

Acute Low Back Pain *PainChecker*[®]

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Classify type of LBP New onset acute; Recurrent acute; Acute-on-chronic.

Leg pain present; Yes No

Red Flags (T.I.N.T)

Tumour (cancer history); Infection; Inflammation; Neurological; Trauma; Thoraco-lumbar-sacral MRI
 25 <Age> 60; Steroid history; IVDU; Surgical (AAA, renal, pancreas, pelvic, pregnancy). Blood tests (including CRP)

Neurological deficit

Radicular leg pain with Leg Weakness, Numbness, ↓ Ankle reflex. Urgent Thoraco-lumbar-sacral MRI
 Cauda equina syndrome (Bladder/Bowel dysfunction, Legs weakness; Saddle numbness). Neurosurgical review

Yellow Flags (CH.A.M.P.S) (Predicts chronic pain & disability)

Catastrophizing; Anxiety; Medically-focused; Passive-coping style; Stress; Substance or medication overuse
 Sick of work (dissatisfaction).

Analgesia (multimodal) (short term <5 days)

Paracetamol; Tramadol; Tapentadol; Celecoxib or NSAID gel (flare-ups); +/- muscle relaxant' (orphenadrine, baclofen diazepam).

Activity

Give them the 'green light to go.'
 Advise to stay active; 'Motion-is-lotion'; Keep moving; Keep working.
 Do not rest in bed (>2/7) (Level I) (General activity=exercise=physiotherapy)

Information: pain education & key messages

Set realistic outcomes; Emphasise functional goal;; Reassure; De-catastrophise; 'You don't need x-rays';
 'Hurt ≠ harm'; Visit *painHEALTH*[®] website; "Your prognosis is good."

Treatments

Heat Wrap (Level I).
 Manipulation? (<6/52) (Level I).
 Acupuncture? (in sub-acute phase only) (level II, NICE); TENS.
 Myofascial trigger-point LA injections (lumbo-sacral angles).

Radicular leg pain ("sciatica"?) suspected.
 Tramadol, Tapentadol, Pregabalin, Duloxetine (all poor efficacy).
 Watchful waiting: natural history is spontaneous *improvement* in <6 months.
 >2 weeks severe disability 2° radicular pain → CT/MRI confirmation → Transforaminal epidural steroid injection.

Urgent spinal decompression surgery (only done if cauda equina or severe radicular leg pain with neurological deficits)

Ongoing review → Recycle through the checklist.

Unknown benefits for ALBP: specific physiotherapy, acupuncture, pain programmes, biofeedback, psychology.

NO benefit for ALBP: spinal injections, systemic steroids.