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CHRONIC NECK PAIN AMONG COLLEGE STUDENTS A CROSS-SECTIONAL STUDY

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ABSTRACT:

Chronic neck pain is most common problem in people nowadays. Chronic neck pain can have causes such as working for hours over computer and mobile phones which eventually causes muscle strains.

BACKGROUND:

To find prevelance, determinants and consequences of chronic neck pain among college going students.

METHODOLOGY:

STEP 1: Selection of suitable participants.

STEP 2: Sending the consent form through e-mail.

STEP 3: Sending the link of questionnaire through e-mail.

STEP 4: Collection of data.

STEP 5: Analysis of the survey.

STEP 6: Statistical Analysis

STEP 7: Result

RESULT: Most of the patient did not had any pain or had miled pain during personel care, lifting heavy weights, reading, headaches, Concentration inactivities, work, driving, Sleeping and Recreational activities.

CONCLUSIONS: From the results it can be concluded that more than half of the population had no pain or mild pain and they didn't feel any issues in dealing with personal care lifting heavy weights reading headaches concentration work driving sleeping and Recreation

KEYWORDS: Chronic neck pain, VAS scale, NDI scale, college students

I. INTRODUCTION

Chronic neck pain is most common problem in people nowadays.1,2The chronic neck pain seems to a have large impact on people's health and hinders with an Individual's day to day activity and work.2

Symptoms

- Pain that's often worsened by holding your head in one place for long periods, such as when driving or working at a computer.
- Muscle tightness and spasms.
- Decreased ability to move your head.
- Headache.
- Neck pain is typically classified as chronic when it persists or regularly recurs for at least 3 months.

Causes of neck pain and problems may include:

- Injury (damage to the muscles, tendons, or ligaments) ☐ Herniated disk in the neck.
- Arthritis (such as osteoarthritis, rheumatoid arthritis) \square Cervical (neck) disk degeneration.
- Congenital (present at birth) abnormalities of the vertebrae and bones.
- Tumors.

Your neck is flexible and supports the weight of your head, so it can be vulnerable to injuries and conditions that cause pain and restrict motion. Neck pain causes include:

- Muscle strain: Overuse, such as too many hours hunched over your computer or smartphone, often triggers
 muscle strains. Even minor things, such as reading in bed or gritting your teeth, can strain neck muscles.
- Worn joints: Just like the other joints in your body, your neck joints tend to wear down with age. Osteoarthritis causes the cushions (cartilage) between your bones (vertebrae) to deteriorate. Your body then forms bone spurs that affect joint motion and cause pain.

- Nerve compression: Herniated disks or bone spurs in the vertebrae of your neck can press on the nerves branching out from the spinal cord.
- Injuries: Rear-end auto collisions often result in whiplash injury, which occurs when the head is jerked backward and then forward, straining the soft tissues of the neck.
- Diseases: Certain diseases, such as rheumatoid arthritis, meningitis or cancer, can cause neck pain.

Neck pain can cause reduced range of motion due to movement restriction muscles of the neck can become strained due to bad posture habits such as spending excessive time on computer and mobile phones where the neck remains continuously in the same position for a prolonged period of time. Pain in the neck most of the time goes away within a few weeks that being said pain that persist for months could be a sign of underlying problem that needs Observation.4 Chronic Neck pain can have causes such as working for hours over computer and mobile phones which eventually causes muscle strains. Whiplash injuries where the head is forced backward and forward and diseases like cancer.4

REVIEW OF LITERATURE

1. Prevalence, determinants and consequences of chronic neck pain in Finland, By Matti Makela, Markku Heliovaara, Kai Sievers, Olli Impivaara, Paul Knekt, Arpo Aromaa, in 1991.

The distribution, determinants, and consequences of chronic neck pain have hitherto been described inadequately. In the Mini-Finland Health Survey, a representative population sample of 8,000 Finns aged ≥30 years was invited to participate in a comprehensive health examination comprising an interview and a clinical examination; 90.2% complied. Predetermined criteria were used to diagnose major cardiovascular, musculoskeletal, respiratory, mental, and other disorders, regardless of other simultaneous disorders. Chronic neck syndrome was diagnosed in 9.5% of the men and 13.5% of the women. When adjusted for age and sex, the prevalence of the neck syndrome was associated with a history of injury to the back, neck, or shoulder and with mental and physical stress at work. Among those aged 30 to 64 years, overweight and parity were also significant determinants. Other musculoskeletal and mental disorders were associated with neck syndrome, and the association persisted after working conditions, injuries, overweight, and parity were adjusted for. There was some independent association between neck syndrome and disabilities, use of physician services, and use of pain killers.

2. Neck pain among undergraduate medical students in a premier institute of central India: A cross-sectional study of prevalence and associated factors,By Prateek Behera, Anindo Majumdar, G Revadi, John Ashutosh Santoshi, Vivek Nagar, Nitu Mishra in 2020.

This study aimed to evaluate the prevalence of neck pain and the associated factors including gadget use among undergraduate medical students of a premier medical college in central India.

3. Prevalence of neck pain among under graduate student of Lahore, By Ayesha Malik , M.Umer Pasha , Sadia khalid , Ashfaq ahmad , Syed Amir Gilani , 2017 .

The main intent of this study was to find out the prevalence of neck pain in undergraduates Students. A cross sectional study was conducted which was not derived from experiments. A survey was conducted from the undergraduate students of main universities in lahore city named as Punjab university of Lahore and University of Lahore descriptive statistics focused on bar charts histograms and pie charts were Used. Results concluded that out of 402 respondents (56.7%) were suffering with neck pain while (43.3%) respondents were not having neck pain. No association was found between gender and neck pain (p-value 0.351) additionally, there was weaker relation between age and neck pain (p-value 0.785). Neck pain occurring. In students was mainly sudden in onset & intensity was mild to moderate of the neck pain. Mostly students were taking medications & physiotherapy treatment for reducing the neck pain.

4. Improving knowledge of Text Neck and Neck Pain Using Interactive Smartphone Application for Undergraduate Students in Universiti Sains Malaysia, By Jasni Dolah, Joey Loh Jo Yie, Lilian Lee Shiau Gee, In 2020.

