



Pilot Questionnaire to Characterize Neck Pain Related to Forward Helmet Center of Gravity (U.S. Air National Guard)

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Disclosure Information *RAMS/NATO 2019*

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- I have no financial relationships to disclose.
- I will not discuss off-label use and/or investigational use in my presentation.
- The views expressed are those of the author and do not necessarily reflect the official policy or position of the Air Force, the Department of Defense, or the U.S. Government.

BLUF

- Neck pain is a significant factor impacting pilot performance and quality of life
- Neck pain in fighter pilots has been the subject of a great deal of research; however, no comprehensive solution space has been determined
- A questionnaire was developed within the Aeromedical Research Support Division of USAFSAM to better characterize the issue within the fighter population, as well as provide solution spaces that are currently being deployed

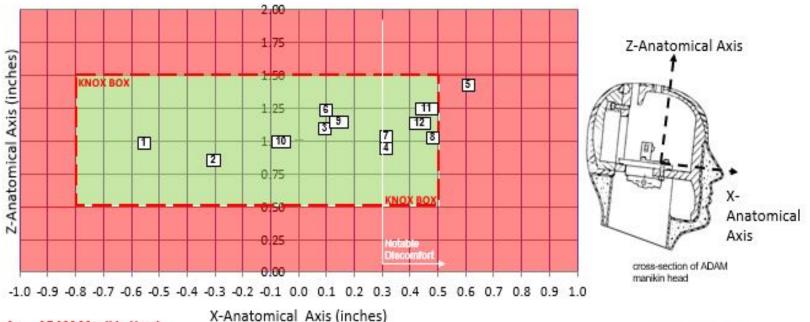


Legacy Helmet Weights All weights include O2 mask with ~3" hose (0.6 lb)



GenII = 4.93 lb; GenIII = 5.13 lb (includes partial O2 mask)

Center of Gravity Plots



1. ADAM Manikin Head

- 2. HGU-55/P, Mask
- 3. HGU-55/P, Mask, AN/AVS-9 NVGs
- 4. HGU-55/P, Mask, PNVGs
- 5. HGU-55/P, Mask, PNVGs Stowed
- 6. JHMCS (Day with HMD), Mask, 2" HVI Cable
- 7. JHMCS (Night no HMD), 49/49 NVGs, Step-in Visor, 2" HVI Cable
- 8. JHMCS (Night no HMD), PNVGs, Step-in Visor, 2" HVI Cable
- 9. HMIT (Day), Mask, 12" HVI cable
- 10. HMIT (Night), Mask, 12" HVI cable NO NVGS
- 11. Genll, Mask
- 12. Gen III, Mask

Knox Box Center of Gravity Criteria:

helmet weight limit = 4 lb for B-52 seat helmet weight limit = 5 lb for ACES II seat CGX: -0.8 to 0.5 in CGZ: 0.5 to 1.5 in (with respect to the ADAM manikin head's anatomical coordinate system)

The Questionnaire

		s questionnair			prevale	NNAIRE ince and types of modalities that		ops related		
Role: Age	CPilot	C WSO Height (Ir	_	Other	,	Gender [•		
	werage, how oft	,		angth trainin	g?		•			
	waraga, how oft I Flying Hours w	,		angth trainin	g?		•			
	MIMBER of sor			Approx)						
	se provide best (led) within last 9		MBER of med	ium G sorties	e (4-5					
	se provide best i within 90 days	astimate of <u>NU</u>	WBER of high	G sorties: (>8	5 Gʻz					
8) Curr	ent Airframe					9) Career Fh	ying Hour	s In Each Ai	rframe (est.)	
A-10						A-10 Hrs		F-15 Hrs		
F-15 F-16						ATIVITIS		r-is nis		
F/A-18						F-16 Hrs		F/A-18 Hrs		
F-22										
F-35						F-22 Hrs		F-35 Hrs		
T-38 Other	(Please describe	in box 8a ->)	Ba) Other			T-38 Hrs		Other		
						1-30 HIS		Unar		
10) Hav	e you experienc	ed neck pain w	hile flying in	the last 90 d	ays?	C Yes	○ No			
	a) If you answer sociated with ne			many sorties	s within	the last 90 days h	ave been			
11) Hav	e you ever expe	rienced neck p	ain related to	flying?		C Yes	€ No			
		lfyou answered	"No" on BOT	H 10 and 11,	please	Skip to question	37			
worst p 13) IF y neck p	oossible pain)	cerienced neck 0-worst possib	pain related le pain)	to flying, rati	e severit	(severity (0- no pa ty of the <u>worst<i>ins</i>t</u> rgeon?	tance of	CYes C	No	•

