

Low back pain and sciatica overview

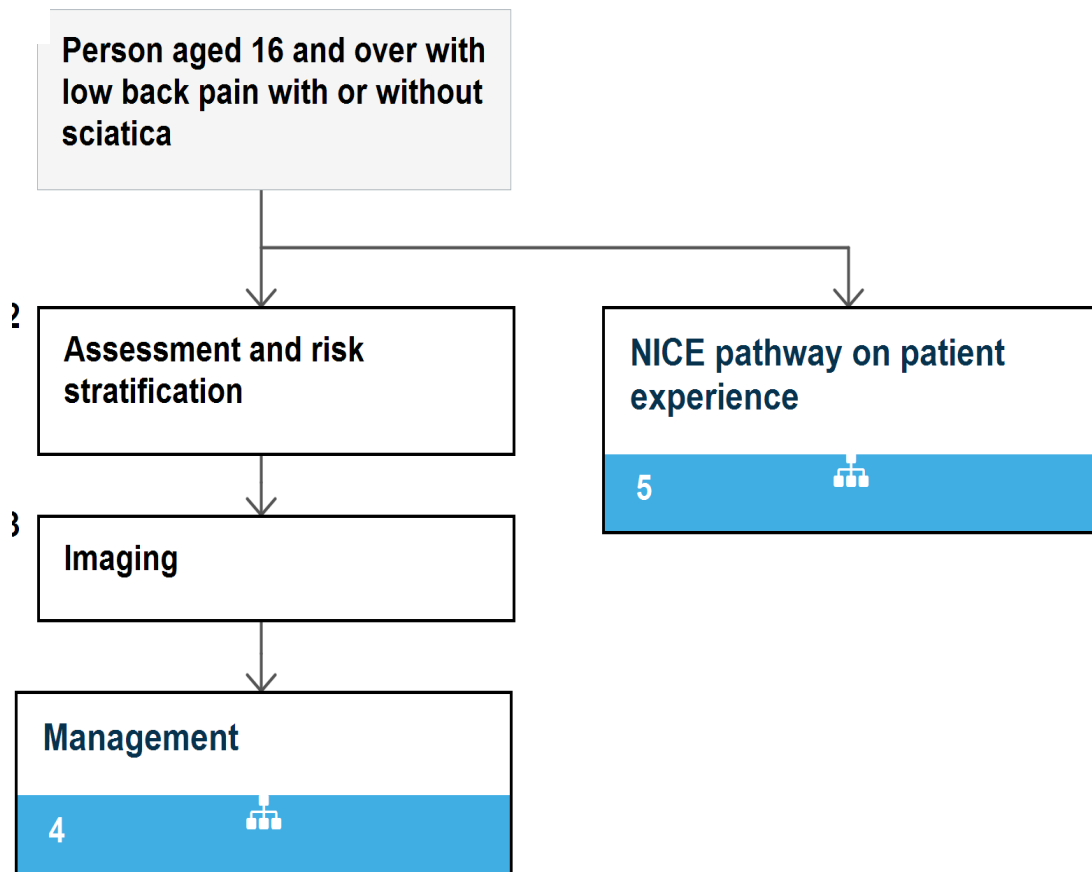
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<http://pathways.nice.org.uk/pathways/low-back-pain-and-sciatica>

Pathway last updated: 29 November 2016

This document contains a single pathway diagram and uses numbering to link the boxes to the associated recommendations.



1 Person aged 16 and over with low back pain with or without sciatica

No additional information

2 Assessment and risk stratification

Think about alternative diagnoses when examining or reviewing people with low back pain, particularly if they develop new or changed symptoms. Exclude specific causes of low back pain, for example, cancer, infection, trauma or inflammatory disease such as spondyloarthritis. If serious underlying pathology is suspected, refer to:

- the NICE pathway on [metastatic spinal cord compression](#)
- the NICE pathway on [trauma](#) for information on spinal injury
- [pain](#) in the NICE pathway on suspected cancer recognition and referral.

Consider using risk stratification (for example, the STarT Back risk assessment tool) at first point of contact with a healthcare professional for each new episode of low back pain with or without sciatica to inform shared decision-making about stratified management.

Based on risk stratification, consider:

- simpler and less intensive support for people with low back pain with or without sciatica likely to improve quickly and have a good outcome (for example, reassurance, advice to keep active and guidance on self-management)
- more complex and intensive support for people with low back pain with or without sciatica at higher risk of a poor outcome (for example, exercise programmes with or without manual therapy or using a psychological approach).

3 Imaging

Do not routinely offer imaging in a non-specialist setting for low back pain with or without sciatica.

Explain to people with low back pain with or without sciatica that if they are being referred for specialist opinion, they may not need imaging.

Consider imaging in specialist settings of care (for example, a musculoskeletal interface clinic or hospital) for people with low back pain with or without sciatica only if the result is likely to change management.

4 Management

[See Low back pain and sciatica / Managing low back pain and sciatica](#)

5 NICE pathway on patient experience

[See Patient experience in adult NHS services](#)

NSAIDs

non-steroidal anti-inflammatory drugs

PENs

percutaneous electrical nerve stimulation

TENs

transcutaneous electrical nerve stimulation

non-specific low back pain

Pain in the back between the bottom of the rib cage and the buttock creases. A diagnosis of non-specific low back pain simply means that the back pain is very unlikely to be because of a serious problem such as cancer, infection, fracture, or as part of more widespread inflammation.

Sources

[Low back pain and sciatica in over 16s: assessment and management](#) (2016) NICE guideline NG59

Your responsibility

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