Some patients are more likely to suffer long-term whiplash pain and complications than others.

Whiplash is one of the most common injuries incurred in traffic accidents in Norway. Most of the victims who suffer acute pain and stiffness in the neck recover after a short convalescence. But others develop chronic neck pains and additional problems. Their quality of life can plunge to the point where they lose their ability to hold down jobs.

What factors cause the difference? Physician and researcher Solbjørg Makalani Myrtveit decided to look into the matter.

“It’s important to identify the persons who risk chronic symptoms early, so that those who need it can get help,” says Myrtveit.

Extent of car damage gives no indication

To date, researchers have not been able to predict which patients will be more severely plagued by whiplash problems on the basis of vehicle damage or neck injuries.

But other studies have shown that there can be a certain link between social background and chronic pain.

Myrtveit looked for differences among the patients prior to and right after their accidents.

Many feared prolonged difficulties

Myrtveit’s point of departure was data on 1,570 whiplash patients from Denmark and Norway’s Nord-Trøndelag County. She analysed their pre-injury and post-injury health. She found some prognostic factors linked to the two categories - characteristics of those who get better quickly and those who develop chronic ailments.

“Persons who expected to require medications and sick leaves for the neck injury had more pain one year later than those who reported that they didn’t need such measures,” says Myrtveit.

Many in the first category were still not working full-time a year later.

These connections were seen even after Myrtveit took into account how much pain the victims had in the first days and how serious the road accident was.

The persons who wanted to go on living as normally as possible had better chances of getting well.

Some might be more vulnerable
Could this be a self-fulfilled prophecy? are the most pessimistic patients nearly giving up on the chances of regaining their health?

“We have no grounds to believe that some are just thinking themselves into being sick,” says Myrtveit.

The researcher explains that apparently some people are more susceptible to chronic pains than others. So they run a higher risk of developing long-term symptoms, including after car accidents.

Poorer health before the accident

Myrtveit also searched for differences in risk based on age, gender and health status prior to the accident. Nothing turned up for age or gender.

But persons who reported poor health and muscular and skeletal problems prior to the whiplash incident were more at risk of chronic symptoms afterwards.

So too were the whiplash victims who had previously used medications more heavily and often visited doctors and other health services.

“We don’t completely understand why factors such as having poor health before the accident and the victim’s anticipated need of a sick leave and medications is associated with the chances of getting well after a whiplash.”

But these persons might expect to need medications and medical attention more often than others on the basis of their history of poor health,” she says.

Must take pains seriously

Myrtveit hopes that her findings can be used by health personnel so that measures can be taken early when patients are more at risk of chronic symptoms.

“We hope that more people can avoid chronic pains and diminished quality of life,” she says.

People with chronic whiplash pains can feel stigmatized. The diagnosis is controversial and some claim the problems are psychological.

“Many people are sceptical regarding how real the pains really are. It’s essential for health personnel and others to take the pains the patients report seriously,” stresses the medical researcher.

Query the patient

Myrtveit says that the symptoms the patient experiences are real even though doctors do not fully understand why the pains can linger after a whiplash.

She thinks the new findings are useful.

Health personnel who know of these connections can identify persons who run a higher risk of chronic symptoms by asking whiplash patients a few simple questions.

“Thus, we hope that patients who need it can get help more quickly,” she says.
Pain thresholds

Previous studies of pain have shown that the experience of pain varies, depending on the mental state of the patient. If he or she is worried, the pain is experienced more intensely and is more debilitating. Some studies indicate that the fear of pain can be worse than the pain itself.

“Many suffer chronic pains whether or not they are moving about or not, but this pain is usually not dangerous,” Meltveit.

Researchers hope that health personnel can divert the patient’s focus away from fear and pain and over to functionality. Does the patient want to work? To shop on his or her own? Maybe manage better being together with friends or grandchildren?

“We hope the patients can lose some of their fear and improve their life quality despite perhaps never fully overcoming their pain,” says the researcher.

Another new study shows that “mindfulness” can help patients with chronic pains. The pain is still there, but they can learn to improve their quality of life.

Treatment can do harm

Good documentation is lacking when it comes to determining what treatment is the most effective for whiplash injuries.

“Unfortunately, we see that various types of treatment often don’t work and can even lower the risk of getting well,” says Myrtveit.

She emphasises the need for more research on treatment of whiplash injuries.

“In particular, we should initiate research to see whether more patients can get well if we focus treatment on the most vulnerable groups,” says Myrtveit. She is now in the process of preparing new whiplash studies.

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