15) Severity of neck pain increases du	ring flight							
16) Range of Motion diminish	ed							
17) Limited mobility looking over righ	ntshoulder							
18) Limited mobility looking over left	t shoulder							
19) Pain radiates to different parts of	the body							
20) Numbness and tingling in the neck arms	/shoulders/							
21) Weakness in the neck/shoulde	rs/arms							
22) Have you ever been DNIF due to neck	pain?				CY	es C	No	_
23) Have you ever taken yourself off of the	e flying sched	lule due to r	eck pain?		OY	es Cl	No	
24) What type of helmet were you using neck pain (Select all that apply, press CTF HCLI-sc/P	when you ex IL for multiple	perienced e selection)						
NGJ SSIP, AN/AVS SNNGS NGJ SSIP, PM/GS NGJ SSIP, PM/GS Stowad NGJ SSIP, PM/GS (Daywith HMD) NGJ SSIP, JHMCS (Daywith HMD) NGJ SSIP JHMCS (Night no HMD) SNVG NGJ SSIP JHMC (Night no HMD) SNVG NGJ SSIP JHMC (Day JSF Gan II JSF Gan II			any addit comment	ts regarding ct on your				
5-32) When you have experienced neck p Select one option per question)		-					-	ith a
	None (0)	Slightly (1)	Somew (2)		rately E 8)	(4)	l Don't Know/ Not Sure	
25) Limits my ability to turn head								
26) Defensive BFM more difficult								
27) Tough to Check-6								
28) Unable to maintain sight picture								

 34) Fips answerd Yer

 35) With of the Johang have provided nikil from power for ada pairl (Saket all that apply, press CPL for multiple vacations)

 35) With of the Johang have provided nikil from power for ada pairl (Saket all that apply, press CPL for multiple vacations)

 36) With of the Johang have provided nikil from power for ASLOS (power for ada pairl (Saket all that apply, press CPL for multiple vacations)

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39) Please provide any additional comments on the characteristics, causes, and treatments of your neck pain. Please include treatments that did and did not provide relief of symptoms.

Submit Form by Erry	

15-21) When experiencing neck pain during sorties, to what extent do you experience the following: (Merk with an X. Select one option parquestion)

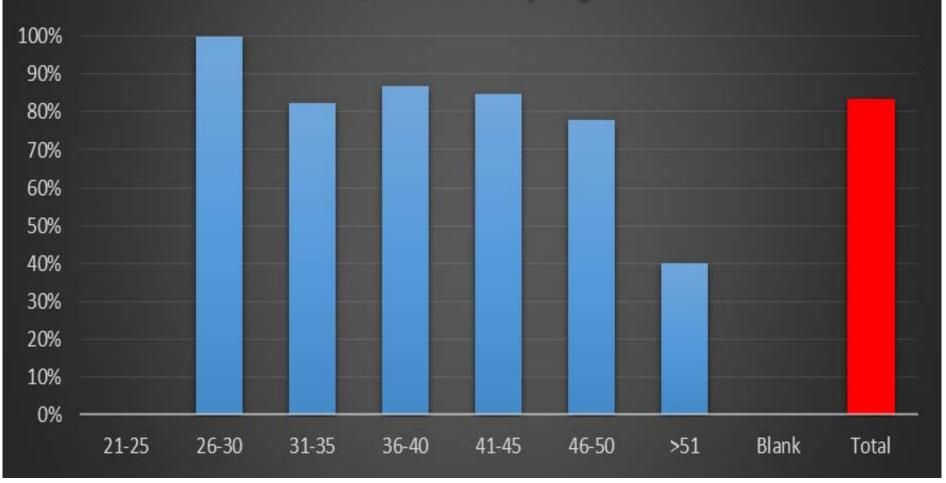
 15-21) When experiencing neck pain during sorties, to what extent do you experience the following: (Merk with an X. Select one option parquestion)
 33) Apart from the impact listed in questions 25-32, has your neck pain versificated mission performance? (Yes (Ne