The objective of this study is to determine the level of knowledge and awareness of the text neck among undergraduate students of University Sains Malaysia (USM) and to create an interactive mobile application to reduce the prevalence. The app is ARbased neck exercise gamification that alerts incorrect posture using a smartphone front camera and a built-in sensor. The proposed study will enable people who are suffering from, or at risk of, text neck to have more pleasant and engaging neck exercise experience with a better exercise impact, and may promote regular breakaway from the wrong posture.

5. Effects of neck exercise on sitting posture in patients with chronic neck pain, By Deborah Falla, Gwendolen Jull, Trevor Russell, Bill Vicenzino, Paul Hodges, 2007

This study had 2 purposes: (1) to compare change in cervical and thoracic posture during a distracting task between subjects with chronic neck pain and control subjects and (2) to compare the effects of 2 different neck exercise regimens on the ability of people with neck pain to maintain an upright cervical and thoracic posture during this task. Fifty-eight subjects with chronic, nonsevere neck pain and 10 control subjects participated in the study.

6. Responses to Vignettes about Students with Chronic Pain in K-12 Public Schools Provide by Current Principals and Assistant Principal BY Kimberly S Payne, In 2020.

This dissertation study addresses a gap in the literature in K-12 public education regarding students who experience chronic pain (CP). While awareness and understanding about the plight of children and adolescents with CP are prevalent in the healthcare and medical realms, evidence of how public schools respond to students' pain

complications as they apply to their education, both in the K-12 setting andbeyond, is scant. Despite this, consequences of ignoring or misunderstanding CP instudents by K-12 schools could be significant: Studies from the healthcare realm indicate that students with CP often become caught in a "downward spiral" of chronic pain-invoked absenteeism resulting in falling behind in academics and low school functioning, thus placing them at risk of poorer eventual outcomes in life. Likewise, family members and school personnel become frustrated by lack of information, communication problems, and the inability to attend to students' needs. Additionally, matters are complicated when K-12 school administrators are required to work within fixed legal frameworks that are not necessarily sensitive to CP issues.

7. Active neck muscle training in the treatment of chronic neck pain in women a Randomized Controlled trial, by Jari Ylinen, Esa-Pekka Takala, Matti Nykänen, in 2003

Patients were randomly assigned to either 2 training groups or to a control group, with 60 patients in each group. The endurance training group performed dynamic neck exercises, which included lifting the head up from the supine and prone positions. The strength training group performed high-intensity isometric neck strengthening and stabilization exercises with an elastic band. Both training groups performed dynamic exercises for the shoulders and upper extremities with dumbbells. All groups were advised to do aerobic and stretching exercises regularly 3 times a week 8. A systematic review of the impact of chronic pain on adolescents' school functioning School personnel responses to managing pain in the schools By Fatimah Alsaggaf, Imelda Coyne, In 2020.

To critically synthesize empirical studies on the impact of chronic pain on adolescents' school functioning and school personnel responses to managing pain in schools.

9. Physical exercises and functional rehabilitation for the management of chronic neck Pain , By Jari Ylinen , in 2007

The aim of this review was to reassess the effectiveness of different exercise methods in relieving pain and improving disability in patients with chronic nonspecific neck pain. Ten andomized controlled or comparative high-quality trials were included in a more detailed analysis using patient oriented primary outcome measures (e.g., patient's rated pain and Disability) as well as pressure pain threshold and functional outcomes (neck strength and range of motion). Findings revealed moderate evidence supporting the effectiveness of both long-term dynamic as well as isometric resistance exercises of the neck and shoulder musculature for chronic or frequent neck disorders. Findings revealed no evidence supporting the long-term effectiveness of postural and proprioceptive exercises or other very low intensity exercises. Clinicians are encouraged to consider these findings and incorporate them into their practice when planning the treatment of patients with chronic neck disorders.

NEED OF STUDY

Currently there are many studies done on chronic neck pain but there is limited research on prevalence, determinants and consequences of chronic neck pain among college going students. Need for study arises to understand the determinants and prevalence of chronic neck pain in college going students as their neck remains in the same position continuously for longer time while studying and using mobile phones as well as laptops.

OBJECTIVE OF THE STUDY

- To find out whether Myofacial Release (MFR) Technique or Active Release Technique is more effective in treating chronic low back pain.
- To find out whether Myofacial Release (MFR) Technique is superior for treating chronic low back pain.
- To find out whether Active Release Technique is superior for treating chronic low back pain.

HYPOTHESIS

H0: There is no association between pain and personal care, lifting heavy weights, reading, headaches, concentration in activities, work, driving, sleeping, recreational activities.

H1: There is association between pain and personal care, lifting heavy weights, reading, headaches, concentration in activities, work, driving, sleeping, recreational activities.

METHODOLOGY

STEP 1: Selection of suitable participants.

STEP 2: Sending the consent form through e-mail.

STEP 3: Sending the link of questionnaire through e-mail.

STEP 4: Collection of data.

STEP 5: Analysis of the survey.

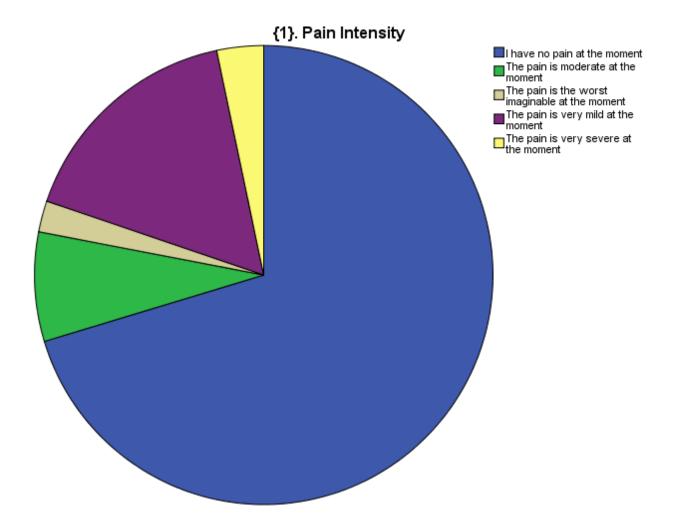
STEP 6: Statistical Analysis

STEP 7: Results

Result

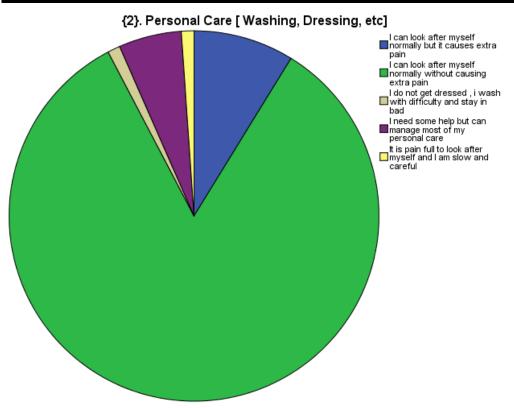
{1}. Pain Intensity

		Frequency	Percent	Valid Percent	Cumulative Percent
	I have no pain at the moment	64	70.3	70.3	70.3
	The pain is moderate at the moment	7	7.7	7.7	78.0
X 7 1' 1	The pain is the worst imaginable at the moment	2	2.2	2.2	80.2
Valid	The pain is very mild at the moment	15	16.5	16.5	96.7
	The pain is very severe at the moment	3	3.3	3.3	100.0
	Total	91	100.0	100.0	

