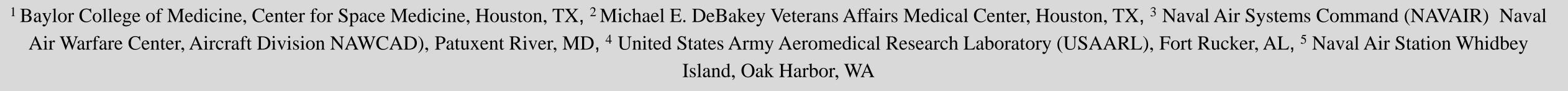


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Background

- Operators of Rotary-Wing Aircraft (RWA) and High-Performance Jet Aircraft
 (HPJA) often experience musculoskeletal (MSK) pain as a result of heavy
 vibrational and g-loading, abrupt head maneuvering, and extensive flight hours.
- The prevalence of neck pain among military aviators is as high as 95% and is a top-10 aeromedical concern by the United States Navy.
- Like other MSK injuries, weakness and flexibility deficits are hypothesized to contribute to cervical spinal injuries.
- Advanced helmet-based systems introduce further risk, especially those that require the pilot to turn their head.
- A few studies around the world describing small scale success but no universal recommendation for combating this risk

Aims

- Implement a regular exercise program using a portable c-spine resistance band system (NeckXTM) in order to:
 - (1) Improve neck flexibility, strength, stiffness and pain
 - (2) Increase neck range of motion and endurance in military aviators

