

Low Back Pain and Sciatica Policy

Policy

1. **NWL CCGs do NOT commission the following for low back pain and non-radicular spinal pain:**
 - a. Facet joint injections
 - b. Therapeutic medial branch blocks
 - c. Intradiscal therapy
 - d. Prolotherapy
 - e. Trigger point injections with any agent, including botulinum toxin
 - f. Epidural steroid injections for chronic low back pain or for neurogenic claudication in patients with central spinal canal stenosis
 - g. Any other spinal injections not specifically covered above
2. **NWL CCGs fund epidurals (local anaesthetic and steroid) only in patients who have less than three months history of acute and severe lumbar radiculopathy at time of referral.**
3. **NWL CCGs will NOT fund Spinal fusion or lumbar disc replacement for low back pain. Surgical procedures for specific causes of LBP e.g. spondylolisthesis, scoliosis or severe structural disease are routinely funded where clinical indicated.**
4. **NWL CCGs recommend that imaging should not routinely be offered in a non-specialist setting for people with low back pain with or without sciatica.**

Funding may be considered through the Individual Funding Request Route (IFR) in exceptional clinical circumstances.

Please note that there are dedicated policies for Acupuncture and Radiofrequency Denervation.

These policies have been approved by the eight Clinical Commissioning Groups in North West London (NHS Brent CCG, NHS Central London CCG, NHS Ealing CCG, NHS Hammersmith and Fulham CCG, NHS Harrow CCG, NHS Hillingdon CCG, NHS Hounslow CCG and NHS West London CCG).

References

NICE Clinical Guidelines

- <https://www.nice.org.uk/guidance/ng59>

Latest version of the policy is available at:

<http://www.hounslowccg.nhs.uk/what-we-do/individual-funding-requests.aspx>
Version 4.1 (July 2017)