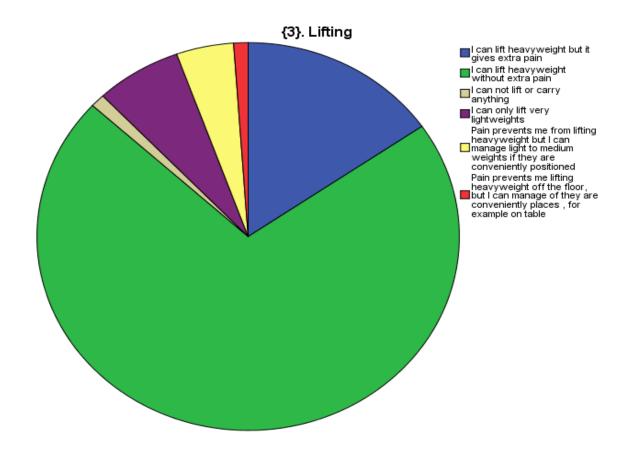


{2}. Personal Care [Washing, Dressing, etc]

	,	Frequency	Percent	Valid Percent	Cumulative Percent
	I can look after myself normally but it causes extra pain	8	8.8	8.8	8.8
	I can look after myself normally without causing extra pain	76	83.5	83.5	92.3
Valid	I do not get dressed, i wash with difficulty and stay in bad	1	1.1	1.1	93.4
	I need some help but can manage most of my personal care	5	5.5	5.5	98.9
	It is pain full to look after myself and I am slow and careful	1	1.1	1.1	100.0
	Total	91	100.0	100.0	

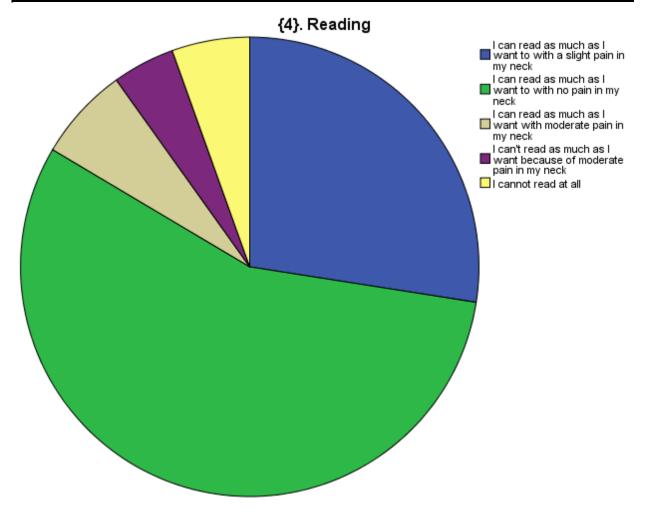


		Frequency	Percent	Valid Percent	Cumulative Percent
	I can lift heavyweight but it gives extra pain	14	15.4	15.4	15.4
	I can lift heavyweight without extra pain	65	71.4	71.4	86.8
	I can not lift or carry anything	1	1.1	1.1	87.9
	I can only lift very lightweights	6	6.6	6.6	94.5
Valid	Pain prevents me from lifting heavyweight but I can manage light to medium weights if they are conveniently positioned	4	4.4	4.4	98.9
	Pain prevents me lifting heavyweight off the floor, but I can manage of they are conveniently places, for example on table	1	1.1	1.1	100.0
	Total	91	100.0	100.0	



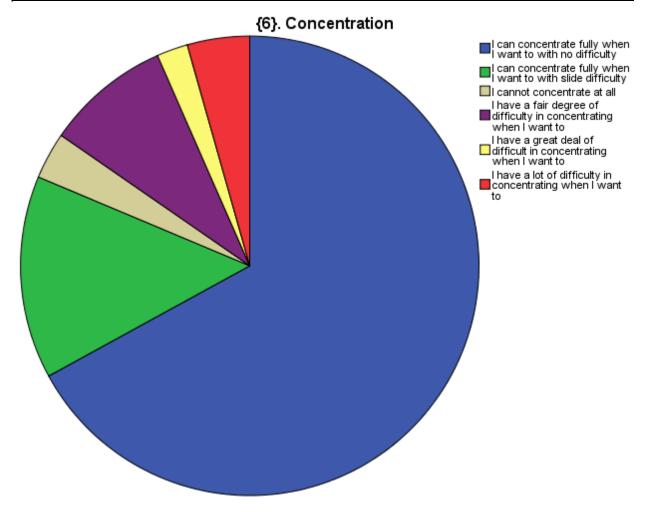
{4}. Reading

		Frequency	Percent	Valid Percent	Cumulative Percent
	I can read as much as I want to with a slight pain in my neck	25	27.5	27.5	27.5
	I can read as much as I want to with no pain in my neck	51	56.0	56.0	83.5
Valid	I can read as much as I want with moderate pain in my neck	6	6.6	6.6	90.1
	I can't read as much as I want because of moderate pain in my neck	4	4.4	4.4	94.5
	I cannot read at all	5	5.5	5.5	100.0
	Total	91	100.0	100.0	