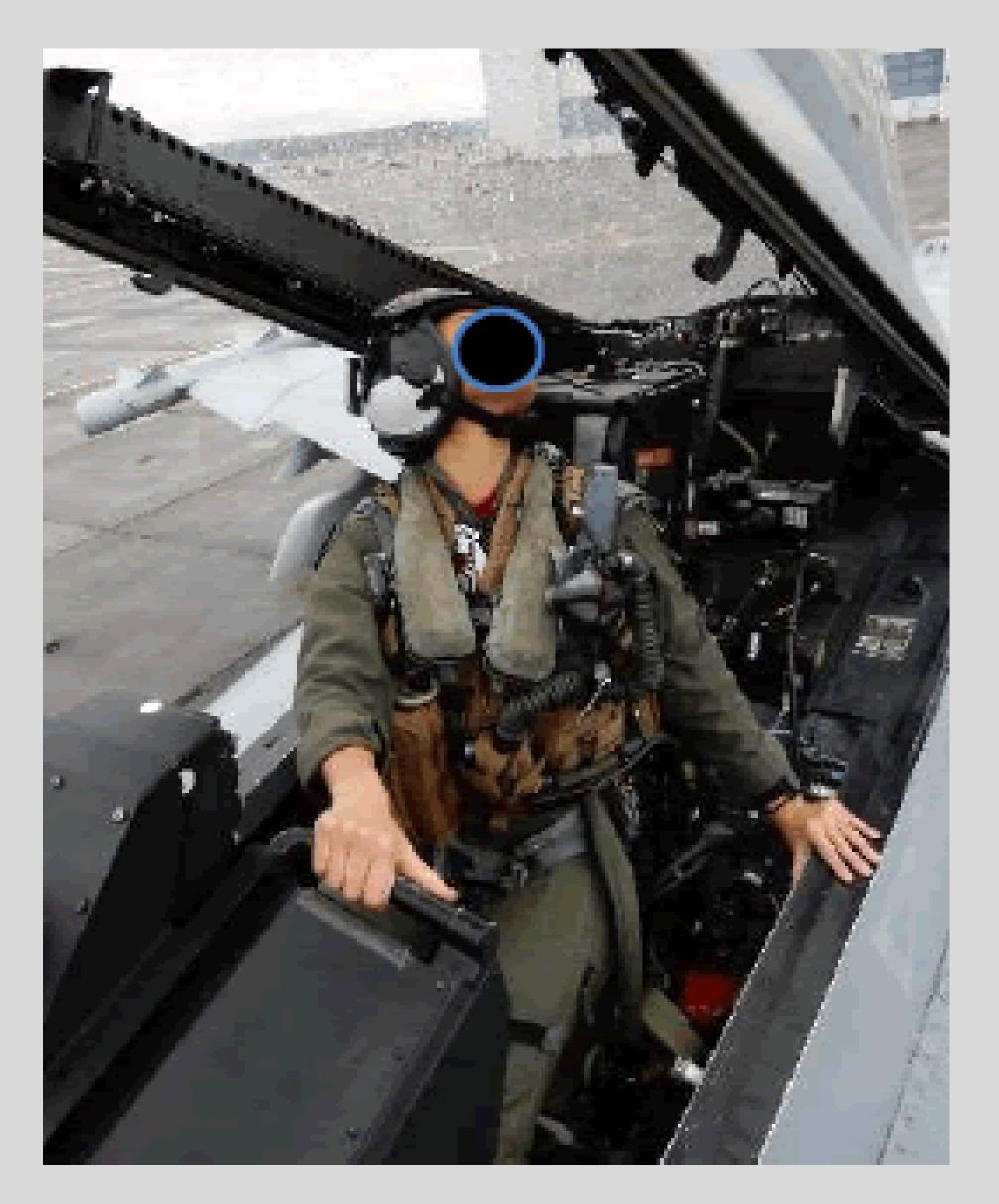


Figure 1: Check-six position with canopy raised, used to spot tailing aircraft



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Cervical Spine Exercise Protocol:

1.Baseline anthropometrics

2.Measurements

- a. Obtain at baseline, 3 weeks, 6 weeks
- b. Questionnaires obtained weekly.

2. Warm Ups

- a. Neck Extension: 10 reps x 1 set
- b. Side Bending (L and R): 5 reps x 1 set
- c. Neck Rotation (L and R): 5 reps x 1 set
- d. Neck Flexion: 10 reps x 1 set

3. Stretches

- a. Neck Extension: 10 reps x 2 sets
- b. Side Bending (L and R): 10 reps x 2 sets
- c. Neck Rotation (L and R): 10 reps x 2 set
- d. Neck Flexion: 10 reps x 2 sets

Optional Exercises (added on after prior)

- a. 45° Check to Back: 10 reps x 2 sets
- b. 45° Check to Down: 10 reps x 2 sets
- c. Vertical Lifts: 10 reps x 2 sets

Guidelines:

- a. Perform 5 days/week.
- b. Begin with yellow band, then progress weekly (green then purple) as tolerated.
- c. After the third week, increase to 15 reps x 2 sets; add optional exercises if desired.

Methods

Notes:

- a. Pilot Study performed initially for feasibility (n = 10 F/A-18 Fixed-Wing HPJA aviators)
- b. Subjects were pulled from active-duty DoD personnel as well as civilians as the Houston Veterans Affairs Medical Center
- c. Upon completion, subjects were asked to rate the effectiveness and ease of use of the device and protocol.

