

Sciatica (nerve root pain)

Your physiotherapist has diagnosed you with sciatica. This booklet gives information on the common causes and how physiotherapy can help. If you have any questions, please speak to your physiotherapist

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What is sciatica?

It is a nerve irritation in the back causing leg pain that can extend to the foot and toes. The leg pain is often worse than back pain. You can also have numbness and/or pins and needles as well as pain. In some cases it can cause weakness in the foot or leg. A few (5 in 100) people will develop sciatica. Even though it can be extremely painful, it is rarely associated with serious disease.

Other types of back pain

Other types of back and back-related leg pain include:

- (most common) non-specific low back pain
- (rare) serious spinal pathology (red flags).

Non-specific low back pain

This is the most common (95 cases in 100) type of back pain. It is not possible to diagnose the exact cause of the pain in most people suffering from back pain.

Serious spinal pathology (red flags)

In rare (less than 1 in 100) cases, back and leg pain is caused by a condition that requires urgent medical attention. If you experience any of these symptoms it is important that you alert your GP or another medical professional immediately:

- inability to pass urine
- numbness around the genital region or back passage
- loss of feeling, pins and needles or numbness in both legs
- significant unexplained weight loss
- a fever (high temperature) or feeling unwell.

You should also tell your GP or your physiotherapist if you have a history of trauma or cancer.

Your physiotherapist will ask you questions and perform a physical examination to discover if there is a more serious cause for back and leg pain before making a diagnosis of sciatica.

What causes sciatica?

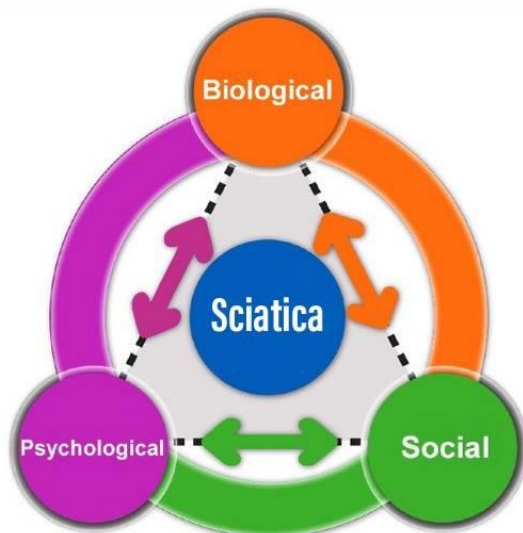
Sciatica is often caused by physical compression (squeezing) and/or inflammation of one of the nerve roots in the lower back. These nerves are responsible for feeling and strength in the leg, which is why sciatica is felt in the leg. However, nerve pain can be influenced by other contributory factors.

Contributory factors

There might be many different factors that can influence how much pain you feel, the effect pain has on your wellbeing and how you deal with it. These factors include biological (physical), psychological (how you think and feel), and social (your lifestyle and environment). These factors will be unique to you and your situation. Below are a few examples.

Relationship between biological, psychological and social factors

Each of these factors can have an effect on how the pain feels for you, and on the other two factors.



Structural

A disc bulge or age-related changes of the spine can lead to a narrowed space where the nerve leaves the spine. This can cause physical compression and/or inflammation of the nerve root. It is common to see disc bulges and aging of joints in MRI scans of people who do not have any back pain or sciatica. Disc bulges and aging of joints are considered a normal part of aging and not always associated with pain.



Physical activity

Poor fitness and low levels of physical activity can affect your body's ability to cope with pain or manage daily physical tasks. There is no one form of exercise that is proven to be better than another, so do what you enjoy and try to do it regularly.



Emotional wellbeing (mood, anxiety, stress)

It is normal when living with pain, to notice changes in your mood. Even though your pain is a physical sensation, it can be affected by how you are feeling. Low mood, anxiety, stress and pain often happen together. This can make it more difficult to manage your pain on a day-to-day basis.



Being worried, anxious or stressed about your low back pain and sciatica can cause physical changes to your body, such as your heart beating faster, muscles tightening and increased sweating. Feeling low, stressed or worried can release chemicals in your brain and body that may increase the amount of pain you feel.

If you are feeling low, anxious or stressed about your sciatica, it is important to mention it to your GP or physiotherapist so that you can get help and take steps to deal with it as soon as possible.

South London and Maudsley NHS Trust's Improving access to psychological therapies (SLaM IAPT) team provide easy access to talking therapy in Croydon, Lambeth, Lewisham, and Southwark. You can self-refer here, [w: wslam-iapt.nhs.uk/self-referral/](https://wslam-iapt.nhs.uk/self-referral/)

Attitude and beliefs

Your attitudes and beliefs about your pain play a very important role in helping you manage it successfully. For instance, many people feel that it is unsafe to move and do normal activities when they have pain. Trying to protect your back by not moving often slows your recovery and may make your pain worse.