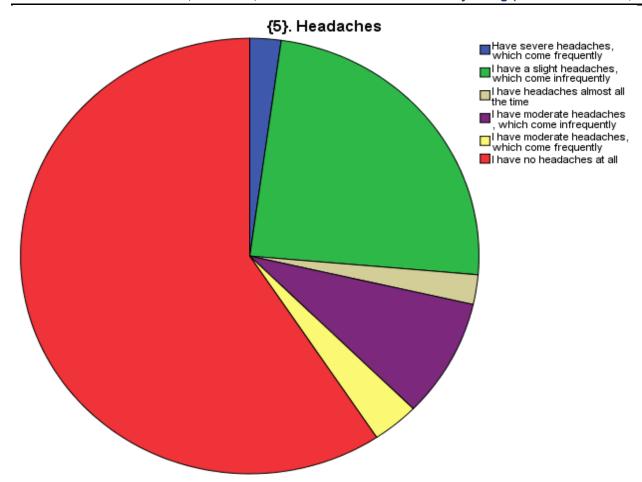
{5}. Headaches

	{5}. Headaches						
		Frequency	Percent	Valid Percent	Cumulative Percent		
	Have severe headaches, which come frequently	2	2.2	2.2	2.2		
	I have a slight headaches, which come infrequently	22	24.2	24.2	26.4		
X7 1' 1	I have headaches almost all the time	2	2.2	2.2	28.6		
Valid	I have moderate headaches, which come infrequently	8	8.8	8.8	37.4		
	I have moderate headaches, which come frequently	3	3.3	3.3	40.7		
	I have no headaches at all	54	59.3	59.3	100.0		
	Total	91	100.0	100.0			



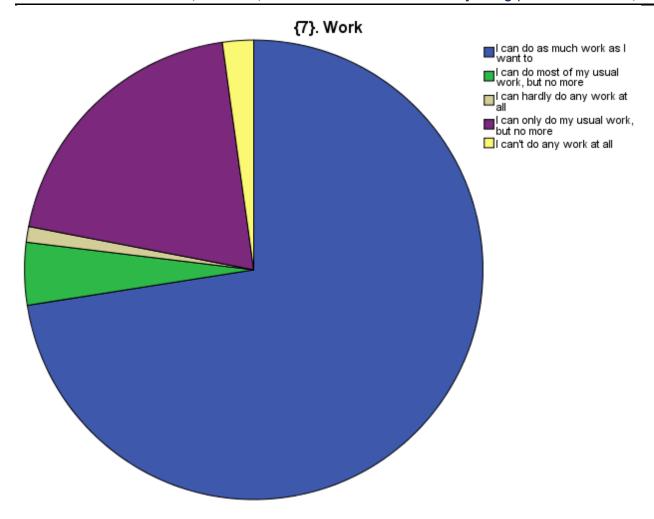
{6}. Concentration

		Frequency	Percent	Valid Percent	Cumulative Percent
	I can concentrate fully when I want to with no difficulty	61	67.0	67.0	67.0
	I can concentrate fully when I want to with slide difficulty	13	14.3	14.3	81.3
	I cannot concentrate at all	3	3.3	3.3	84.6
Valid	I have a fair degree of difficulty in concentrating when I want to	8	8.8	8.8	93.4
	I have a great deal of difficult in concentrating when I want to	2	2.2	2.2	95.6
	I have a lot of difficulty in concentrating when I want to	4	4.4	4.4	100.0
	Total	91	100.0	100.0	



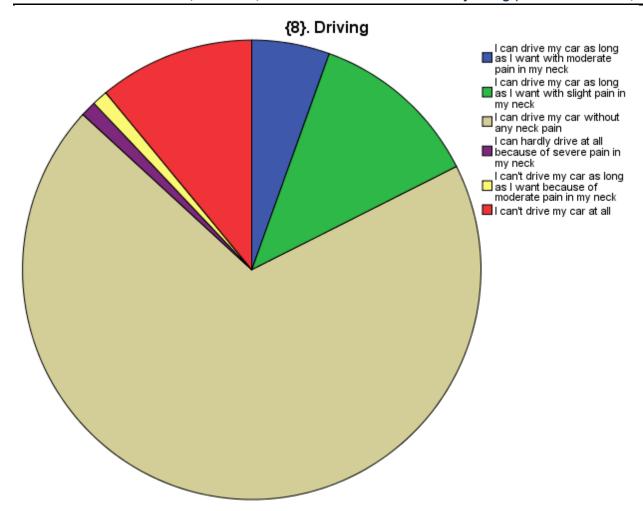
{7}. Work

		Frequency	Percent	Valid Percent	Cumulative Percent
	I can do as much work as I want to	66	72.5	72.5	72.5
	I can do most of my usual work, but no more	4	4.4	4.4	76.9
Valid	I can hardly do any work at all	1	1.1	1.1	78.0
	I can only do my usual work, but no more	18	19.8	19.8	97.8
	I can't do any work at all	2	2.2	2.2	100.0
	Total	91	100.0	100.0	



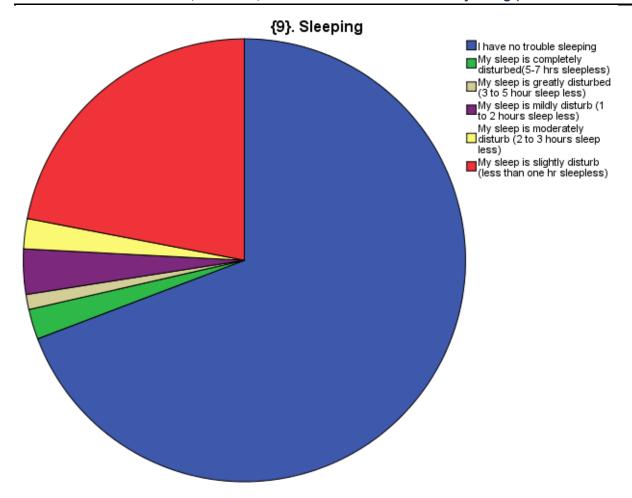
{8}. Driving

		Frequency	Percent	Valid Percent	Cumulative Percent
	I can drive my car as long as I want with moderate pain in my neck	5	5.5	5.5	5.5
	I can drive my car as long as I want with slight pain in my neck	11	12.1	12.1	17.6
	I can drive my car without any neck pain	63	69.2	69.2	86.8
Valid	I can hardly drive at all because of severe pain in my neck	1	1.1	1.1	87.9
	I can't drive my car as long as I want because of moderate pain in my neck	1	1.1	1.1	89.0
	I can't drive my car at all Total	10 91	11.0 100.0	11.0 100.0	100.0



