

Cancer Survivorship Patient Education on Post-Treatment Care

Cervical Dystonia

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What is the condition?

Cervical dystonia, also known as treatment-induced fibrosis, is a potential side effect of head and neck cancer treatment. It is characterized by painful spasms along the treated side of the neck.

How common is it among head and neck cancer patients?

Surgery and radiation treatment to the neck can cause progressive scarring, also known as fibrosis. The muscles, tendons, ligaments and nerves in the neck become increasingly scarred, which may lead to chronic pain, weakness and painful spasms.

If left untreated, the fibrosis can progress and result in neck contracture, which is the shortening or tightening of the involved muscles. This can result in deformity of the neck and restrict normal movement.

Studies have shown cervical dystonia can occur in up to 20% of head and neck cancer patients. The degree of dystonia is dependent on the degree of surgery (e.g., radical neck dissection vs. selective neck dissection) as well as the extent and dose of radiation and the inclusion of chemotherapy.

What are the signs/symptoms?

Patients with cervical dystonia may note pain in the neck and shoulders, reduced range of motion, muscle stiffness, and spasms that can radiate into the arms and hands. As the degree of dystonia progresses, the head may tilt in a specific direction and posture may be altered.

How is it diagnosed?

Cervical dystonia is usually diagnosed as a tightness of the neck muscles during surveillance visits with your multidisciplinary head and neck cancer team. Patients also can report pain and reduced neck range of motion during these appointments.

What are my treatment options?

Treatment for head and neck cancer will create some degree of scarring that is not preventable. Because the scarring is a progressive process, there is no one treatment that will permanently cure cervical dystonia. Therapies employed are intended to relieve symptoms of the dystonia and usually need to be maintained to prevent further progression.

Treatment for cervical dystonia is focused on release of myofascial scar bands with restoration of range of motion. Such treatment requires the input of a multidisciplinary group of specialists, which may include physical therapy, occupational therapy, and speech-language pathology. These therapists may employ massage-based and motion techniques to release scars and stretch the muscles.

Medical treatment for cervical dystonia is focused on pain relief. Nerve stabilizers such as pregabalin (Lyrica) and duloxetine (Cymbalta) have been used with varying success. However, these medications do have significant side effects that should be discussed with your doctor. Narcotic medications can be used to treat episodes of acute, severe pain. Other medications like vitamin E, pentoxyfiline, aloe vera, and lycopene can be used as well. Botulinum toxin (Botox) has also been proven to be effective in the treatment of cervical dystonia. This treatment requires multiple injections of Botox along the course of the scarred muscles, which may result in relaxation of the muscles and pain relief.



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When should I call my doctor?

You should work closely with your multidisciplinary head and neck cancer team to find a proactive treatment program suited to you.

Progression of the scar can be prevented by early intervention. Proactive neck and shoulder exercises can maintain flexibility of the muscles and prevent significant scarring.

Where Can I Learn More?

https://www.oncolink.org/cancers/head-and-neck/side-effect-management-support-resources/cervicaldystonia

References:

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