Back pain +/- leg pain

History and examination

**Red Falg Signs**

Cauda EquinaSignificant trauma Worsening severe night pain First episode Age <20 , >50

Dysfunction of the bladder Use of IV drugs Use of steroid Widespread neuro ss

Bowel or sexual dysfunction ***Urgent referral to ortho/spinal*** Thoracic pain ***Refer Soon ortho/spinal***

Sensory changes in saddle area ***Urgent investigations***

***Emergency admission*** Weight loss, fever, history of ca/HIV

***Urgent MRI Plain Xrays are poor indicators of serious pathology***

Absent

Present

Manage accordingly

Non-specific low back pain

**Duration of current symptoms**

>12weeks

<12weeks

Assess symptoms and signs.

Assess for red flag signs and manage accordingly.

Explore previously used treatments for back pain.

Explore responses to previously used treatments.

Assess for yellow flags.

***Xrays are poor indicators of serious pathology.***

The majority resolves in 6 weeks. Assure.

Medication: *regular* Paracetamol, supplement with codeine or NSAID as clinically appropriate.

Advise to stay active.

Advise to stay at work, as appropriate.

Back exercises.

Explain red flag signs.

Review in 1 week if severe pain.

Review in 3-4 weeks in other cases.

Advise to return sooner if new or worse symptoms.

Not had physio in 6/12; had physio longer than 6/12 ago and helped;

or DNAed physio.

4 weeks

Symptoms persistent

Pain clinic

Review medications, physical activity, back exercises.

Assess for yellow flags.

Physiotherapy

Symptoms persistent

Symptoms resolved

Symptoms resolved

**Yellow flags**

Indicate psychosocial and work-related barriers to recovery that may increase the risk of long-term

disability and work loss.

***Emergency***: admission within hours

***Urgent***: referral within days

***Soon***: referral within weeks.

**Medications**

First choice Paracetamol; second choice NSAIDs or codeine as appropriate (side effects, contraindications).

Consider adding a short course of muscle relaxants (benzodiazepines) if muscle spasm is evident and problematic.

On-going need for opioid analgesia is an indication for assessment.

Tricyclic antidepressants (small dose) have a small to moderate effect in chronic back pain.