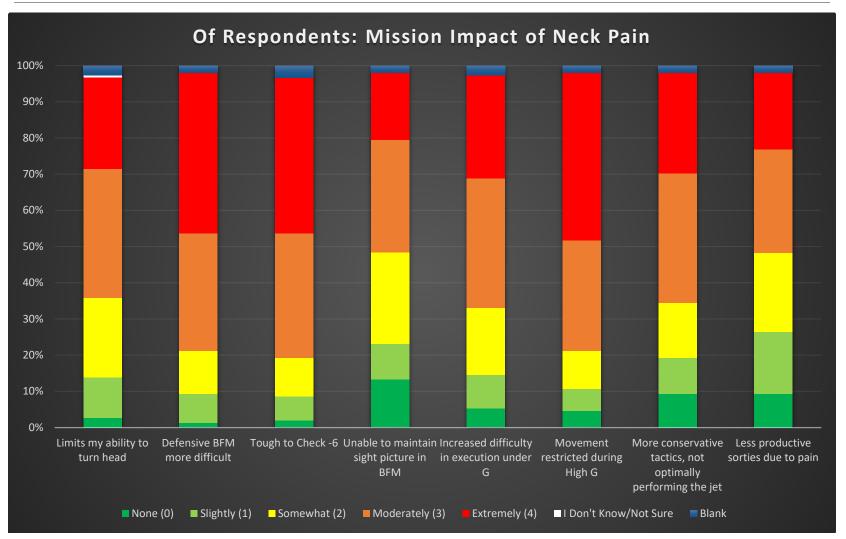
 None
 Slightly
 Somewhat
 Moderately
 Externely
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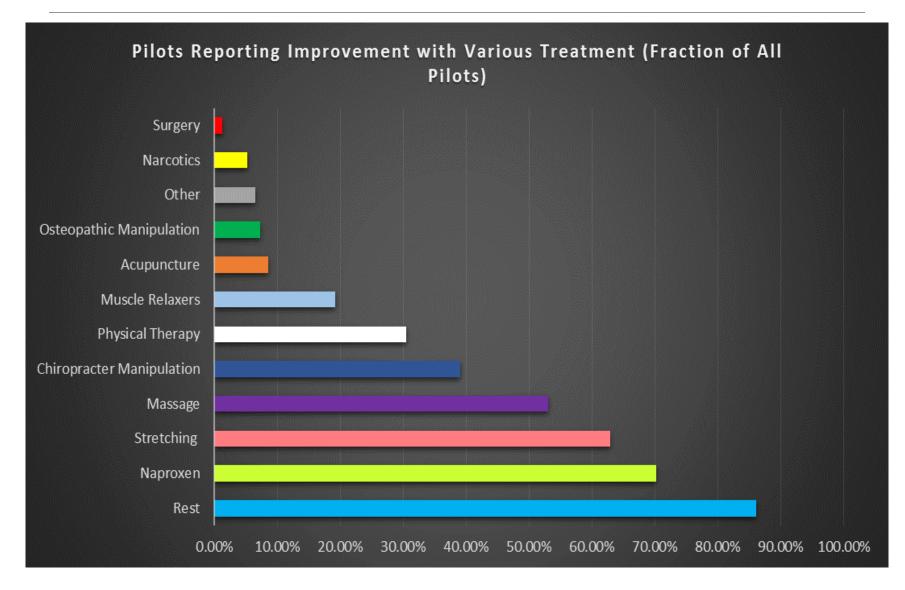
Neck Pain by Age





- Have had to KIO missions completely due to neck pain and inability to continue the mission
- I will maneuver the aircraft differently or not wear JHMCS (which is giving up a huge tactical edge even though I should because I know it will hurt my neck)
- Do a circle circle fight instead of a 2 circle fight, or not execute 9k setup for perch BFM if CT flying





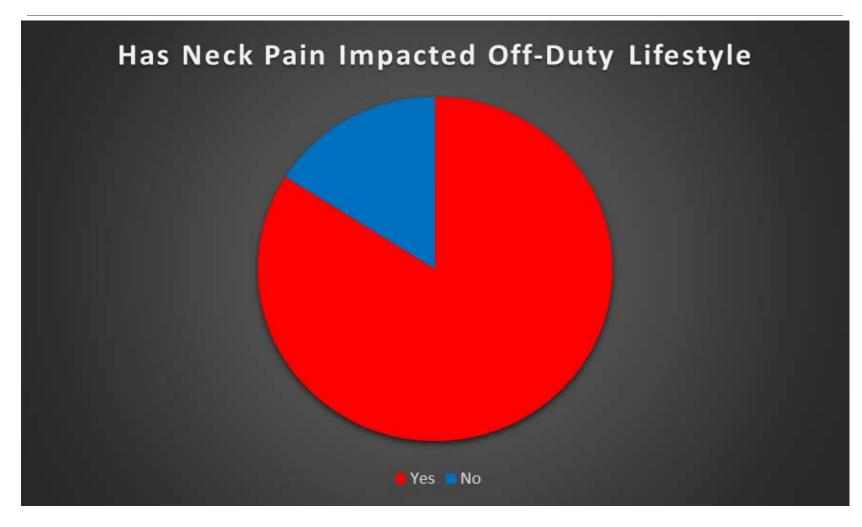


Pilot Availability

Responding Pilots reported	Responding Pilots have	Know someone who h
being DNIF'd due to neck	removed themselves from	gone outside of AFMS f
pain	the schedule	

- Out of our own pockets to get chiropractors to work on us; stim machines also
- I have heard of pilot going to chiropractors that are not covered with Tri-Care
- Most pilots in the squadron use several types of treatment outside military treatment facilities due to fear of being grounded





- Some pilots have sought treatment through chiropractors, sports trainers, and massage therapy
- I used to pay for my own massage and my back/neck never felt better; the problem with physical therapy is that by the time you get the appointment it has probably been 2 months since the pain got bad. WE NEED ONGOING CARE AVALIABLE AT THE SQUARON!!!

Questions?