What is osteoarthritis of the neck?

Osteoarthritis (OA) of the neck affects the bones at the top of the spine. It is also called cervical spondylosis.

OA of the neck occurs when the springy cushioning (cartilage discs) between the bones in the neck becomes thinner and the bones which link the spinal bones (facet joints) swell and thicken. This happens as we get older — 85 per cent of people over the age of 60 will have changes on an X-ray. However, only some people experience symptoms from these changes.

If you have pain in your neck, it may not be due to arthritis. Sometimes neck pain can be caused by ongoing stress with muscle spasms, poor posture or holding your neck in one position for too long. This is caused by non-specific neck pain. Sometimes the pain travels to the neck from the shoulder (called referred pain from the shoulder).

The cause of OA of the neck is not known, but a person may be more prone to developing it as they get older or if they have sustained an injury, such as a fracture.

How will it affect me?

If you have OA of the neck, it is likely that your neck will be painful and stiff, which may worsen when you try to move it. The pain and stiffness will be better on some days than on others. You might also feel tender spots on the back of your neck and experience dizziness and nausea.

Some people hear a popping or clicking sound as they move their head. This sound may come from two roughened bony surfaces coming into contact with one another or tendons tightening. This symptom can be worrying, but it is not a sign that anything is seriously wrong.

The pain from OA of the neck may affect other parts of your body. Neck pain may spread to the head and shoulders, which is called referred pain. If a cartilage disc bulges out from between your vertebrae (bones of the neck) and pinches the nerve roots, pain or numbness can travel into the arms.

OA of the neck can affect the way your nerves function, although this is not very common.

What is the treatment?

Once your GP has diagnosed OA of the neck, they may prescribe medication. Painkillers will not affect the arthritis itself but should help relieve the pain and stiffness. You may be given painkillers like paracetamol or non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen.

It is important to take NSAIDs with food, and not on an empty stomach. While many people have no problems, NSAIDs can cause indigestion and sometimes stomach bleeding, so you may need to be prescribed stomach medication at the same time. If you are worried about the side effects of any of your medication speak to your doctor.
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If you can't tolerate NSAIDs or your pain is more severe, your GP may prescribe codeine, which may also be taken in combination with NSAIDs or paracetamol. Your doctor might prescribe an anti-depressant, such as amitriptyline, which will be given to you because it can help with chronic pain. It can be useful if you have had neck pain for a long time, especially if the pain keeps you awake at night.

If painkillers have not reduced the symptoms of OA of the neck, you may be offered a steroid injection into the joints between the vertebrae (facet joints).

Is surgery an option?
Surgery may be considered if symptoms worsen despite treatment or if there is progressive damage that cannot be treated in any other way. Surgery is usually only recommended if the changes that occur as a result of OA of the neck mean that the root of one of the nerves in your neck is being pressed on or damaged causing referred pain down the arm.
It might also be suggested if there is pressure on or damage to the spinal cord itself. This will require a hospital assessment and special imaging such as an MRI scan.

What can I do to help myself?
There are plenty of lifestyle changes you can make to reduce muscle tension, keep your neck flexible and reduce pain.

- Balance activity with rest.
- Reduce the effects of stress by learning to relax your muscles using a technique such as meditation.
- Ensure that your neck is supported at work, in the car and during your leisure time with a good pillow or chair.
- A supportive pillow and mattress — such as those made from memory foam — may help to improve your quality of sleep and support your neck and body whilst you are asleep.
- Check the height of your desk and chair at work and at home, and make sure that a computer screen is at eye level. An occupational therapist (OT) or other workplace professional can help you to find an appropriate set up.
- If the muscles in your neck become taut, gentle massage can reduce the pain. It is important to consult a healthcare professional, such as a doctor, chiropractor, osteopath or physiotherapist for this.
- Applying a heat pad to your neck could help to relieve pain and relax tense muscles. For more information, see the factsheet Home treatment for pain relief: heated pads and cold packs at: www.arthritiscare.org.uk/Factsheets
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REAL LIFE STORY

‘I used to only think about the osteoarthritis in my neck when the pain was really bad. Now I know I have to relax properly and keep mobile to prevent pain.

