

# Back pain and sciatica - pain medication

## What can I do to help myself if I get back pain or sciatica?

There is a lot you can do to manage your back pain, or radiating, nerve related leg pain (often called sciatica).

In order to increase your levels of physical activity and return to doing the things that are important to you, you may find it useful to use some simple pain medication. This will improve the control of your pain and assist your rehabilitation.

## What medication should I use?

The (2016) NICE (National Institute for Health and Care Excellence) back pain and sciatica guidelines recommend discussing NSAIDs (non-steroidal anti-inflammatory) such as Ibuprofen with your GP or pharmacist as the first line medication to try.

If regular NSAIDs don't provide enough pain relief, your doctor or pharmacist may suggest a mild opiate-based painkiller, such as codeine, which is most effective when taken with paracetamol, or a NSAID.

For some people with sciatica, your GP may recommend you try either amitriptyline, a medication traditionally used in the treatment of depression, or a medication used to treat epilepsy. Each of these can be used to treat pain caused by nerve sensitivity or nerve damage, such as shingles, diabetes nerve pain and sciatica. It appears that they can have a dampening down effect on the sensitivity of nerve related pain. This may be appropriate for you if your pain is persisting despite using first line medication like ibuprofen and codeine. Amitriptyline helps about 30 per cent of people with nerve pain.

Your doctor or pharmacist will talk with you about which medication is the best option for you. This will depend on the likely side effects of the drugs, whether you have had any problems with them before, and also your own preference.

## How should I use medication?

Your doctor or pharmacist will also discuss with you how you should take the medication, and how long you should continue using it. However, it is worth remembering that pain medication is more effective if used regularly during the early stages of low back pain and within the prescribed dose. This is better than using it occasionally, just when your pain has got too much to bear.

## Won't pain medication mask my pain?

People are often concerned that using pain medication will mask helpful pain signals. However these concerns are not backed up by recent research. When people have high levels of poorly controlled pain, they tend to move in a more guarded way, often avoiding physical activity. Over time this may slow their return to normal activity, and increase back stiffness and weakness, even leading to more, longer term pain and disability.

By improving the control of pain in the early stages of a back pain and sciatica episode, people tend to increase their activity levels and back fitness. This enables them to return more quickly to the things that are important to them. Used as a part of the rehabilitation tool-kit, pain medication may actually promote the speed of your recovery.

## Is medication safe?

The aim of taking pain medication is to improve your quality of life and aid your return to normal activity. However, people are often concerned about the possible side effects of using pain medication.

It is vital that you take the time to talk with your GP or pharmacist about the medication they suggest for you, and any side effects that you should know about.

**NSAIDs:** These are recommended as the first medication of choice. Your doctor or pharmacist will advise you about whether you are at risk of side effects from NSAIDs (such as ibuprofen, diclofenac).

**Mild Opiate based Painkillers:** If NSAIDs are not effective your doctor or pharmacist may advise you to take a mild opiate based painkiller such as codeine in addition to the NSAID or with paracetamol.

**Amitriptyline.** The dose recommended for the treatment of pain starts at 10mg once a day, this is significantly less than the dose used to treat depression.