

# Cervical radiculopathy

**Your physiotherapist has diagnosed you with cervical radiculopathy. This booklet gives information on the common causes and how physiotherapy can help. If you have any questions, please speak to your physiotherapist**

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## **What is cervical radiculopathy?**

Cervical radiculopathy is a nerve irritation from the neck causing neck and arm pain that can extend to the hand and fingers. Your arm pain can feel worse than your neck pain. You might also have numbness and/or pins and needles. Sometimes, weakness in the arm or hand muscles can happen. Even though it can be extremely painful, it is rarely associated with serious disease.

## **Other types of neck pain**

Cervical radiculopathy is one type of pain originating from the neck. Other types of neck pain include:

- mechanical neck pain (most common)
- serious spinal pathology or red flags (rare)

## **Mechanical neck pain**

It is not possible to diagnose the exact cause of the pain in most people. It can be associated with tight muscles, stress, reduced muscle strength, and stiff joints. This is not associated with serious underlying disease.

## **Serious spinal pathology (red flags)**

Occasionally, neck and arm pain is caused by a condition that needs urgent medical attention. It is important that you tell your GP or other medical professional immediately if you experience any of these symptoms:

- weak grip and dropping items
- reduced dexterity, for example, difficulty fastening buttons or writing
- unexplained falls or poor balance

- inability to pass urine (pee)
- numbness around the genital region or back passage
- pins and needles or numbness in both arms
- significant unexplained weight loss
- a fever (high temperature) or feeling unwell

You should also let them know if you have a history of cancer, or trauma (for example, a fall from a height or high-speed car accident).

Your physiotherapist will ask you questions and perform a physical examination to see if there is a more serious cause for neck and arm pain, before making a diagnosis of cervical radiculopathy.

## **What causes cervical radiculopathy?**

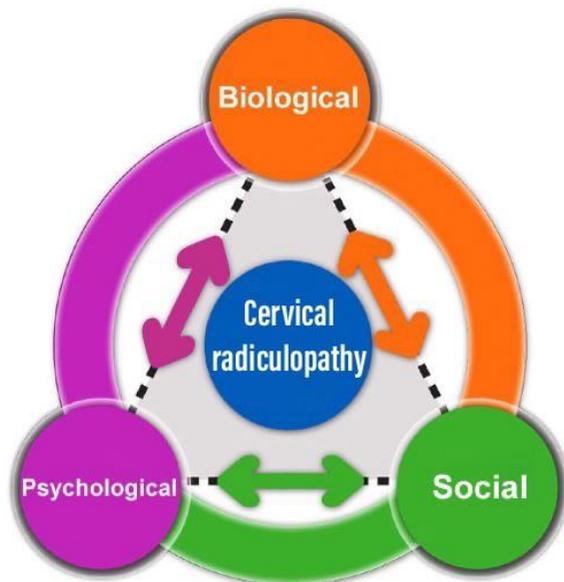
It is often caused by physical compression (squeezing) and/or inflammation of one of the nerve roots in the neck. These nerves are responsible for feeling and strength in the arm, and this is why symptoms are felt in the arm. However, nerve pain associated with cervical radiculopathy can be influenced by other possible contributory factors.

## **Contributory factors**

There might be many different factors that can influence how much pain you feel, the effect pain has on your wellbeing and how you deal with it. These factors include the biological (physical), psychological (how you think and feel), and social (your lifestyle and environment). These factors will be unique to you and your situation. Below are a few examples.

## Relationship between biological, psychological and social factors

Each of these factors can have an effect on how the pain feels for you, and on the other two factors.



### Structural

A disc bulge or age-related changes of the joints in the neck can lead to a narrowed space where the nerve leaves the spine. This can cause physical compression and/or inflammation of the nerve root. It is also common to see disc bulges and age-related changes of joints in MRI scans of people who do not have any neck pain. Disc bulges and aging of joints are considered a normal part of aging and not always associated with pain.



## **Physical activity**

Being less active and having increased muscle tension have been associated with cervical radiculopathy. Poor sitting postures do not cause cervical radiculopathy, but staying in one position for too long can make the pain worse. We suggest that you make an effort to regularly move around, change posture when sitting, and avoid staying in the same position for long periods of time.



Poor fitness and low levels of physical activity can affect your body's ability to cope with pain or carry out daily physical tasks. There is no one form of exercise that is proven to be better than another for reducing pain, so do what you enjoy and try to do it regularly.

