Nerve related neck and arm pain

**What is nerve related neck and arm pain?**

Neck pain that radiates down your arm may be nerve-related. This pain is the upper body version of ‘sciatica’. Nerve-related neck pain may also be called referred pain, radicular pain or radiculopathy. The arm pain is usually worse than the neck pain. You might have tingling, numbness and weakness in the arm.

**How is it caused?**

Pain and symptoms are usually caused by compression of the nerve or inflammation of the nerve roots. It’s very hard to trap or pinch a nerve as there is plenty of space and they are quite slippery structures. Nerves carry messages about movement and sensation to and from your arms to your brain via the spinal cord in your neck.

The nerve may be compressed by a disc herniation – which is a hernia-type bulge in the wall of the disc. Discs don’t slip – they are very securely held in place. Be reassured, nothing is out of place, though it might feel like it. Disc bulges are common, part of aging and not always associated with pain. They can shrink and resolve over time, usually 3-6 months.

More often the pain is linked to nerve inflammation. In these cases there is pain but no loss of power or sensation. Inflamed nerves are sensitive to touch, stretch, loading and movement. Most painful nerves are sore and safe. If the nerve isn’t doing its job as well as it usually does then just like muscles and ligaments it can repair and recover.

**What are the symptoms?**

Neck and arm pain, usually the pain is worse in the arm and it may be quite intense. You may also have numbness, tingling, altered sensations or weakness in your arm or hand. Zings and zaps do not mean a nerve is injured – more likely it is sensitive. Sensitive nerves report all that they possibly can to the brain – sometimes weird and wonderful things. There is usually nothing wrong with the area of your arm where you feel the pain.

Pain is often worse at night, this may be due to lower blood pressure and sleep positions causing temporary reduction in blood flow to your nerve.

**Should I be worried?**

It is rare that neck pain has a serious cause. If you have any of these symptoms with your neck pain you must seek medical advice:

* Weak grip and dropping items
* Difficulty with small movements like fastening buttons or writing
* Pins and needles and numbness in both arms
* Unexplained falls or poor balance
* Inability to pass urine
* Swellings in the neck
* New or severe headache or visual changes
* Unexplained weight loss
* A fever or feeling unwell

You should also inform your healthcare practitioner if you have a history of cancer or have had a fall, injury or accident.

**Why has it happened?**

Sometimes neck pain can be a result of a strain or specific injury. You may also recognise some of these other factors that relate to neck pain:

* Being in one position for long periods of time
* Repetitive movements of the neck and shoulders
* Chronic stress
* Poor sleep
* Anxiety
* Depressed mood
* Deconditioning and inactivity

Sedentary occupations are more at risk than those involving activity.

**How is it diagnosed?**

Diagnosis is usually made from your symptoms.

Most cases of nerve related neck pain improve in the first 6-12 weeks, without treatment.

MRI scans are not needed or recommended in the early stages. Many scans will show normal age-related changes which do not predict neck pain but can cause people to avoid activities they should be doing to get better such as exercise and movement. An MRI scan may be considered if the cervical radiculopathy is not improving on its own or with treatment. This can help us to decide on other, more invasive options, such as injection or surgery.

Scans are rarely needed for neck pain and can lead to poorer outcomes. Scans do not show the exact reason for neck pain in 95% of cases.

**What can I do?**

The impact that the pain will have on you is very individual depending on who you are and what you do in life. There are many strategies you can use for managing your pain. Don’t panic if you have an increase in your pain - ups and downs during the recovery period are normal.

Move

It’s important to keep moving and continue with your normal activities as soon as possible.

Trying to protect your body by not moving often slows recovery and may make your pain worse. It is safe to move. Learning to relax the neck and move freely in all directions can help to reduce pain. If you find your pain is flaring up try to break down activities into manageable chunks with a rest period between being active. Build up your activity over time.

Poor fitness and lack of regular activity can reduce your body’s ability to cope with pain. Exercise and activity reduces and prevents neck pain. Even if exercise is sore it is safe to move. Build up your exercises gradually. There is no one exercise that is best for reducing pain – the best one is what you enjoy and will do regularly. There are some suggestions of simple exercises to start at home below.

