



United Kingdom Spine Societies Board

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UKSSB POSITION STATEMENT ON ANTIBIOTICS AND LOW BACK PAIN

There has been much interest in the National Press following a paper published by a research group in Denmark about patients with a particular type of chronic low back pain treated with antibiotics.

- In a randomised controlled trial, patients treated with antibiotics improved significantly compared with controls (no antibiotics) (a 100-day course of antibiotics (amoxicillin/clavulanate 500mg/125mg).
- The trial was well conducted, but not large enough to be completely robust.
- This is an important research finding that merits further study as soon as possible.
- It must be recognised that a single trial does not produce sufficient weight of evidence to change current practice.

The trial was undertaken in a very specific group of patients as follows:

- Lumbar intervertebral disc prolapse proven on MRI scan and who have had insufficient benefit from either conservative or surgical treatment within the previous 6-24 months.
- Significant low back pain of at least 6 months duration initiated or significantly exacerbated following the disc prolapse.
- The presence of modic type I changes on MRI scan adjacent to the involved disc (high intensity T2, low intensity T1).

The Position

- Such a prolonged course of broad spectrum antibiotics carries risks of complications in the individual and risk of antibiotic resistance in the community. The evidence is NOT yet strong to recommend a long-term course of antibiotics in patients fulfilling these criteria.
- Antibiotics are only indicated if there is clear evidence of active infection in the intervertebral disc or vertebrae. A treatment plan should be developed by a spinal specialist and a specialist in infectious diseases.
- Steps are being taken to undertake further research both in the UK and elsewhere to confirm or deny the findings of this study.
- The evidence is not yet strong enough to recommend this treatment routinely for patients with chronic back pain.

This position statement will be regularly reviewed.

Professor Jeremy Fairbank

Chair - United Kingdom Spine Societies Board

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