Sleep quality

Sleep is an essential part of feeling well and happy. Not getting enough sleep, having less good quality sleep, and feeling tired, can contribute to pain. It is important to relax before bedtime, and have a good night's sleep.



Comorbidities (other health problems)

There appears to be a relationship between other medical conditions (such as diabetes, hypertension, respiratory (breathing) and cardiovascular (heart) disease) and sciatica. Improving your overall health can have a positive impact on your symptoms.



Weight

There is a link between being overweight and sciatica. Excess weight can increase the physical demands on the body and contribute towards low grade inflammation.



Smoking

Smoking increases the risk of developing over 50 serious health conditions including cancer, heart disease and stroke. Research has also identified smoking has a link with low back pain and sciatica. If you would like to give up smoking, please discuss with your physiotherapist.



What is the prognosis of sciatica?

Most people will recover from an episode of sciatica in 6-12 weeks without any active treatment. However, it is common for it to come back. A third of people have another episode of sciatica within a year. For some people, sciatica can also be a long-lasting condition. Trying to maintain mental wellbeing, a healthy, physical lifestyle and a positive outlook can improve your ability to cope during a flare up, and improve your chance of a successful recovery.

How is sciatica managed?

Keeping as active as possible can help you recover and get back to doing the things that are important to you. Resting and avoiding any painful activities for more than a day or two might prolong pain.

Pain medication and anti-inflammatory medication can help you to get back to your usual activities. Your GP can guide you on the best medication to take, which may be ones specifically for nerve pain.

If pain continues after 12 weeks, it can be helpful to discuss your pain with someone who specialises in managing low back pain and sciatica, such as a physiotherapist.

How will physiotherapy help?

Physiotherapy might have an important role to play in managing your sciatica.

Your physiotherapist will talk with you to understand your history. A detailed physical examination can be helpful to guide treatment towards your needs and goals. Your physiotherapist will discuss with you any particular concerns that you may have.

There is no one treatment that works for everyone. However, exercise may form an important part of your recovery. Your physiotherapist may prescribe exercises to improve your fitness, confidence in movement, mobility and strength. Exercise can also reduce stress and tension, improve mood and quality of sleep and help support you getting back to normal activity.

Are there other options to manage sciatica?

Yes, there are. Please speak to your physiotherapist if you want to discuss these options.

Pacing your exercise and activity

Sometimes people find their pain can increase when they start to exercise again, or if they do too much exercise in one session. If trying to be more active leads to pain that is not tolerable, it can be helpful to pace your activity.

Recognise how much you have managed to do recently, and use this as a starting place. Try to reduce tasks in to smaller, manageable chunks, giving yourself rest periods between activities. Then try to gradually build activity up overtime.

Work

Staying at work and/or returning to work quickly has been shown to speed up recovery.

If your work involves activities that make your pain worse, it is important that you let your work manager (or your occupational health department) know that you may need some help to continue with your normal duties. It may be possible to modify your work activities for a short while to get you back to your usual work sooner.

Relaxation

Many people find that simple relaxation techniques are a helpful tool in managing pain and stress that is related to sciatica. Your physiotherapists can talk to you about these techniques.

You might find it helpful to put aside some time each day to practice. If you find that something else works better for you, such as reading, singing or lying in a hot bath, do that instead!

Do you need an X-ray or MRI scan?

X-rays are not needed to assess low back pain and/or sciatica (unless a fracture is suspected).

MRI scans give a very detailed picture of the spine and might form part of the assessment process, but they are not as important as detailed questions and a physical examination.

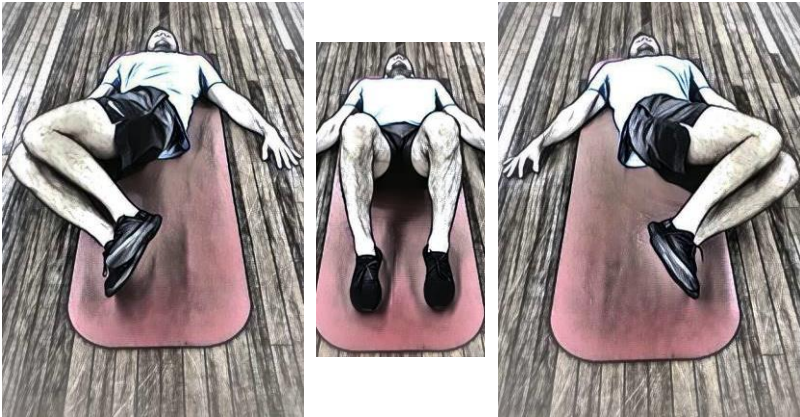
MRI scans do not reflect the degree of pain that people experience. It is common to see age-related changes (to discs and joints) and disc bulges in people with and without sciatica. There is a weak link between what is seen on an MRI scan and the pain people feel. MRI scans for sciatica do not speed up recovery and are not needed to plan your physiotherapy treatment.