Exercises



Neural off loading

You may be able to get comfortable for short periods by resting with your head slightly bent towards the painful side. Hold arm bent across your chest and gently support the weight of the arm with the other hand under the elbow.

Work

You may be worried about continuing with work, or other responsibilities. It is important to discuss these fears with your practitioner. Remaining at work usually leads to a quicker recovery even if you have to work with modified activities.

Poor posture does not cause nerve related neck pain - there isn’t an ideal posture. Staying in one posture for long periods can make the pain worse and lead to stiffness and discomfort. It is important to keep changing position regularly. If you work at a computer or in one position for long periods take regular breaks and move your neck.

Medication

Taking painkillers for a short period may be necessary to relieve pain. Pain killers do not speed up your recovery and they should always be used with other options such as exercise or other improvements to your well-being.

Look after yourself

Pain is not usually simply a physical problem. Your general well-being can make you vulnerable to pain and your wellbeing can also be made worse by pain. Looking after your general health and well-being will help recovery. There is a lot of helpful advice on this website: <https://www.nhs.uk/oneyou/>

Reduce stress and anxiety

It is normal for people with pain to have stress, anxiety and change in mood. This may affect your ability to cope with the pain and may influence your pain levels. Help is available if you are being affected by stress, anxiety or low mood – see the links below or discuss with your practitioner.

It is important that your whole nervous system is in a healthy state to aid recovery. If your brain is stressed or overworked this may slow recovery. Relaxation and good sleep are important in your recovery.

Relaxation is an important part of your recovery. Simple relaxation techniques may help manage pain and stress. Try to set aside some time each day to relax – you can use relaxation techniques as linked below, or simply an activity you enjoy – reading, deep breathing, sitting in the garden, singing – whatever relaxes you.

Find help and support here: <https://www.nhs.uk/oneyou/every-mind-matters/>

<https://www.northessexiapt.nhs.uk/west-essex>

Physical Activity

Exercise improves fitness, confidence with movement and strength. It can also help reduce your stress and tension and improve your mood and quality of sleep, helping support you to return to normal activities. Perhaps you could simply start by trying to walk for 10 minutes per day.

Alcohol – avoid alcohol in the early stages of healing (first three days). Evidence has shown this can slow down recovery and increase the chances of re-injury. <https://www.drinkaware.co.uk/>

Sleep

Sleep is very important for your wellbeing. Poor sleep quality, and lack of sleep can make managing pain more difficult. Consistently getting 6-9 hours is recommended. Get help and tips here:

<https://www.nhs.uk/live-well/sleep-and-tiredness/>

Nutrition and weight

Being overweight can increase the physical strain on the body and also contribute to inflammation in your body. Make sure you eat a balanced diet. Vitamin D has been correlated with reduction in joint pain. Adult weight management services are available free to Essex residents here: <https://acelifestyle.org/weight-management>

Smoking

Smoking is also linked with an increased susceptibility to pain and slower healing. For help with stopping smoking <https://www.essexlifestyleservice.org.uk/stop-smoking/> <https://www.nhs.uk/better-health/quit-smoking/>

**How long will it last?**

Around 88% of people with nerve related neck and arm pain improve within 4 weeks of the pain starting. If the pain moves more into your neck that is usually a good sign of recovery. Numbness and weakness can take longer than pain to improve. Returning to work and progressing your fitness levels will help you led a normal life whilst the pain resolves over time.

Ongoing pain can occur if you become frightened and protective of neck movement and avoid activities, or if you have ongoing stress, worry or a negative mindset towards the pain. There is a good chance that your pain will resolve but there is also a chance it may not. There are no guarantees that your nerve pain will get better. Many people do improve within a few weeks but for some the pain can become persistent.

If after 6-12 weeks of exercise, lifestyle improvements and non-surgical management your symptoms are still persisting see your practitioner for further assessment.

**Is there anything I should avoid?**

In the first few days of a new episode of neck pain you may wish to avoid activities which aggravate the pain. Gradually returning to normal activities as soon as possible is important.

**What other options are there?**

Collars should not be worn as they can reduce the movement in your neck and symptoms may last longer.

Surgery is rare and usually only considered when there are worsening symptoms in the arms. In a very small number of cases spine injections may help if pain does not improve with usual care.