

Webinar on

OSTEOPOROSIS, ARTHRITIS AND MUSCULOSKELETAL DISORDERS

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Low back pain and sciatica in over 16s: Assessment and management (NG59)

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One of the greatest challenges with low back pain is identifying risk factors that may predict when a single back pain episode will become a long-term, persistent pain condition. When this happens, quality of life is often very low and healthcare resource use high. The health, social and economic burden of low back pain is well documented.

The audit had a distinctive objective to establish the extent to which our current practice complied with the validated NICE guidelines. Identifying risk factors that may predict when a single back pain episode will become a long term, persistent pain condition leading to quality of life often very low and healthcare resource use high

The data was collected through hospital records and E-care. The nature of the audit was a retrospective study. Patient data was further filtered based on the age group along with patients with clinical diagnosis of any acute spinal issues requiring treatment/management or back pain associated with any other ongoing medical/surgical issues. Different parameters of the current NICE guidelines for Low back pain and Sciatica in over 16s, Assessment and management were reviewed, and the extent of compliance evaluated with the current practice at MKUH.

NICE GUIDELINES	Results
1. Risk Stratification evaluated	0/42
2. Exercise program offered	10/42
3. Manual therapy offered	1/42
4. Psychological therapy offered	0/42
5. Facilitated/encouraged return to work or normal activities	1/42

There was a clear lack in compliance with the NICE guidelines. A lack of awareness regarding the NICE guidelines and the risk stratification tool was observed amongst the doctors. Based on the audit results several recommendations were made. Revision of Back pain leaflet and making sure leaflet is handed over on discharge. There was also a recommendation to develop a QR based format for the back pain leaflet. Involve Physiotherapy to facilitate the smooth running of the pathway with provision to referral to psychology and pain team as necessary. Working with GP's to create a multi team approach including coordination between GP, surgeries, hospital, physiotherapy & pain team.

Recent Publications:

1. Ali Amjad*, Ahmed Tarek Hafez, Adeel Nawab Ditta, and Waqar Jan. Synovial Pit of the femoral neck: a rare disease with rare presentations. Journal of Surgical Case Reports, 2020;6, 1–4
2. Butt A J, Zain-ur-Rehman M*, Tarek A, Ditta A N and Amjad A. Bariatric Orthopaedics: Impact of Obesity on Total Knee Replacement. EC Orthopaedics 11.10 (2020): 32-38
3. Maged Mohamed Mostafa. Locked Plating for Distal Femur Fractures, Is it a Good Option? Acta Scientific Orthopaedics 3.9 (2020): 10-17

Biography

Adeel is a gold medalist graduate with interest in Orthopedic Surgery along with medical education & International medicine. He is aspiring Orthopedic trainee with interest in sports medicine. He has been involved in multiple projects from days of medical school with a wide variety of projects from descriptive studies to national multi center-trials. Currently, he is leading quality improvement project in his trust aiming to conduct national levels multi center two arm trails to formulate standard guideline.

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