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# Whiplash Injuries: The Cervical Acceleration/Deceleration Syndrome



## Synopsis

This second edition of a clinically-orientated text has been expanded to cover up-to-date treatments for common whiplash disorders, and is intended for chiropractors. Features of this new edition include: a new chapter on treatment covering the effects of manipulation, the clinical effects of traction, immobilization and physical therapy, and the treatment protocols for the different stages of injury; a new chapter on CT and MRI, with diagnostic protocols and algorithms for clinical use; a rewritten chapter on TMJ injuries; and major revisions in chapters on biomechanics, soft tissue healing and repair, electrodiagnostic tests and thermography. The book also contains over 1,280 references to current literature on cervical spine injuries.

## Book Information

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## Customer Reviews

Croft and Foreman are to be greatly commended on this work, the BEST in the field of whiplash traumatology. Apparently, there will be a 3rd edition coming soon. The nonsense coming from Canada this year, including the New England Journal of Medicine (NEJM) Cassidy study (April 2000) and anything that Robert Ferrari has written, and is likely to write (Whiplash "Encyclopedia"), is an utter shame. The author of the recent NEJM study (Cassidy) has been accused of falsifying data (Emma Bartfay, PhD vs. Cassidy), and the views of QTF and Ferrari on chronic whiplash have been refuted over and over again. Research in this field is of two types, with one out-weighting the other exponentially: insurance company-sponsored stuff such as Cassidy's, the "Quebec Task Force" or "QTF" study (1995), and much of the Ferrari literature IS VASTLY OUTWEIGHED by the

other 95% of the university-based and engineering research that refutes it. This book, especially in its new edition (pending), is and will be the definitive treatise on whiplash-related injuries. It is not written for the layperson, and covers complex medical topics. However, for physicians and health care professionals working with the whiplash-injured, it is indispensable. When all the hubbub surrounding the latest weak studies from Canada subsides, Foreman and Croft's work will still be standing tall and unscathed. And that is because these two authors understand the difference between a strong study and a weak one. It is NOT true that you can use the research to prove anything. For example, the April 2000 NEJM study by Cassidy et al. states that when you remove the tort system, whiplash-injured persons miraculously heal faster.

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