## **Emotional wellbeing (mood, anxiety, stress)**

It is normal when living with pain to notice changes in your mood. Your pain is a physical experience that can be affected by how you are feeling. Low mood, anxiety, stress and pain can often happen together. This often makes it more difficult to manage your pain on a day-to-day basis.



If you are feeling low, anxious or stressed, it is important to mention it to your GP or physiotherapist so that you can get help and take steps to deal with it as soon as possible.

### **Attitude and beliefs**

Your attitudes and beliefs about your pain play a very important role in helping you manage it successfully. For instance, many people feel that it is unsafe to move and do normal activities when they have pain. Trying to protect your body by not moving often slows your recovery and may make your pain worse.



### **Sleep quality**

Sleep is an essential part of feeling well and happy. Not getting enough sleep, having less good-quality sleep, and feeling tired can contribute to neck pain. It is important to relax before bedtime, and have a good night's sleep.



### **Comorbidities (other health problems)**

There appears to be a relationship between other medical conditions (such as diabetes, hypertension, respiratory (breathing) and cardiovascular (heart) disease) and an increase the severity of neck pain. Improving your overall health can help reduce your neck pain as well.



## **How long will it take to get better?**

Most people with cervical radiculopathy will feel significantly better from 6-12 weeks after the start of their symptoms and will make a full recovery in 4-6 months without needing any active treatment.

For some people, cervical radiculopathy can also be a longer-lasting condition. Trying to maintain mental wellbeing, a healthy, physical lifestyle and a positive outlook can improve your ability to cope during a flare up and improve your chance of a successful recovery.

## **How is cervical radiculopathy managed?**

Keeping as active as possible can help you recover and get back to the things that are important to you. Resting and avoiding any painful activities in the long-term may actually prolong pain.

Pain killers and anti-inflammatory medication can assist you in getting back to your usual activities. Your GP can guide you on the best pain medication to take, which may be ones specifically for nerve pain.

If pain continues for more than six weeks, it can help to discuss your pain with someone who specialises in managing cervical radiculopathy (such as a physiotherapist).

## How will physiotherapy help?

Physiotherapy has an important role in managing your cervical radiculopathy. Your physiotherapist will talk to you to understand your history. A detailed physical examination can then be helpful to guide treatment towards your needs and goals. Your physiotherapist will discuss with you any particular concerns that you may have.

Your physiotherapist will discuss the different options with you. There is no one treatment that works for everyone, exercise may form an important part of your recovery. Exercise can improve fitness, confidence in movement, mobility and strength. Exercise can also reduce stress and tension, improve mood and quality of sleep, and help support you getting back to normal activity.

## Are other options available to manage cervical radiculopathy?

Yes, other options are available. Please speak to your physiotherapist if you want to discuss these more.

## Pacing your exercise and activity

It is common for patients to experience an increase in pain when they start to exercise or return to their normal daily activities. If this happens, do not worry, and think about how you could make tasks more manageable. Make sure you allow enough rest between each task and gradually increase your activity over time.

If you would like a copy of our leaflet, **Pacing your physical activity**, please ask for one.

## Work

Staying at work and/or returning to work quickly has been shown to help people recover more quickly.

If your work involves activities that make your pain worse, it is important that you let your work manager (or your occupational health department if you have one) know that you may need some help to continue with your normal duties. It may be possible to modify your work activities in the short term to get you back to your normal work sooner.

## Relaxation

Many people find that simple relaxation techniques are a helpful tool in managing pain and stress that is related to cervical radiculopathy.

You might find it helpful to put aside some time each day to practice relaxation techniques. If you would like some help in choosing or being taught relaxation techniques, please speak to your physiotherapist. If you find something else works better for you, such as singing or lying in a hot bath, do that instead!

## Do you need an X-ray or MRI scan?

X-rays are not needed to assess neck pain and/or radiculopathy (unless a fracture is suspected).

MRI scans give a very detailed picture of the spine and may form part of the assessment process, but they are not as important as a detailed discussion and a physical examination.

MRI scans do not reflect the degree of pain that people experience. It is common to see age-related changes (to discs and joints) and disc bulges in people with cervical radiculopathy, as well as people without it. There is a weak link between what is seen on an MRI scan and the pain people feel. MRI scans for cervical radiculopathy do not speed up recovery and are not needed to plan your physiotherapy treatment.

