



**Coventry and
Warwickshire**
Integrated Care Board

Injections for Non-Specific Back- Pain (without) Sciatica Policy

Reference Number:	This will be applied to all new ICB-wide PPSs by the Governance and Corporate Affairs Team and will be retained throughout its life span.
Version:	Version 1.0
Name of responsible Committee and date approved or recommended to Integrated Care Board Board:	Audit Committee
Date approved by the Integrated Care Board (if applicable):	1 July 2022
Next Review Date:	1 April 2025
Expiry Date:	1 October 2025
Name of author and title:	Lucy Dyde
Name of reviewer and title:	Ali Cartwright
Department:	Corporate Office

VERSION HISTORY

Date	Version	Changes made to previous version	Consulting and Endorsing Stakeholders, Committees / Meetings / Forums etc.

Treatment	Injections for Non-specific Back Pain without Sciatica
Indication	Low Back Pain
Commissioning Position	<p>Not funded</p> <p>Spinal injections of local anaesthetic and steroid should NOT be offered for patients with non-specific low back pain.</p> <p>For people with non-specific low back pain the following injections should NOT be offered:</p> <ul style="list-style-type: none"> • Facet joint injections. • Therapeutic medial branch blocks. • Intradiscal therapy. • Prolotherapy. • Trigger point injections with any agent, including botulinum toxin. • Epidural steroid injections for chronic low back pain or for neurogenic claudication in patients with central spinal canal stenosis. • Any other spinal injections not specifically covered above.
Treatment:	<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>
Diagnostic and Procedure Codes	<p>V544, A521, A522, A528, A529</p> <p><u>E</u>BI: A577, A735, V363, V368, V369, V382, V383, V384, V385, V386, V388, V389, V544, W903, G834, G551, M518, M519, M545, M549</p>
Equality Impact	https://www.england.nhs.uk/evidence-based-interventions/