{9}. Sleeping

		Frequency	Percent	Valid Percent	Cumulative Percent
	I have no trouble sleeping	63	69.2	69.2	69.2
	My sleep is completely disturbed(5-7 hrs sleepless)	2	2.2	2.2	71.4
	My sleep is greatly disturbed (3 to 5 hour sleep less)	1	1.1	1.1	72.5
Valid	My sleep is mildly disturb (1 to 2 hours sleep less)	3	3.3	3.3	75.8
	My sleep is moderately disturb (2 to 3 hours sleep less)	2	2.2	2.2	78.0
	My sleep is slightly disturb (less than one hr sleepless)	20	22.0	22.0	100.0
	Total	91	100.0	100.0	



{10}. Recreation

		Frequency	Percent	Valid Percent	Cumulative Percent
	I am able to engage in all my recreation activities with no neck pain at all	68	74.7	74.7	74.7
	I am able to engage in all my recreation activities, with some ne pain in my neck	17	18.7	18.7	93.4
Valid	I am able to engage in most common but not all of my usual recreation activities because of pain in my neck	2	2.2	2.2	95.6
	I can't do any recreation activities at all	4	4.4	4.4	100.0
	Total	91	100.0	100.0	

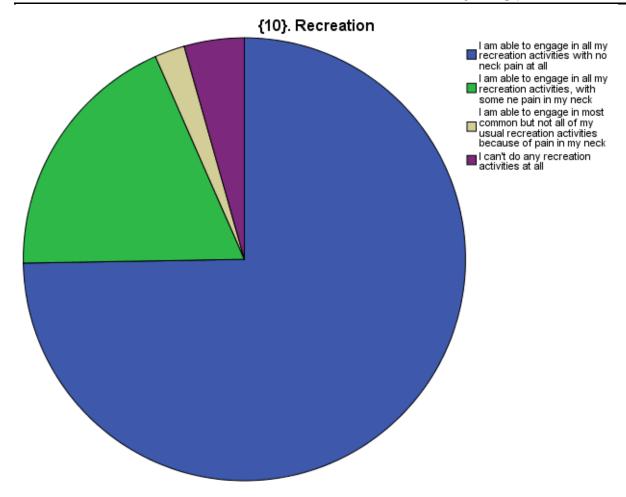


Table 1 : Pain Intensity v/s Personal Care (Washing, Dressing etc.)

Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment
	I can look after myself normally but it causes extra pain	3	3	1	1	0
	I can look after myself normally without causing extra pain	58	10	6	1	1
{2}. Personal Care [Washing, Dressing, etc]	I do not get dressed, i wash with difficulty and stay in bad	1	0	0	0	0
	I need some help but can manage most of my personal care	1	2	0	1	1
	It is pain full to look after myself and I am slow and careful	1	0	0	0	0

- {2}. Personal Care [Washing, Dressing, etc] I can look after myself normally but it causes extra pain
- {2}. Personal Care [Washing, Dressing, etc] I can look after myself normally without causing extra pain
- {2}. Personal Care [Washing, Dressing, etc] I do not get dressed, i wash with difficulty and stay in bad
- {2}. Personal Care [Washing, Dressing, etc] I need some help but can manage most of my personal care
- {2}. Personal Care [Washing, Dressing, etc] It is pain full to look after myself and I am slow and careful 28 10 ATAT I HAVE NO PAIN AT THE THE PAIN IS VERY MILD AT AT THE MOMENT THE PAIN IS MODERATE THE PAIN IS VERY SEVERE THE PAIN IS THE WORST THE MOMENT THE MOMENT MOMENT MOMENT IMAGINABLE

Table 2 : Lifting Weights v/s Pain Intensity

Table 2 : Lifting We	eights v/s Pain Intensity					
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment
	I can lift heavyweight but it gives extra pain	2	4	6	2	0
	I can lift heavyweight without extra pain	53	9	1	1	1
	I can not lift or carry anything	1	0	0	0	0
	I can only lift very lightweights	6	0	0	0	0
{3}. Lifting	Pain prevents me from lifting heavyweight but I can manage light to medium weights if they are conveniently positioned	2	1	0	0	1
	Pain prevents me lifting heavyweight off the floor, but I can manage of they are conveniently places, for example on table	0	1	0	0	0

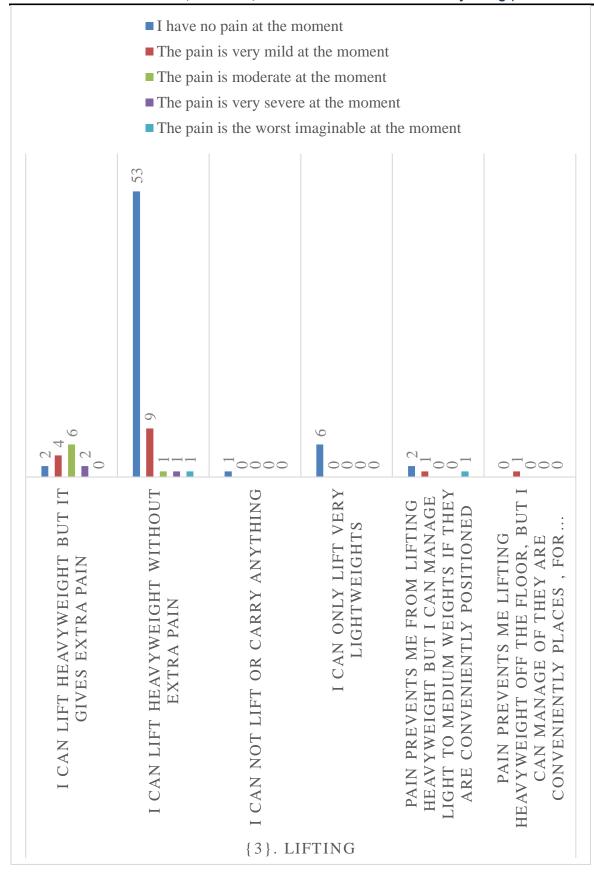


Table 3 : Reading v/s Pain Intensity

Table 5 . Reading v	78 Fain intensity	ı	ı	ı		T
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment
{4}. Reading	I can read as much as I want to with a slight pain in my neck	16	6	2	1	0
	I can read as much as I want to with no pain in my neck	44	5	1	1	0
	I can read as much as I want with moderate pain in my neck	1	4	1	0	0
	I can't read as much as I want because of moderate pain in my neck	0	0	2	1	1
	I cannot read at all	3	0	1	0	1