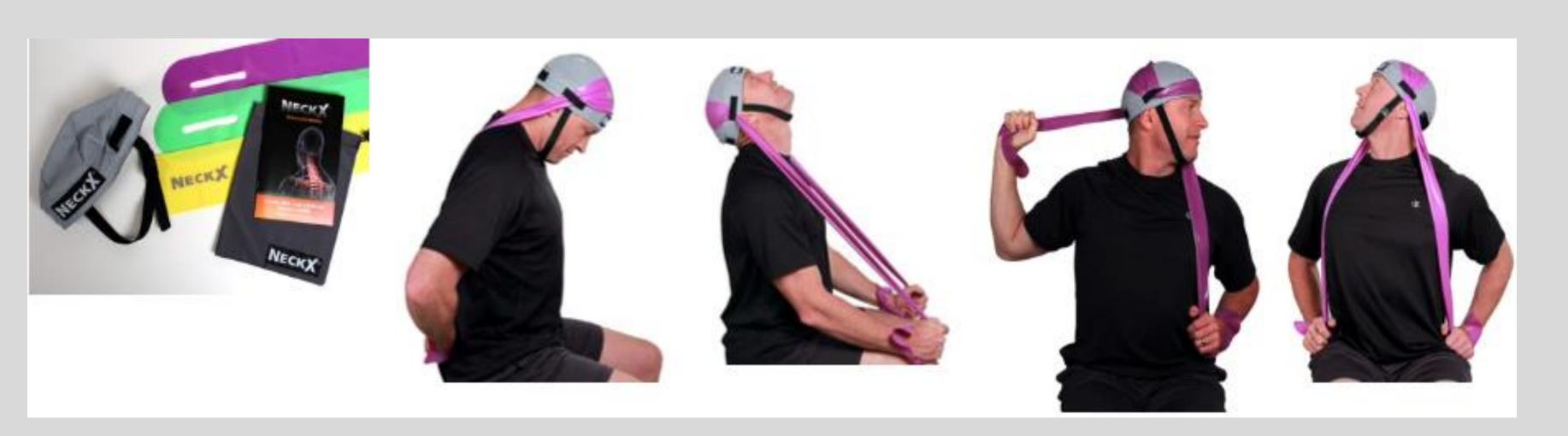


Figure 2: Portable Lightweight Exercise Device (PLED)[Neck-X(TM)] being employed during exercise training.



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Intake Questionnaire

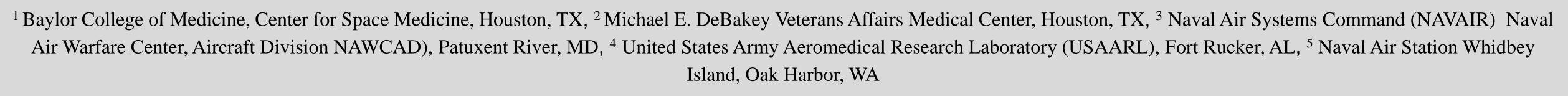
Prevalence of neck pain in DoD flight crew in different scenarios		
Question	Yes	No
During the last 6 months, have you experienced neck pain UNRELATED to flying?	10	4
During the last 6 months have you experienced neck pain RELATED to flying?	6	8
During the past 6 months, have you had significant neck pain DURING flight?	5	9
During the last 6 months, have you had significant neck pain AFTER flight?	6	8
During the last 6 months, have you had significant neck pain during flight that was related to equipment other than head-mounted systems?	2	12
Are there any flight maneuvers that consistently cause neck pain?	3	11
During the past 6 months, have you sought treatment for the occurrence of any flight related significant neck pain?	3	11
Have you ever been grounded as a result of flight-related neck pain?	1	13
Have you ever acted to minimize or avoid flight-related neck pain?	2	12
Used Night Vision Goggles (NVGs)?	10	4
†Variables presented as total number of respondents.		

Severity of neck pain episodes in DoD flight crew Outcome Measure	Mild	Moderate	Severe	Very Severe	N/A
Outcome Measure	IVIIIG	Wiodelate	30 4010	very severe	- 14/7
Severity of pain for the worst episode of pain experienced during last 6 months DURING flight	4	3	0	0	7
Severity of pain for the worst episode of pain experienced during last 6 months AFTER flight	3	5	0	0	6
Severity of pain for the typical episode of pain experienced during last 6 months DURING flight	4	3	0	0	7
Severity of pain for the typical episode of pain experienced during last 6 months AFTER flight	3	5	0	0	6

Outcome Measure	Worst Episode	Typical Episode	
N/A	6	6	
ess than 2 hours after flight	0	2	
2-11 hours after flight	2	1	
.2-24 hours after flight	3	3	
4 days after flight	2	1	
5+ days after flight	0	0	
No Response	1	1	



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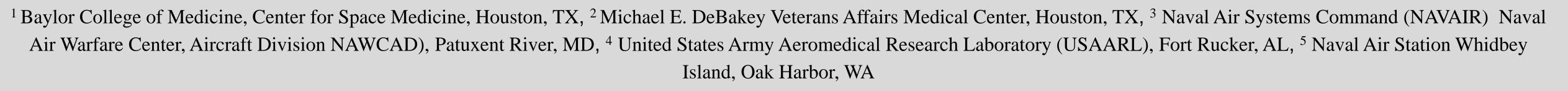
Quantitative Results

