bruising/ swelling. X-rays show degeneration changes.
Cervical Degenerative Joint Disease	Abnormal biomechanics, genetic predisposition, metabolic causes, repetitive action/ joint motion, trauma/ fractures.	Slow onset dull aching neck pain, morning stiffness/ pain increased repetitive or heavy use, reduced range of motion. X-rays show narrowed disc, Osteophyte formation, subchondral sclerosis and cysts.

<p>Cervical Facet Syndrome</p>	<p>Cervical injuries, whiplash, sprains/ strains, arthritis, postural abnormalities.</p>	 <p>Dull aching pain, sharp pain, headaches, decreased range of motion, pain referred into upper back and shoulders.</p>
<p>Cervical Instability</p>	<p>Repeated motions or trauma, spinal pathology, sprain/strains, rheumatoid arthritis.</p>	<p>Depends on amount of structural damage which can either be none, mild, moderate or serious. Recurrent neck pain, “continuous clicking” sounds. Pain is relieved by rest and aggravated by sustained positions</p>
<p>Cervical Radiculopathy</p>	<p>Neural compression due to, disc herniation, forced head positions than cause vertebrae to compress the spinal nerves, bony overgrowth.</p>	<p>Deep aching/ burning neck pain, pain radiation into the arm which is either sharp, electrical, tingling or numbness. Muscle weakness.</p>
<p>Cervical Myelopathy</p>	<p>Trauma, tumors, infection, vascular disease, degenerative conditions and demyelinating disorders that cause compression on the spinal cord and spinal nerves.</p>	<p>Depends on what level in the spinal cord the problem occurs. Neck pain, pain, weakness or numbness in the arms and legs.</p>
<p>Burner/ Stinger Syndrome</p>	<p>Quick movements that cause a stretching or compression of the nerves which run from the back of the neck into the arm (brachial plexus).</p>	<p>Burning, pinching or shocking sensations. Numbness, burning or weakness in the arm or hand.</p>
<p>Thoracic Outlet Syndrome</p>	<p>Compression of the nerves, arteries or veins which go into the arm. Compression can be caused by tight muscles, bony structures and other pathologies such as tumours.</p>	<p>Pain, numbness, tingling and weakness in the neck, shoulder, arm or hands.</p>
<p>Cervical Sprain/ Strain/ Whiplash</p>	<p>Direct trauma (car accidents, falls, sports injuries). Overuse, poor posture and fatigue which lead to the gradual damage of certain structures.</p>	<p>Depends on whether a grade 1, 2 or 3 sprain/ strain has occurred. Pain in the neck, shoulders or arms immediately or a few days later. Headaches and</p>

		possibly tinnitus.
Temporal Mandibular Joint Syndrome	Dysfunction of the jaw joint and/ or surrounding muscles. Trauma, stress, osteoarthritis, rheumatoid arthritis, dental abnormalities, muscle spasms, teeth grinding.	Jaw or facial pain, locking/ clicking joint, decreased ability to open mouth fully, headache, ear ache and neck pain.
Torticollis	A congenital or acquired rotation and sideways bending deformity of the head and neck due to cervical muscle spasm or shortening. Can be due to muscle strain, neck injuries/ pathologies, spinal infections or tumours.	Neck rotated and bending to one side, neck pain and stiffness.
<u>Headaches:</u>		
Cervicogenic	Head pain referred from the neck as a result of cervical trauma and joint dysfunction. Also caused from sustained neck postures and repetitive neck/ shoulder movements.	Neck and suboccipital pain which can radiate to the forehead, eyes, temples and ears. The pain can be aggravated by certain head positions.
Tension	Headaches originating from muscles due to stress, lack of sleep, muscle strain, postural imbalances, TMJ syndrome and psychological factors such as depression or social factors.	Intermittent headaches (as if there is a tight band around the head). NOT a throbbing pain, NO nausea.
Cluster	Hormonal influences, vascular abnormalities, stress bright lights, allergies, alcohol, tobacco and genetics.	Recurrent brief attacks of sudden severe, one sided eye pain described as excruciating, piercing, boring and deep. Lasts between 5-180 minutes.
Migraine- with aura (+/- 20%) - without aura (+/- 80%)	Recurrent head pain due to changes in the brain and surrounding vasculature. Associated causes include genetic predisposition, “A” type personality, neural and vascular disturbances.	Usually have a triggering factor such as stress, hormonal changes and blood sugar changes, certain foods (red wine, cheese, nuts, chocolate, coffee, tea, alcohol, niacin, processed foods, preservatives, MSG) and medications. Pain is moderate/ severe, one sided or localised to the frontal, temporal or eye regions and is throbbing in nature. Builds up for a couple hours and is associated with nausea and vomiting.