My memory foam pillow makes my neck feel really supported and more flexible in the mornings. I use gadgets such as automatic can and jar openers to take the strain from my shoulders and neck. A book stand enables me to read books without bending my neck over.

I am always looking for ways to carry on doing everyday tasks.’

 Movements and positions to avoid

How you carry out everyday activities can really affect your levels of pain. Always support your neck by:

- not slouching in your standing position
- not bending your neck forward or keeping it in the same position
- not sleeping whilst sitting with your neck unsupported (as the neck will drop down in front)
- not resting a telephone handset between your head and neck
- not carrying heavy weights

 Exercise and diet

Movement maintains joint health, and gentle stretching and strengthening movements of the neck can help you manage pain and stiffness. Make sure that you think about your neck position when you exercise and avoid putting it in awkward positions.

Pilates, yoga and the Alexander technique improve neck posture, but it is not known how effective they are at treating neck pain. Check with a health professional to ensure that any exercises are appropriate for you.

If you are finding it difficult to do everyday tasks, an OT can come to your home or place of work and give you advice or equipment to reduce strain on your neck from tasks such as ironing, driving or using a computer.

The exercises below may help you to manage pain and stiffness in your neck. If you also have rheumatoid arthritis or another type of inflammatory arthritis, you need to take extra care when doing exercises. This is because there is a possibility of cervical
spine instability — where one vertebra can move or slide on another. Always speak to a GP or physiotherapist before you start exercising.

**Standing exercise**
Stand with your back to a wall. Tuck your chin down and try to get the back of your head to touch the wall. If it is difficult, use a pillow and push back into that. This should improve mobility.

**Sitting exercise**
Push your bottom back against a chair to put your head in a good position. Turn to look over either shoulder. Tip your ear towards your shoulder. Watch yourself in the mirror to make sure that you keep your head straight.

**Sitting exercise**
Look straight ahead and then look up to the ceiling. Slowly lower your head so that you are facing forwards again. Do this three or four times and build up to 10 if you feel able.

**Head turn**
This can be done either sitting or standing. Keep your shoulders relaxed and hold your head straight ahead. Slowly turn your head to look over your right shoulder, without tilting your head to the side. Feel a gentle stretch and tightness in your neck. Hold the position for five to six seconds. Do the same with your left shoulder.

**Neck collars**
Generally, neck collars are not recommended but on professional advice neck collars may relieve neck pain. They work by resting the neck muscles and supporting your head in a good position. However, it is not a good idea to wear a neck collar all the time as it can weaken the muscles in the neck and cause stiffness.

With appropriate exercise and learning how to support your neck whilst you carry out everyday tasks, you can minimise the pain and stiffness of OA of the neck.

**Where can I get more information and support?**
**Arthritis Care** is the UK’s largest charity working with and for all people who have arthritis.

We are here to help you make positive choices through our information, website, self-management training, and professional helpline. Call the free helpline for confidential support on 0808 800 4050 (10am-4pm weekdays) or email: Helplines@arthritiscare.org.uk

You can find support from others with arthritis by joining our online discussion forums.
We rely on donations to fund our vital work in supporting people living with arthritis. If you would like to make a contribution, please phone us on 020 7380 6540 or you can donate online.

www.arthritiscare.org.uk

Our factsheets are reviewed every 18 months. Please check our website for up-to-date information and reference sources or call 020 7380 6577.

Last review 2015. Next Review 2017

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Contact us
For confidential information and support about treatments, available care and adapting your life, contact the Arthritis Care Helpline

Freephone: 0808 800 4050
10am-4pm (weekdays)
Email: Helplines@arthritiscare.org.uk

For information about Arthritis Care and the services we offer, contact us at: www.arthritiscare.org.uk

You can also talk to other people who are living with arthritis, through the discussion forums on our website.

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