A 43 year old man awoke a few hours ago with severe lower back pain, which radiates into his right buttock and is made worse by movement. He had been gardening the previous day.

What issues you should cover

● Are his symptoms due to a back problem? Back symptoms may also be due to pain referred from other organ systems (such as the abdomen, the vascular system, or the genitourinary tract) or a systemic illness.
● Be alert to the possibility of rare but potentially serious underlying causes. “Red flag” features include non-mechanical pain, thoracic pain (possible dissecting aneurysm), unexplained weight loss or history of carcinoma (possible metastases), fever (possible osteomyelitis), previous use of systemic corticosteroids (possible osteoporotic collapse), and presentation in patients aged less than 20 years or more than 55 years.
● Are nerve roots involved?
● Is there cauda equina syndrome? Indicative features are difficulty with micturition, loss of anal sphincter tone, faecal incontinence, saddle anaesthesia, and widespread or progressive motor weakness of the legs, sensory loss, or gait disturbance.
● Is the pain currently under control? Establish what treatments he has already tried and with what effect.
● Check for risk factors for chronic disorder. A history of back problems, pain radiating down the leg, poor physical fitness, and concurrent psychosocial or socio-economic problems increase the risk of chronic illness.

What you should do

● Examine him to differentiate between simple back pain, nerve root pain, possible serious spinal pathology, referred pain from other organ systems, and systemic disease.
● If he has symptoms of nerve root involvement, a more detailed motor, sensory, and reflex examination of his legs is warranted. If he has severe or progressive motor weakness refer him for orthopaedic (or neurosurgical) assessment.
● Cauda equina syndrome is a surgical emergency. Patients with indicative symptoms need urgent specialist assessment and, possibly, surgical neurodecompression.

Treatment

● Paracetamol: non-steroidal anti-inflammatory drugs
● Local ice or heat

Education

● Reassure patient and explain that symptoms should gradually improve
● Avoid recommending bed rest
● Exercise: initially, low stress aerobic exercise, such as walking

Useful reading


