



DANISH HEALTH  
AUTHORITY

NATIONAL CLINICAL GUIDELINE FOR  
THE TREATMENT OF RECENT  
ONSET LOW BACK PAIN

2016

# NATIONAL CLINICAL GUIDELINE FOR THE TREATMENT OF RECENT ONSET LOW BACK PAIN

## Quick guide

| Information about physical activity |  |
|-------------------------------------|--|
| ↑                                   | Consider offering patients with recent onset low back pain advice about staying active rather than advice about rest (⊕⊕○○).   |
| Individualised patient education    |  |
| ↑                                   | Consider offering individualised patient education in addition to usual care in patients with recent onset low back pain and the ability to increase self-efficacy (⊕○○○).   |
| Targeted intervention               |  |
| √                                   | It is not good practice to routinely offer targeted treatment in patients with new onset low back pain in addition to usual care over usual care, as the effect is unknown (⊕○○○).   |
| Diagnostic imaging as intervention  |  |
| ↓                                   | Do not routinely offer imaging (MRI or X-ray) to patients with recent onset low back pain, as the evidence does not support a positive effect (⊕○○○).  |
| Passive treatments                  |  |
| ↑                                   | Consider offering spinal manual therapy as an add-on to the usual treatment to patients with recent onset low back pain (⊕⊕○○).  |
| ↓                                   | Acupuncture as an add-on to the usual treatment should only be offered to patients with recent onset low back pain upon due consideration, since the beneficial effect is uncertain (⊕○○○).  |
| Active treatments                   |  |
| ↑                                   | Consider offering supervised exercise as an add-on to the usual treatment to patients with recent onset low back pain (⊕⊕○○).  |
| Pharmacological treatment           |  |
| ↓                                   | Paracetamol should only be offered to patients with recent onset low back pain as an add-on to the usual treatment upon due consideration, since there is no documentation of a beneficial effect 0-12 weeks after completed treatment (⊕⊕⊕○). |
| ↓                                   | Opioids should only be offered to patients with recent onset low back pain as an add-on to the usual treatment upon due consideration, since there is no documentation of a beneficial effect 0-12 weeks after completed treatment (⊕⊕○○).     |
| ↓                                   | NSAIDs should only be offered to patients with recent onset low back pain as an add-on to the usual treatment upon due consideration, since there is no documentation of a beneficial effect 0-12 weeks after completed treatment (⊕⊕○○).      |

## About the quick guide

This quick guide contains the key recommendations from the national clinical guideline for the treatment of recent onset low back pain. The guideline was prepared by the DHA.

The national clinical guideline focuses on patients over the age of 16 with recent onset non-specific pain in the low back and/or buttocks (the anatomical region from Th12 to the inferior gluteal fold) with or without radiation to the legs. Recent onset pain is defined as pain of up to 12 weeks' duration irrespective of whether the patient has a history of low back pain or not.

Thus, the guideline contains recommendations for selected parts of the field only and therefore must be seen alongside the other guidelines, process descriptions etc. in this field.

The recommendations are preceded by the following indications of their strength:

- ↑↑ = a strong recommendation for
- ↓↓ = a strong recommendation against
- ↑ = a weak/conditional recommendation for
- ↓ = a weak/conditional recommendation against

The symbol (√) stands for good practice. This symbol is used in case of lack of evidence, when the working group wants to emphasise particular aspects of the established clinical practice.

The recommendations are followed by the following symbols which indicate the strength of the underlying evidence – from high to very low:

- (⊕⊕⊕⊕) = high
- (⊕⊕⊕○) = moderate
- (⊕⊕○○) = low
- (⊕○○○) = very low

In case of lack of evidence, a recommendation is not followed by a symbol. This applies to the good practice recommendations.

---

### **Further information at [sundhedsstyrelsen.dk](http://sundhedsstyrelsen.dk)**

At [sundhedsstyrelsen.dk](http://sundhedsstyrelsen.dk), a full-length version of the national clinical guideline is available, including a detailed review of the underlying evidence for the recommendations.

---

### **About the national clinical guidelines**

The national clinical guideline is one of the 47 national clinical guidelines to be prepared by the DHA during the period 2013-2016.

Further information about the choice of subjects, method and process is available at [sundhedsstyrelsen.dk](http://sundhedsstyrelsen.dk).

---