



University Hospital Galway

EMERGENCY DEPARTMENT
GalwayEM.ie

Back Pain - Atraumatic

(<https://galwayem.ie/index.php/guidelines/trauma-and-musculoskeletal/back-pain-atraumatic>)

Category

[Trauma and Musculoskeletal \(https://galwayem.ie/index.php/guidelines/trauma-and-musculoskeletal\)](https://galwayem.ie/index.php/guidelines/trauma-and-musculoskeletal)

Acute back pain with neurological signs other than single root signs at L5 or S1

Ask advice

Acute prolapsed disc + unilateral L5 or S1 root signs

- X-rays are usually not needed
- Analgesia
- Mobilise as soon as possible with bed rest for as short a period as possible
- Refer to GP
- Occasionally patient may need admission because of severity of symptoms and/or lack of support at home.

Other acute back pain

- Analgesia (NSAID + /-paracetamol & codeine) See page 137
- No role for benzodiazepines
- Mobilise as soon as possible.
- Avoid rest if possible. If can't mobilise, rest for as short a time as possible
- Refer to GP

Chronic Back Problems

- If no urgent problem, refer to GP
- X-rays are rarely helpful

Spinal cord compression or Cauda equina syndrome

Suspect in any patient with pain radiating to both legs and /or difficulty urinating.

- Full neurological examination including PR to test sacral sensation and anal tone
- Ask senior ED advice re MRI
- Catheterise if in retention (beware of overflow incontinence)
- Refer orthopaedics

NB All patients with spinal problems must have full neurological examination

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