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Medicine for Managers

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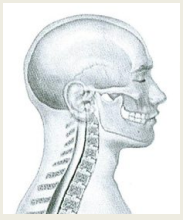
Whiplash Injuries

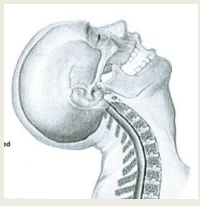
A whiplash injury occurs when the neck is forcefully moved back and forth in a motion rather akin to the cracking of a whip. It may occur as a result of a range of traumas, such as sports accidents, physical abuse, falling and of course in motor accidents, usually as a result of being struck from behind. Most people recover within a few weeks although some experience symptoms lasting months or even years, depending on damage sustained.

The medical term for the injury is ***cervical acceleration-deceleration injury***, which actually describes the nature of the event. Interestingly, the injury was originally called ***railroad spine***, in the days when accidents resulted from train crashes rather than from motor accidents

The actual injury occurs when the head is thrown backwards and then forwards with force.

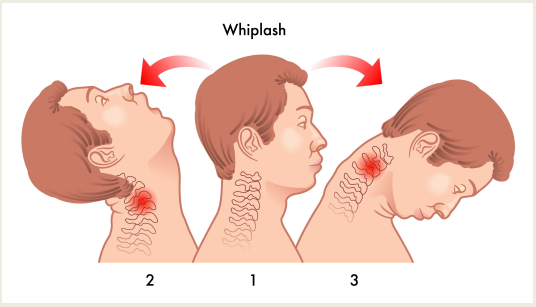


Just prior to impact the neck would have a normal curvature. In the impact such as a rear impact in a car, the car moves forward whilst the person stays still. The seat accelerates the person's body forward whilst the head remains stationary. All levels of the neck are extended, damaging ligaments and stretching nerves. The head is then thrown or 'whipped' forward as it



effectively catches-up with the torso and is hyper-flexed (i.e. the chin moves down towards the chest).

Finally the head returns to the neutral position. The whole event happens in less than half a second.



The degree of injury depends on the speed of the impact and the position of the head amongst other things. Symptoms may include:

- Neck pain and stiffness
- Worsening pain with movement
- Restricted movement
- Headaches, often felt at the base of the skull

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- Tenderness of the neck, shoulders, upper back and radiating down the arms
- Tingling spreading down the arms
- Tiredness and dizziness

Occasionally people experience a range of other symptoms including blurred vision, ringing in the ears (tinnitus), memory issues and depression.

In the most severe of accidents there may be a fracture or dislocation of the cervical spine and the possibility of injury to the spinal cord.

Most patients involved in an accident end up at the A&E department or in the GP's surgery. The usual findings are of neck ache or backache which developed 12 to 24 hours after the accident (as the muscle spasm increases).

Most display no serious features and can be treated with simple analgesia. More severe cases may need a cervical collar for support and may be referred for X-ray to exclude more serious injury.

Relatively few patients need further investigation such as MRI or referral to a specialist orthopaedic surgeon or neurologist.

Normally the more mild symptoms wear off in two to twelve weeks and benefit from self-help techniques such as regular flexion, extension and rotational exercises half a dozen times a day.

There has been considerable work on reducing the frequency and severity of whiplash injuries, most notably through the development of head restraints, which were patented by Benjamin Katz in 1921 but did not appear in a production car until Volvo in 1968. They were not standard in most British cars until over 30 years later. There are many designs but their principal purpose is to prevent the hyperextension of the neck with backwards movement of the head.

Commonly the head restraint is incorrectly located with the result that it does not provide the necessary protection.

It should be set about 3½ inches below the top of the head and virtually touching the back of the head whilst driving. A correctly set head restraint may reduce the risk of whiplash by about a third.

Road casualties have largely plateaued since 2010, according to the Department of Transport.

Whiplash and motor personal injury claims peaked at around the same time with figures showing about 550-670 thousand motor related claims during that era.

By 2025, motor personal injury claims had dropped to around 285,000, marking a fall of over 50% since the start of the decade.

The *Ministry of Justice* introduced a whiplash tariff in May 2021, which was updated from June 2025. The payments laid out in the tariff depend on the duration of injury.

Up to 3 months	£275
More than 3 mth, less than 6 mth	£565
More than 6 mth, less than 9 mth	£965
More than 9 mth, less than 12 mth	£1,510
More than 12 mth, less than 15 mth	£2,335
More than 15 mth, less than 18 mth	£3,445
More than 18 mth, less than 24 mth	£4,830

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In addition…

… if minor psychological injury is agreed, the payment increases by between 9% for an injury of less than 3 months to about 3% for an injury 18 to 24 months.

It is interesting that whiplash injury claims have declined, and undoubtedly there will be ongoing developments in car safety which may further reduce the harm that whiplash injuries may cause.

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