As most cases of cervical radiculopathy improve in the first 6-12 weeks, without treatment, MRI scans are not needed or recommended in the early stages. An MRI scan may be considered if the cervical radiculopathy is not improving on its own or with physiotherapy. This can help us to decide on other, more invasive options, such as injection or surgery.

## Exercise examples in pictures

Below are a few examples of exercises that can be used early on to help you get moving. If you need any more information about these exercises, please speak to your physiotherapist.

### Neural offloading position (right sided symptoms)



### Neck flexion and extension



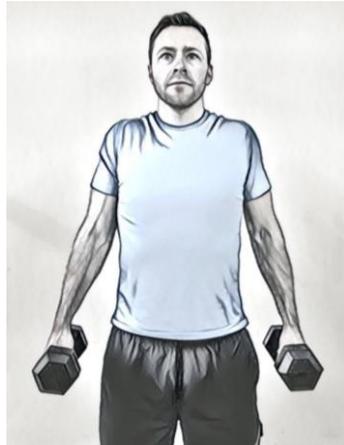
## Neck rotation



## Neck side flexion



## Shrugs



## Wall press



## Information on free or reduced cost local facilities

There are local initiatives and schemes to help you get active in your local area.

### Southwark

Free Gym and Swim for Southwark residents at Southwark leisure centres, [w: www.southwark.gov.uk/leisure-and-sport/free-swim-and-gym](http://www.southwark.gov.uk/leisure-and-sport/free-swim-and-gym)

Older adults free sport and physical activity, [w: www.southwark.gov.uk/leisure-and-sport/local-sport-and-physical-activities?chapter=3](http://www.southwark.gov.uk/leisure-and-sport/local-sport-and-physical-activities?chapter=3)

Southwark Exercise referral scheme (via GP referral), [w: www.southwark.gov.uk/health-and-wellbeing/public-health/for-the-public/being-active?chapter=3](http://www.southwark.gov.uk/health-and-wellbeing/public-health/for-the-public/being-active?chapter=3)

## Lambeth

LEIPS (Lambeth Early Intervention and Prevention Services) information – including the Lambeth Exercise referral scheme (via GP referral),

**w:** [www.guysandstthomas.nhs.uk/our-services/leips/patients.aspx#na](http://www.guysandstthomas.nhs.uk/our-services/leips/patients.aspx#na)

Reduced Better Gym membership in Lambeth,

**w:** [www.lambeth.gov.uk/leisure-parks-and-libraries/sports-and-leisure/apply-for-a-real-plus-leisure-card](http://www.lambeth.gov.uk/leisure-parks-and-libraries/sports-and-leisure/apply-for-a-real-plus-leisure-card)

Find your local Lambeth Leisure centre,

**w:** [www.lambeth.gov.uk/leisure-parks-and-libraries/map-of-leisure-centres](http://www.lambeth.gov.uk/leisure-parks-and-libraries/map-of-leisure-centres)

## Further sources of information?

**Versus Arthritis** (previously Arthritis Research UK) – neck pain information booklet,

**w:** [www.versusarthritis.org/media/1257/neck-pain-information-booklet.pdf](http://www.versusarthritis.org/media/1257/neck-pain-information-booklet.pdf)

**Chartered society of physiotherapy (CSP)** – for exercises,

**w:** [www.csp.org.uk/system/files/4\\_neck\\_pain.pdf](http://www.csp.org.uk/system/files/4_neck_pain.pdf)

**National Institute for Health and Care Excellence:** clinical knowledge summaries – cervical radiculopathy,

**w:** [cks.nice.org.uk/neck-pain-cervical-radiculopathy#!scenario](http://cks.nice.org.uk/neck-pain-cervical-radiculopathy#!scenario)

## Contact us

If you have any questions, please contact your physiotherapist .....

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For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit **w:** [www.guysandstthomas.nhs.uk/leaflets](http://www.guysandstthomas.nhs.uk/leaflets)

## Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748, Monday to Friday, 9am-5pm

## Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

**t:** 020 7188 8801 (PALS)      **e:** [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk)

**t:** 020 7188 3514 (complaints)

**e:** [complaints2@gstt.nhs.uk](mailto:complaints2@gstt.nhs.uk)



Patient Information Forum

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