

Inflammatory Back Pain

- **Definition:**
 - Persistent low back pain (>3 months), with prolonged early morning stiffness (>30 minutes), improvement with exercise, nocturnal waking with onset at age <45 years
- **Differential diagnoses** to consider:
 - Ankylosing spondylitis, other spondyloarthropathies
- **Priority:** Category 2
- **Urgent:**
 - contact with the Rheumatology Registrar at RGH or FMC if red flag features are present. If unavailable, contact the medical registrar on call.

Information Required

- Specific nature of symptoms
- Duration of symptoms
- Associated symptoms eg. Uveitis, psoriasis, peripheral joint inflammation, features of inflammatory bowel disease
- Weight and BP
- Family history of rheumatological disorder, psoriasis or other autoimmune condition
- Treatments used/opinions sought thus far

Investigations Required

- ESR, CRP
- U&E's, LFT's, urate, Ca, CBP
- Lumbar spine and sacroiliac joint X-rays (consider gonadal radiation exposure)

Fax Referrals to Rheumatology Outpatients

Flinders Medical Centre (FMC)	Fax: 8204 6105 (Clinic B)
Repatriation General Hospital (RGH)	Fax: 8374 2591 (GP liaison)

Red Flags

- Acute onset, fever, constitutional symptoms and disc or unilateral sacroiliac (SI) joint pain (septic discitis and SI septic arthritis are very uncommon)

Suggested GP Management

- NSAIDs for symptom management unless contraindicated
- Physiotherapy for prescription of stretching/ROM exercises

Clinical Resources

- www.rheumatology.org and follow the links to clinical practice guidelines
- www.rheumatology.org.au/community/PatientMedicineInformation.asp

General Information to assist with referrals and the and Referral templates for FMC and RGH are available to download from the SALHN Outpatient Services website www.sahealth.sa.gov.au/SALHNoutpatients

Version	Date from	Date to	Amendment
1.0	August 2014	August 2016	Original