

Stay Well:

Why do I have a hump on my neck and can I fix it?

Experts unpack causes behind this common spinal curve and reveal what exercises, posture changes, and treatments may help. By *Suzanne Harrington*

When Black Eyed Peas sang about my hump, my hump, my lovely lady lumps, chances are they weren't thinking of the kind of hump that sounds like something straight from Dickens or Downton Abbey — a dowager's hump, medically known as hyperkyphosis.

So do you have to be an elderly duchess or can anyone develop one?

First, what exactly is it, and does its name need rebranding?

"Yes, dowager's hump is not a nice term when discussing this with patients," agrees chartered physiotherapist Declan O'Sullivan.

"[The term] represents a smaller hump at the base of the neck just where the cervical spine meets the thoracic spine.

"It does not really refer to thoracic spine per se. It may be congenital, or the result of localised disease, for example osteoporosis or degenerative disc disease.

"It does not arise from occupational positions, as we are led to believe."

How does dowager's hump differ from kyphosis, the medical term for curvature of the spine?

"Dowager's hump and kyphosis are overlapping conditions," says Dr Kieran O'Sullivan, professor of physiotherapy. "Kyphosis is a general term for a rounded back, not teen slouching, but more extreme variations.

"Dowager's hump occurs specifically in older women. It has two predictors — genetics (so if your mother and grandmother had it, there is a greater chance you will too) and osteoporosis (which is more common in women, and can cause spinal bones to collapse). Many older women have rounded backs and compression fractures."

He says that the actual 'hump' is comprised of "rounded crumbling bones plus fluid and fatty tissue".

What happens to the area affected by dowager's hump?

"It is characterised by a stiffening of the junction C7-T1 and an increase in movement in the vertebral segment above it (C5-C6, C6-C7) so you end up having too much movement in one segment and too little movement at another segment," explains Declan O'Sullivan.

C and T refer to the numbered bones found in the cervical (neck) and thoracic (torso) areas of the spine.

"A typical presentation for dowager's hump is the head-forward posture so commonly and mistakenly blamed on occupations requiring the use of a computer or head down position, such as a manufacturing line worker.

"Just because you have a dowager's hump, it does not mean you will have pain. It is very common in the general population.

"Some people with dowager's may present also with an age-related hyperkyphosis which is an increase in the normal curvature of the thoracic spine resulting in a lower mid-spine hump which can be very upsetting for the patient aesthetically."

What are the symptoms, beyond how it looks?

"Typically with hyperkyphosis, the patient will present with decreased spinal movements, especially extension, reduced shoulder range of motion and in the older population decrements in balance," says Declan O'Sullivan. "In some patients where the hyperkyphosis has progressed, it may affect respiratory function due to increased stiffness of the ribs and the spine reducing optimal respiratory ventilation."

What causes kyphosis?

"While some degree of kyphosis is normal for everyone, excessive curvature can be caused by several different factors," says Mr Nagy Darwish, orthopaedic spinal consultant at Mater Private Network.

"It's important to understand that kyphosis is a common condition that can affect individuals of all ages, however our daily habits and lifestyle choices can help to mitigate issues down the line. Structural kyphosis occurs due to congenital malformations such as conditions like scoliosis or Scheuermann's disease.

"Non-structural (or postural) kyphosis often results from environmental factors such as poor posture, prolonged sitting, or muscular weakness, particularly in the neck and upper back area."

"Dowager's hump occurs due to pre-existing conditions or incorrect posture, poor habits, and traumatic injury.

"Many people aren't aware that they have a kyphosis of the spine. Although normal thoracic kyphosis is actually required to keep normal balance, over-kyphosis does require medical attention.

"The majority of patients I see with the condition come to me because they have noted a change in their physical appearance over time, or are now experiencing pain, usually in the lower back, as a result of a progressive kyphosis."

How is dowager's hump/hyperkyphosis treated?

"There are two options if it's affecting your quality of life — if it's painful or affecting your ability to walk or breathe, or you think it's unsightly," says Kieran O'Sullivan.

"Non-surgical interventions are low-risk, but not always very effective. Braces or corsets, which can be cumbersome and uncomfortable, and won't restraighten your spine. But they are safe, with no side effects.

"Surgery has a greater chance of correcting curvature, but it's riskier and there can be

complications, as it typically involves inserting metal hardware into the bodies of older people. So people tend to only opt for surgery when it's really bad and their quality of life is significantly impacted."

Darwish explains how, depending on the type of kyphosis you have, the most common treatment pathways are surgery or physiotherapy.

"Structural kyphosis, depending on the severity, may require surgical intervention, especially if the patient is young and still growing, to avoid further malformation during development," he says.

"For non-structural kyphosis, physical therapy and exercises to strengthen the back and improve posture are recommended.

"Braces can provide support but are generally supplementary treatments and do not correct the root cause of the condition. However, braces can be effective in younger patients who have not reached skeletal maturity to help guide the curvature of the spine, coupled with medical monitoring."

In terms of physiotherapy, Declan O'Sullivan says that dowager's hump and hyperkyphosis "are not reversible by any manual therapy modalities."

"You cannot manipulate the spine 'back into position' nor realign it with traction related techniques."

Can you do anything to prevent developing a dowager's hump/hyperkyphosis?

"Risk factors for osteoporosis include not enough calcium in the diet, or frequent use of steroids.

"We need adequate calcium and vitamin D for bone density," says Kieran O'Sullivan.

"Maximise your overall health, especially your bone density. Weight bearing exercise is important for this — walking, running, dancing, racket sports, yoga, Pilates, weight lifting are all good.

"Prevention is key," says Darwish. "Maintaining good posture is essential, especially when sitting for long periods, for example at a desk at work or in front of the TV in the evening.

"Regular exercise, particularly activities such as swimming, yoga, or Pilates, are also effective in strengthening the muscles supporting the spine and improve overall posture.

"For anyone unable to fit regular exercise into their routine, desk or office-based exercises such as standing against a wall to cor-

rect rounded shoulders, can also be beneficial. For those at risk of osteoporosis (predominantly women), a healthy diet rich in calcium and vitamin D is recommended along with weight-bearing exercises, to maintain bone density and prevent spinal curvature."

What happens if you ignore it?

"Ignoring kyphosis can lead to complications," explains Darwish.

"Over time, the imbalance in spinal alignment caused by an uneven distribution of stress on the spine can lead to chronic pain, especially in the lower back. This structural imbalance may also result in balance issues, increasing the risk of falls. For those with osteoporosis or weakened bones, this can lead to further injury.

"In severe cases, untreated kyphosis can progress, leading to significant deformity, which can cause additional pain and mobility issues.

"Early intervention and prevention are crucial. By maintaining good posture, staying active, and addressing any spinal issues early, individuals can significantly reduce their risk of developing severe kyphosis. If you suspect you have kyphosis or are experiencing back pain or balance issues, it's important to seek medical advice early to prevent further complications."

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**Options such as surgery
and braces and corsets
can treat dowager's
hump/hyperkyphosis**
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