

## Low back pain and sciatica overview

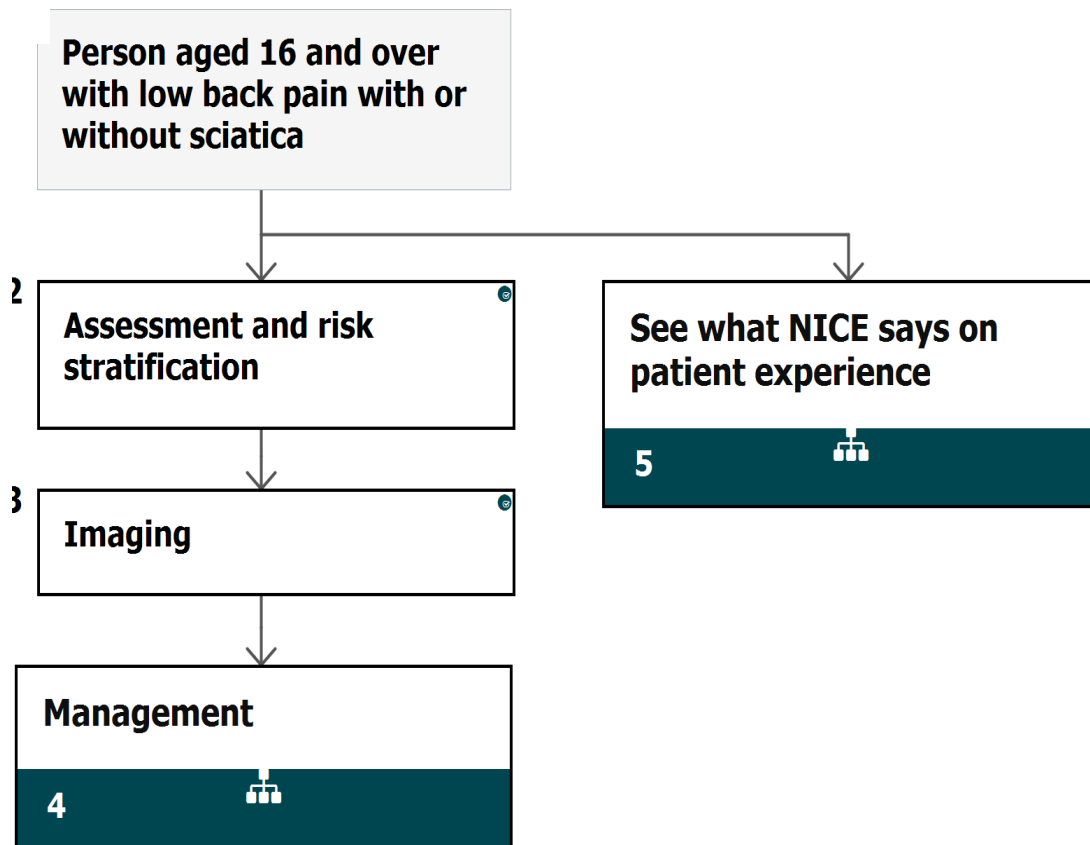
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

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

NICE Pathway last updated: 26 July 2017

This document contains a single flowchart 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 recommendations on:

- [metastatic spinal cord compression](#)
- [trauma](#) for information on spinal injury
- [pain](#) in relation to suspected cancer
- [spondyloarthritis](#).

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).

### Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

1. Risk stratification

### 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.

### Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

2. Referrals for imaging

### 4 Management

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

### 5 See what NICE says 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****Guidelines**

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They

should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### Technology appraisals

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### Medical technologies guidance, diagnostics guidance and interventional procedures guidance

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the

interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.