- {4}. Reading I can read as much as I want to with no pain in my neck
- {4}. Reading I can read as much as I want with moderate pain in my neck
- {4}. Reading I can't read as much as I want because of moderate pain in my neck
- {4}. Reading I cannot read at all

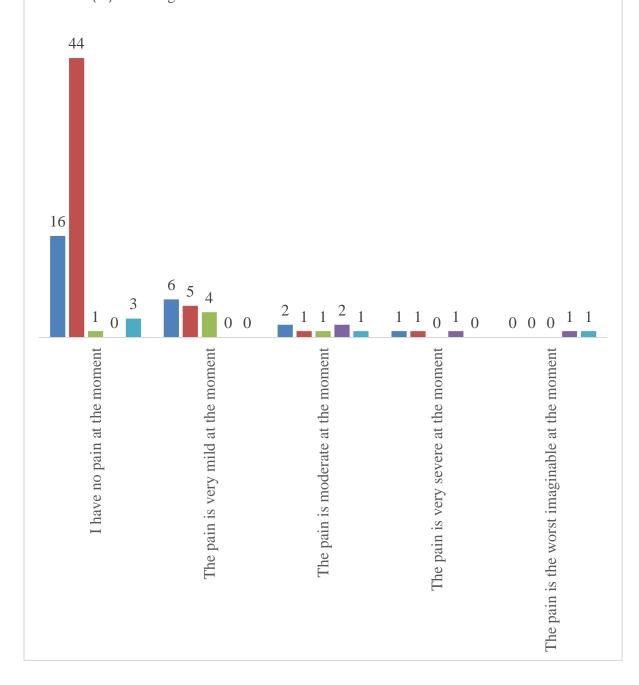


Table 4: Headaches v/s Pain Intensity

Table 4 . Headaches	v/s I am mensity		•			, , , , , , , , , , , , , , , , , , , ,
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment
{5}. Headaches	Have severe headaches, which come frequently	0	0	2	0	0
	I have a slight headaches, which come infrequently	14	7	0	0	1
	I have headaches almost all the time	1	0	1	0	0
	I have moderate headaches , which come infrequently	3	3	1	1	0
	I have moderate headaches, which come frequently	2	0	1	0	0
	I have no headaches at all	44	5	2	2	1

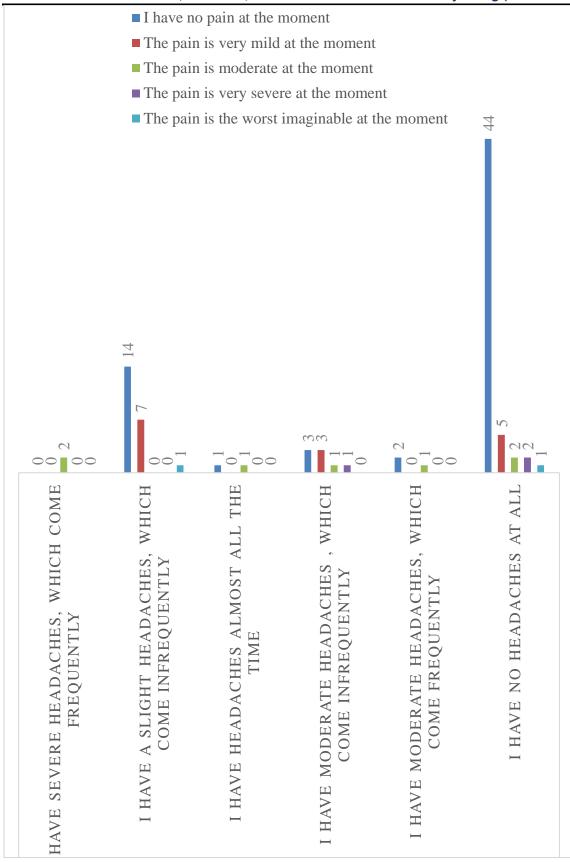


Table 5 · Concentration v/s Pain Intensity

Table 5 : Concentration v/s Pain Intensity							
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment	
I can concentrate fully when I want to with no difficulty		52	6	1	1	1	
	I can concentrate fully when I want to with slide difficulty	5	6	1	1	0	
	I cannot concentrate at all	2	0	1	0	0	
{6}. Concentration	I have a fair degree of difficulty in concentrating when I want to	3	3	2	0	0	
	I have a great deal of difficult in concentrating when I want to	1	0	1	0	0	
	I have a lot of difficulty in concentrating when I want to	1	0	1	1	1	

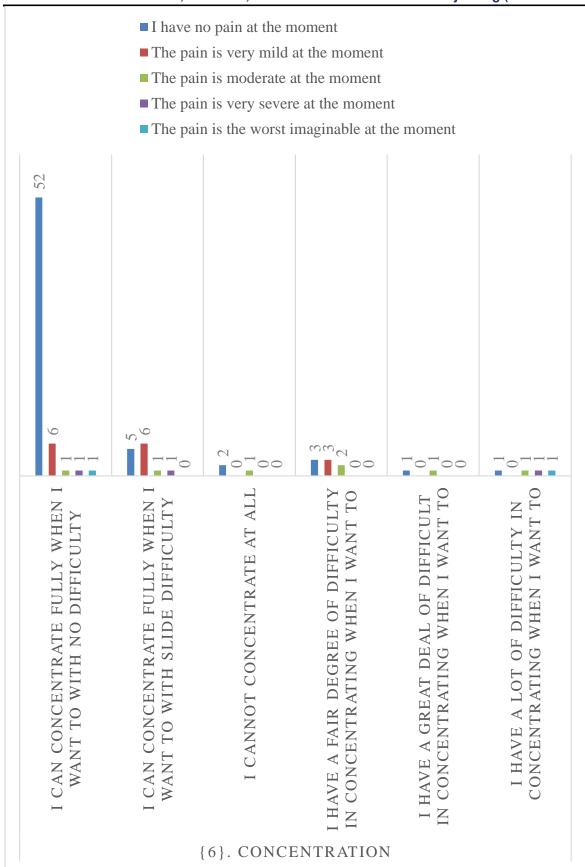


Table 6: Work v/s Pain Intensity

Table 0. WOIK V	/s I am mensity		ı		ı	
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment
{7}. Work	I can do as much work as I want to	53	8	3	1	1
	I can do most of my usual work, but no more	0	0	2	2	0
	I can hardly do any work at all	1	0	0	0	0
	I can only do my usual work, but no more	9	7	2	0	0
	I can't do any work at all	1	0	0	0	1

