**ABSTRACT** 

**TITLE:** Post-Traumatic Neck Pain and Cervicogenic Headache in a Client with a Congenitally

Anomalous Atlas and Diffuse Idiopathic Skeletal Hyperostosis

BACKGROUND AND PURPOSE: Post traumatic neck pain and cervicogenic headache are

common reasons for referral to physical therapy. These symptoms may develop into more chronic

conditions in some individuals and contribute to long term disability. Clients presenting for

physical therapy may have incidental musculoskeletal anomalies which should be considered when

selecting interventions. This case study describes the clinical reasoning and treatment selection

for a client presenting with post traumatic neck pain, cervicogenic headache and incidental skeletal

anomalies

**CASE DESCRIPTION:** The client was a 39-year-old male presenting two months post motor

vehicle accident with left sided occipital-temporal headaches, loss of cervical motion and neck

pain. The patient was treated primarily with Medical Exercise Therapy and selected manual

therapy techniques.

**OUTCOMES:** The client regained full cervical motion, had a 42% reduction in Neck Disability

Index score and reduced his headache frequency and intensity.

**DISCUSSION:** Selection of appropriate physical therapy interventions can be accomplished by

clinical reasoning and considering all factors which may influence planned treatment. Many

clients may present to the clinic with undiagnosed skeletal anomalies and the physical examination

should help therapists determine appropriate interventions. Muscular changes have been shown

in clients with chronic neck pain and headaches. Manual therapy and therapeutic exercise have

demonstrated effectiveness in reducing neck pain and cervicogenic headache. Medical Exercise

Therapy in particular is safe and beneficial for clients with traumatic neck pain and cervicogenic

headaches.

Manuscript word count: 2523