As most cases of sciatica improve in the first 6-12 weeks without treatment, MRI scans are not needed or recommended in the early stages. An MRI scan might be considered if the sciatica is not improving on its own or with physiotherapy. This can help us to decide on other, more invasive options such as injections or surgery.

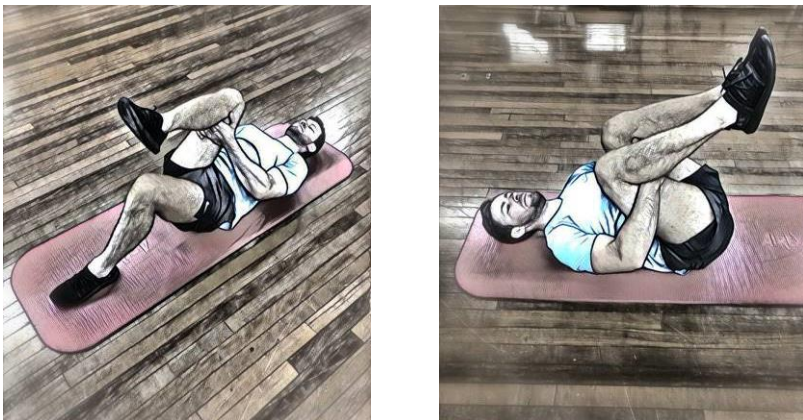
Exercise examples in pictures

Below are a few exercises that can be used early on to help you get moving. If you need any more information about these exercises, please speak to your physiotherapist.

Knee rolls



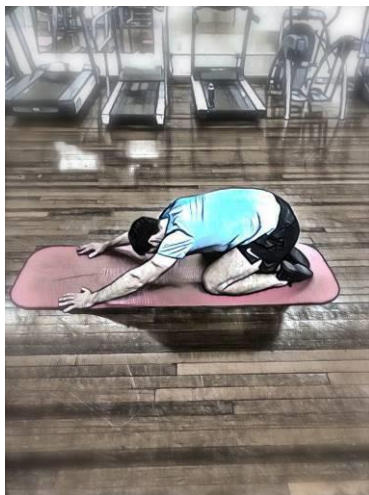
Knee hugs – one leg or two legs



Back extensions – on forearms or hands



Bottom to heels stretch



Squat



Information on free or reduced cost local facilities

There are initiatives in your local area to help you get active.

Southwark

Free Gym and Swim for Southwark residents at Southwark leisure centres,

w: www.southwark.gov.uk/leisure-and-sport/free-swim-and-gym

Older adults free sport and physical activity,

w: www.southwark.gov.uk/leisure-and-sport/local-sport-and-physical-activities?chapter=3

Southwark Exercise referral scheme (via GP referral),

w: www.southwark.gov.uk/health-and-wellbeing/public-health/for-the-public/being-active?chapter=3

Lambeth

Lambeth Early Intervention and Prevention Services (LEIPS) information – including the Exercise referral scheme (via GP referral),

w: www.guysandstthomas.nhs.uk/our-services/leips/patients.aspx#na

Reduced Better Gym membership in Lambeth,

w: www.lambeth.gov.uk/leisure-parks-and-libraries/sports-and-leisure/apply-for-a-real-plus-leisure-card

Find your local Lambeth leisure centre,

w: www.lambeth.gov.uk/leisure-parks-and-libraries/map-of-leisure-centres

Useful sources of information

Versusarthritis (previously Arthritis Research UK),

w: www.versusarthritis.org/about-arthritis/conditions/back-pain/

Chartered society of physiotherapy (CSP) – 10 things to know about your back,

w: www.csp.org.uk/publications/10-things-you-need-know-about-your-back

National Institute for Health and Care Excellence

(NICE) – low back pain and sciatica in over 16s: assessment and management,

w: www.nice.org.uk/guidance/ng59

Contact us

If you have any questions, please contact your physiotherapist

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For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit **w:** www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline. **t:** 020 7188 8748, Monday to Friday, 9am-5pm

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints)

e: complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch.

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk



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