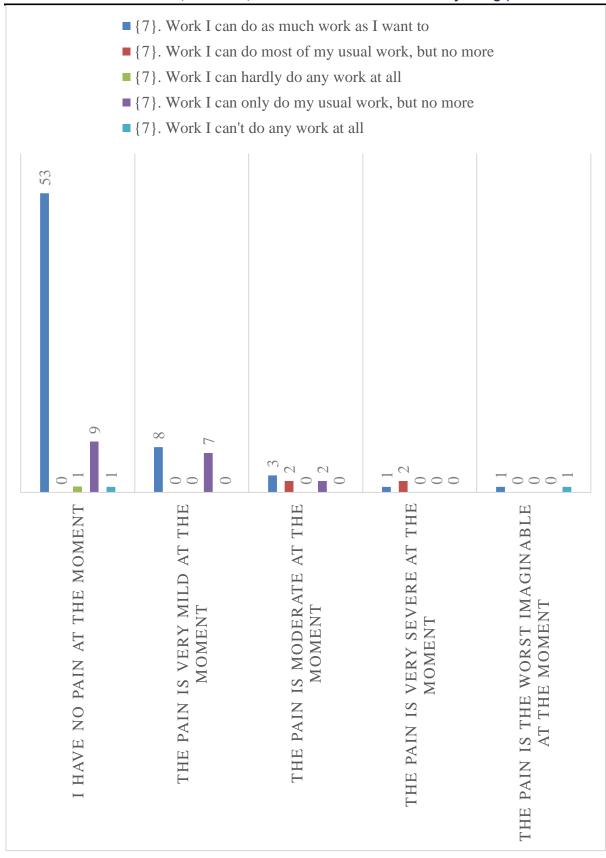


Table 7: Driving v/s Pain Intensity

Table / : Driving v	/s Pain intensity		T			,
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment
{8}. Driving	I can drive my car as long as I want with moderate pain in my neck	1	1	3	0	0
	I can drive my car as long as I want with slight pain in my neck	5	4	2	0	0
	I can drive my car without any neck pain	51	10	1	1	0
	I can hardly drive at all because of severe pain in my neck	0	0	0	1	0
	I can't drive my car as long as I want because of moderate pain in my neck	1	0	0	0	0
	I can't drive my car at all	6	0	1	1	2

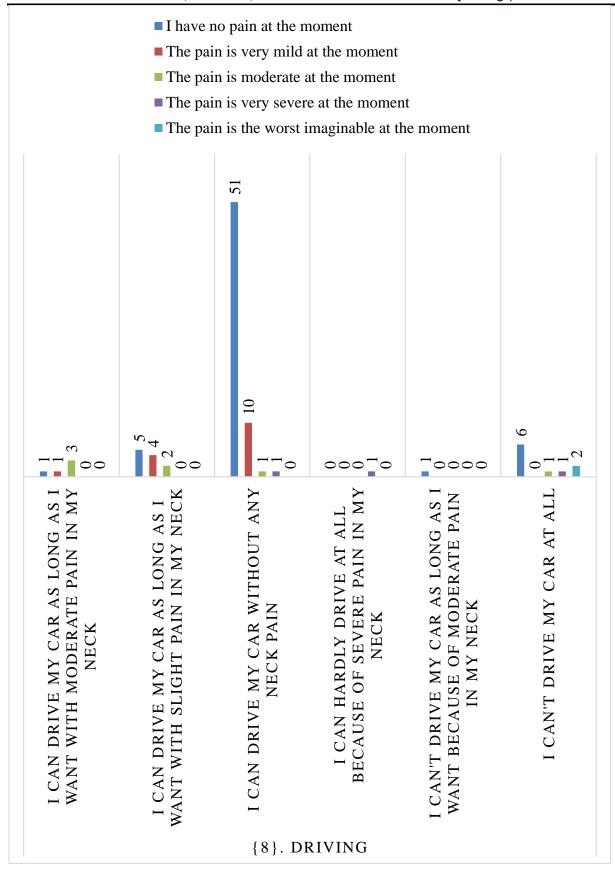


Table 8 : Sleeping v/s Pain Intensity

Table 8. Sleeping V/s Fain Intensity							
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment	
	I have no trouble sleeping	49	9	1	2	2	
{9}. Sleeping	My sleep is completely disturbed(5-7 hrs sleepless)	1	0	1	0	0	
	My sleep is greatly disturbed (3 to 5 hour sleep less)	0	0	1	0	0	
	My sleep is mildly disturb (1 to 2 hours sleep less)	1	1	1	0	0	
	My sleep is moderately disturb (2 to 3 hours sleep less)	1	0	1	0	0	
	My sleep is slightly disturb (less than one hr sleepless)	12	5	2	1	0	

