

## **Syllabus: Whiplash (Soft Tissue Injuries) Prognostic Indicators and the Development of Chronic Pain**

### **OR – The Dark Side Of Soft Tissue Injury**

#### **Description**

Many who experience a soft tissue whiplash injuries do not fully recover and progressively develop chronic pain. This course presents the documented prevalence of chronic pain, and the evidenced based prognostic indicators of potentially developing chronic pain. Additionally, it presents potential mechanism that can result in the development of chronic pain.

#### **Objectives**

To gain an appreciation for the prevalence of chronic pain development from whiplash (soft tissue injuries).

Recognize the most common, evidenced based, indicators for potential chronicity.

To gain a basic understanding of the common mechanisms involved in the development of chronic pain.

#### **HOOR 1**

1. Introduction
  - a. Outline
  - b. Biography & Qualifications
2. Prevalence of Chronicity
3. Defining Soft Tissue Injuries
  - a. Various injuries and that all in soft tissue repair and scarring
4. Commonly Injured Structures
  - a. Facet capsules
  - b. Disc
  - c. Nerves
  - d. Muscle/Tendon
5. Soft tissue repair process
  - a. Acute Inflammatory Phase
    - i. 0-72 hours
  - b. Repair or Matrix Deposition Phase
    - i. 48 hours to 6 weeks
  - c. Remodeling Phase
    - i. Up to 12 months

6. Factors affecting the repair process.
  - a. Age
  - b. Sex
  - c. Tissue History
    - i. Mechanical and Biological
7. Management Issues
  - a. Nonsteroidal Anti-inflammatory Drugs (NSAIDS)
  - b. Inhibit soft tissue repair
  - c. Result in muscle weakness
8. Prognostic Factors
  - a. High initial pain rating
  - b. High Neck Disability Index
9. Physical Findings
  - a. Cervical Facet Degeneration
  - b. Fatty Infiltration

## **HOURL 2**

10. Physical Findings
  - a. Fatty Infiltration Continued
  - b. Sensorimotor Control Deficits
    - i. Definition
    - ii. Testing
    - iii. Basic Rehab
  - c. Central Sensitization
11. Summary
12. Conclusion

## **DARK SIDE order of references**

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