



Calderdale and Huddersfield

NHS Foundation Trust

Patient Information Leaflet

Back Pain - Patient Information Leaflet – Same Day Emergency Care (SDEC)

Following your visit to the Same Day Emergency Centre, you have been diagnosed with back pain (pain affecting the muscles, ligaments or structures of the back).

What is back pain?

Back pain is one of the most common reasons people seek medical attention. Most back pain is called "non-specific" or "mechanical" back pain, meaning there is no serious underlying cause. It often comes from strain or irritation of the muscles, ligaments or small joints of the spine. The good news is that most back pain improves within a few weeks, even without treatment.

What causes back pain?

In many cases, there is no single clear cause. However, the following can contribute to or increase your risk of back pain:

- Lifting heavy objects awkwardly or with poor technique.
- Sudden twisting or bending movements.
- Long periods of sitting or standing, especially with poor posture.
- Being overweight, which puts extra strain on the back.
- Not being physically active or having weak core muscles.
- Stress and poor sleep, which can make pain feel worse.
- Age-related changes to the discs and joints of the spine.
- Occasionally, a disc in the spine can bulge or press on a nerve, which can cause pain travelling down the leg (known as sciatica).

What are the treatment options for back pain?

- Keep moving - Staying active is one of the most important things you can do. Bed rest for more than a day or two can make back pain worse and slow recovery. Gentle activity such as walking and normal daily tasks usually helps.
- Pain relief - Simple painkillers can help you stay active while your back heals. Options include:

Paracetamol - safe for most people when taken as directed.

Non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen or naproxen - these can reduce pain and inflammation but are not suitable for everyone (for example if you have stomach problems, kidney problems or certain heart conditions).

Short courses of stronger painkillers may be considered if simple options do not help. Your team will discuss these with you.

- Heat or cold - A warm bath, hot water bottle or cold pack applied to the painful area can give short-term relief. Make sure you protect your skin from direct contact to avoid burns.
- Physiotherapy - If pain persists beyond a few weeks, physiotherapy can help. A physiotherapist will show you exercises to strengthen your back and improve your posture. Many areas offer self-referral to physiotherapy.
- Return to normal activity - Aim to return to your usual activities, including work, as soon as possible. Staying off work for long periods often delays recovery. Your team can help you plan a gradual return if needed.

Sometimes other options may be considered, including:

- Imaging (such as an MRI scan) - this is not routinely needed for most back pain but may be arranged if there are specific concerns or your symptoms are not settling.
- Injections or specialist referral - these are reserved for persistent pain with specific causes, following assessment by a spinal specialist.

What are the complications to be aware of regarding back pain?

Most back pain settles without any lasting problem. However, there are some rare but serious conditions that can present with back pain and need urgent attention.

Cauda equina syndrome (CES) - This is a rare but serious condition where the nerves at the bottom of the spine are compressed. It needs urgent treatment to prevent permanent nerve damage. Warning signs include “saddle area” numbness (detailed below), loss of bowel/bladder control, weakness in legs.

Persistent or chronic pain - A small number of people experience back pain that lasts for several months. Support from physiotherapy, pain management services and your GP can help.

Side effects of medication - Painkillers can cause side effects. NSAIDs may irritate the stomach – sometimes you may need a stomach protection medication alongside it. Stronger painkillers can cause drowsiness or constipation. Take them only as directed and for the shortest time needed.

What should I do if I have any concerns regarding my diagnosis or any complications?

Please seek immediate medical attention by attending A&E or calling 999 if you experience:

- New numbness around your bottom, genitals or inner thighs (saddle area)
- Loss of control of your bladder or bowels, or difficulty passing urine
- Severe weakness in one or both legs
- Back pain alongside a high fever, unexplained weight loss or a history of cancer
- Back pain following a significant injury such as a fall or road traffic accident.

Please contact our SDEC department if you:

- are unsure what medication you need to take
- are unsure about what follow-up appointments you may need
- are confused about your diagnosis.

Please contact your GP if you:

- have pain that is not improving after a few weeks
- would like a physiotherapy referral
- have any issues with your prescription.

Contact information

If you have concerns after leaving SDEC, please contact:

SDEC / Hospital Advice Line: _____

GP: _____

Out of hours: NHS 111

In an emergency, call 999.