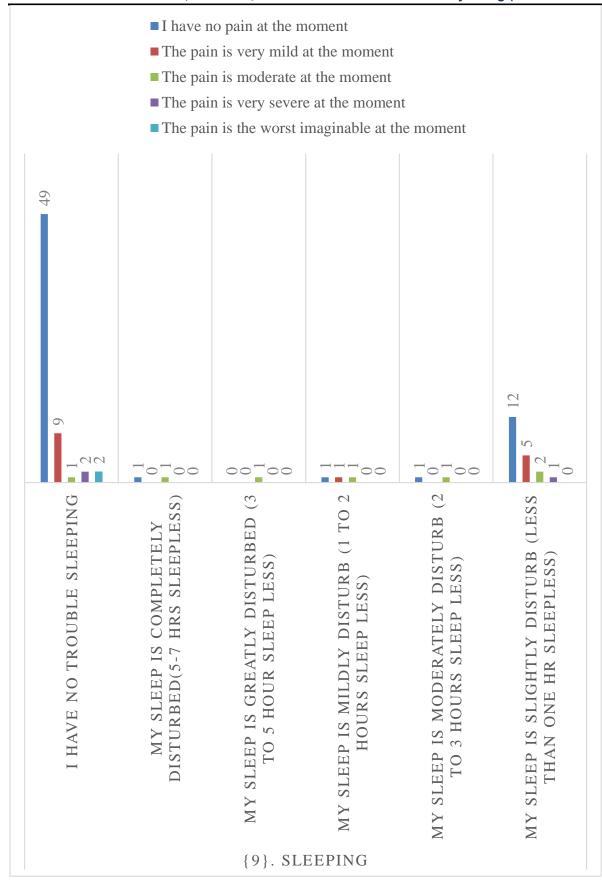
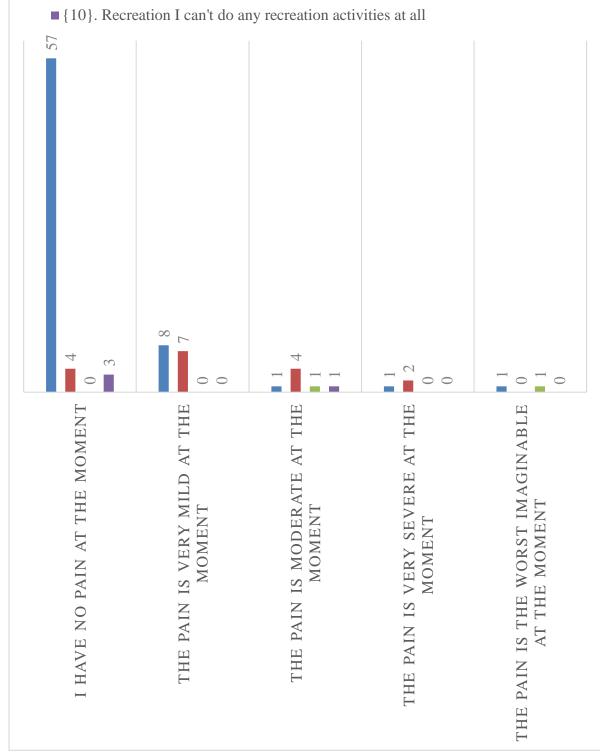


Table 9: Recreation v/s Pain Intensity

Table 9: Recreation v/s Pain Intensity							
Pain Intensity		I have no pain at the moment	The pain is very mild at the moment	The pain is moderate at the moment	The pain is very severe at the moment	The pain is the worst imaginable at the moment	
{10}. Recreation	I am able to engage in all my recreation activities with no neck pain at all	57	8	1	1	1	
	I am able to engage in all my recreation activities, with some ne pain in my neck	4	7	4	2	0	
	I am able to engage in most common but not all of my usual recreation activities because of pain in my neck	0	0	1	0	1	
	I can't do any recreation activities at all	3	0	1	0	0	

- {10}. Recreation I am able to engage in all my recreation activities with no neck pain at all
- {10}. Recreation I am able to engage in all my recreation activities, with some ne pain in my neck
- {10}. Recreation I am able to engage in most common but not all of my usual recreation activities because of pain in my neck



Results

Using the graphs the following results were obtained:

- 1. Most of the patients did not had any pain or had mild pain during personal care (washing, dressing, etc).
- 2. Most of the patients did not had any pain or had mild pain during Lifting heavy weights.
- 3. Most of the patients did not had any pain or had mild pain during Reading.
- 4. Most of the patients did not had any pain or had mild pain during slight headaches, which come infrequently.
- 5. Most of the patients did not had any pain or had mild pain and so they can concentrate in their day to day activities with no/less difficulty.
- 6. Most of the patients did not had any pain or had mild pain while doing work.
- 7. Most of the patients did not had any pain or had mild pain while driving.
- 8. Most of the patients did not had any pain or had mild pain while sleeping or had no trouble sleeping.
- 9. Most of the patients did not had any pain or had mild pain and so they were able to engage in all their recreational activities with no/mild neck pain.

DISCUSSION

Neck pain can have causes that aren't due to underlying disease. Examples include prolonged straining (looking up or down), sleeping in an uncomfortable position, stress, chiropractic manipulation or wearing heavy necklaces. Chronic neck pain can range from an achy annoyance to shock-like pain that goes into the arm and becomes debilitating. Neck pain is typically classified as chronic when it persists or regularly recurs for at least 3 months.

Drs Ylinen and Häkkinen,Dr Takala ,Dr Nykänen,Dr Mälkiä,Dr Pohjolainen and Ms Karppi,Dr Airaksinen did research in Active neck muscle training in the treatment of chronic neck pain in women: a randomized controlled trial , the results show that the Both strength and endurance training for 12 months were effective methods for decreasing pain and disability in women with chronic, nonspecific neck pain. Stretching and fitness training are commonly advised for patients with chronic neck pain, but stretching and aerobic exercising alone proved to be a much less effective form of training than strength training. ⁶

Author Deborah Falla, Gwendolen Jull, Trevor Russell, Bill Vicenzino, Paul Hodges did research in Effect of neck exercise on sitting posture in patients with chronic neck pain, the results show that the This study showed that people with chronic neck pain demonstrate a reduced ability to maintain an upright posture when distracted. Following intervention with an exercise program targeted at training the craniocervical flexor muscles, subjects with neck pain demonstrated an improved ability to maintain a neutral cervical posture during prolonged sitting. ⁴

When Jari Ylinen did research in Physical exercises and functional rehabilitation for the management of chronic neck pain, the results show that Specific moderate and highintensity neck muscle training can reduce neck pain. A decrease in neck pain is associated with reduced pressure pain sensitivity in neck muscles. Intensive regular training will increase neck muscle strength and range of motion, leading to improved function and less disability in patients with chronic neck pain. Training for a few months is commonly recommended, but it has beenshown to produce only transitory improvements. Long-term progressive resistance training for neck and shoulder muscles is therefore recommended. Moreover, effective training can be performed at home with low-cost training equipment.⁸

In this cross - sectional research chronic neck pain among college going students on 90 students from age 18-24. In this research NDI scale and VAS scale were used to measure pain and disability of students. My research concluded that the there is no disability among college going students.

I did this research because I observed that college going students have to keep their neck constantly in one position whether it was for attending lectures or working on their desk so I wanted to know if they were experiencing any kind of chronic neck pain in their day to day life.

CONCLUSION

From the results it can be concluded that more than half of the population had no pain or mild pain and they didn't feel any issues in dealing with personal care lifting heavy weights reading headaches concentration work driving sleeping and recreation.

SUMMARY

From the results it can be concluded that more than half of the population had no pain or mild pain and they didn't feel any issues in dealing with personal care lifting heavy weights reading headaches concentration work driving sleeping and recreation.

Limitations

- Smallsamplesize.
- Limitedagegroupof18-24years.
- Neckpainprolongedmorethan12weeks.

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