

# **Injections for Non-specific Back Pain without Sciatica**

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## VERSION CONTROL

<b>Version:</b>	3.0
<b>Ratified by:</b>	Governing Body Meetings in Common
<b>Date ratified:</b>	20 March 2019
<b>Name of originator/author:</b>	Joint CCG Clinical Commissioning Policy Development Group/NHS England
<b>Name of responsible committees:</b>	Clinical Quality and Governance Committee
<b>Date issued:</b>	1 April 2019
<b>Review date:</b>	March 2022

## VERSION HISTORY

<b>Date</b>	<b>Version</b>	<b>Comment / Update</b>
May 2012	1.0	Version 1 for PCT, May 2012
April 2013	2.0	Version 2.0 amended for CCG and approved on 4 April 2013
March 2019	3.0	Approved by Governing Body meetings in common

## Commissioning policy: Warwickshire North CCG (WNCCG)

### Evidence-Based Intervention Commissioning policy:

### Injections for Non-specific Back Pain without Sciatica

<b>Treatment</b>	Injections for Non-specific Back Pain without Sciatica
<b>Indication</b>	Low back pain
<b>Commissioning Position</b>	<p><b>Not funded</b></p> <p>Spinal injections of local anaesthetic and steroid should <b>NOT</b> be offered for patients with non-specific low back pain.</p> <p>For people with non-specific low back pain the following injections should <b>NOT</b> be offered:</p> <ul style="list-style-type: none"> <li>• Facet joint injections</li> <li>• Therapeutic medial branch blocks</li> <li>• Intradiscal therapy</li> <li>• Prolotherapy</li> <li>• Trigger point injections with any agent, including botulinum toxin</li> <li>• Epidural steroid injections for chronic low back pain or for neurogenic claudication in patients with central spinal canal stenosis</li> <li>• Any other spinal injections not specifically covered above</li> </ul>
<b>Treatment:</b>	<p>Radiofrequency denervation can be offered according to NICE guideline (NG59) if all non-surgical and alternative treatments have been tried and there is moderate to severe chronic pain that has improved in response to diagnostic medical branch block.</p> <p>Epidurals (local anaesthetic and steroid) should be considered in patients who have acute and severe lumbar radiculopathy at time of referral. Alternative and less invasive options have been shown to work e.g. exercise programmes, behavioural therapy, and attending a specialised pain clinic. Alternative options are suggested in line with the National Back Pain Pathway.</p>
<b>Diagnostic and Procedure Codes</b>	V544, A521, A522, A528, A529 <u>EBI:</u> A577, A735, V363, V368, V369, V382, V383, V384, V385, V386, V388, V389, V544, W903, G834, G551, M518, M519, M545, M549
<b>Equality Impact</b>	See NHS England Equality and Health Inequalities- Full Analysis Form