Variable	Baseline	6-week follow-up	P-value
Rotation, Left	57.86 (13.55)	74.65 (9.42)	< 0.001*
Rotation, Right	58.94 (16.71)	74.90 (10.79)	< 0.001*
Lateral, Left	32.40 (10.63)	43.05 (9.72)	< 0.001*
Lateral, Right	30.34 (11.23)	40.11 (10.68)	< 0.001*
Flexion	32.13 (17.30)	42.32 (18.38)	< 0.001*
Extension	41.38 (16.61)	56.02 (15.81)	< 0.001*

Variable	Baseline	6-week follow-up	P-value
Rotation, Left	20.08 (17.46)	42.13 (21.87)	< 0.001*
Rotation, Right	18.50 (17.23)	43.79 (20.11)	< 0.001*
Lateral, Left	24.25 (24.16)	49.88 (34.25)	< 0.001*
Lateral, Right	23.79 (23.85)	50.21 (31.67)	< 0.001*
Flexion	23.96 (21.88)	53.29 (26.28)	< 0.001*
Extension	25.71 (23.15)	51.46 (29.95)	< 0.001*



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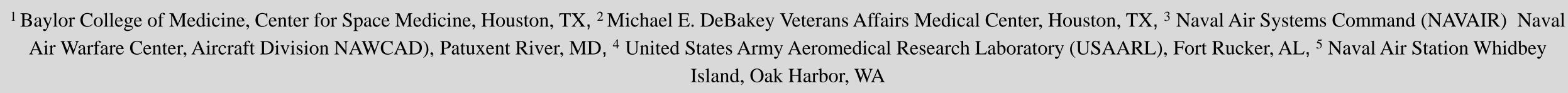
Quantitative Results

Comparison of Rotary-Wing (n=12) and Fixed-Wing (n=10) Aviators: Performance Changes Post-Intervention

Variable	Muscular Endurance		Cervical ROM	
	Rotary Wing	Fixed Wing	Rotary Wing	Fixed Wing
Rotation	+133.35%	+17.00%	+32.81%	+8.00%
Lateral	+78.38%	+10.00%	+40.66%	+7.00%
Flexion	+73.47%	+9.00%	+55.23%	+5.00%
Extension	+72.60%	+12.00%	+34.13%	+0.00%



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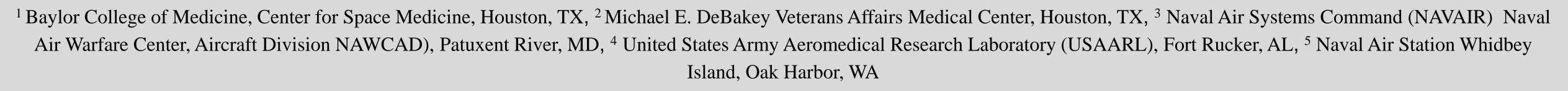
Qualitative Results with Comments

Outcome Measure	Vastly Improved	Slightly Improved	Same	Worsened
Neck Flexibility	6	15	2	0
Neck Muscle Strength	6	16	1	0
Neck Stiffness	6	12	5	0
Neck Pain	4	9	10	0

- "We need immediate access to PT on the flight line"
- "The act of flying a helicopter isn excess of 2 hrs causes neck, shoulder, & upper back pain. The position I sit in the cockpit has a tendency to be leaning forward placing more strain on my upper back and neck."
- "Good posture declines as you end up slouching or bent over due to "scope lock.""
- "It is/was routine for SH-60B and MH-60R AW to sit in twisted position during landings on RAST capable ships to assist pilot in positioning A/C over the trap. Landing in this position cannot be good for the neck and back."



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Discussion and Future Directions

- This study demonstrated statistically significant increases in cervical ROM and muscular endurance across all measures
- Most study participants reported varying levels of subjective improvements in neck flexibility, strength, stiffness, and pain
- Improvement across these measures may lead to increased mission success and decreased medical disqualifications
- This study was limited by the low total recruitment, low recruitment of female subjects, and low rates of follow-up due to deployments, TDYs and other operational requirements
- •We look forward to collaborations with our colleagues at the U.S. Army Aeromedical Research Laboratory (USAARL) in and U.S. Air Force to push to create a service-wide recommendation in the future



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