

Clinical case presentation: Low back pain with radicular pain syndrome

Workshop's goal: *theatrical presentation* of Practical Guide for Clinicians

Participants : Moderator – Dr. Shklar Benzion , Director of Pain Clinic, Kaplan Hospital;
Dr Simovich- Family physician;
Dr. Goldman Raphael, DC – Chiropractor Dr., Pain Clinic, Rambam Hospital;
Dr Goor-Aryeh Itay - Director of Pain Clinic Tel Ha-Shomer Hospital;
Dr . Mirovsky Yigal –Orthopedic and Back surgeon (Head of spine unit, Assaf Harofeh medical center, Zerifn

In the introduction the moderator emphasizes that chronic spinal pain is the leading cause of occupational disability in Americans below the age 45. Economic toll of back pain exceeds \$ 16 billion in costs dedicated to therapeutic and /or management intervention.

The moderator presents the patient that suffers Low back pain syndrome due to Radiculopathy due to herniated disc at level L4-5 with involvement of S1 nerve and describes the medical history and clinical symptoms of the disease.

He has to be evaluated by different doctors: Family physician, Chiropractor, Pain specialist, Back surgeon and each one of them has to relate to diagnosis and give recommendations - Methods of evaluation, Methods of Treatment and other.

From the beginning the patient is evaluated by the family physician Dr. Symovich and she explains how she evaluates the patient and recommends the treatment according to practical guidelines.

According to her recommendation the patient goes to the chiropractor. Dr. Goldman, who evaluates the patient as it is common in chiropractic practice, and gives him the chiropractic treatment.

Despite the medical and chiropractic treatment the patient continues to suffer pain, and the family doctor recommends that to the patient should go to a pain clinic. In the pain clinic the patient was evaluated by Dr. Gur Arie and received different treatments such as epidural steroid injections, selective nerve root blocks, Radiofrequency lesion of Dorsal root ganglions, Coblation and other treatments, but with only short-term effect as the pain returned to the patient after every treatment. The pain specialist decides that the patient needs to be assessed by a Back surgeon.

In the orthopedic clinic the patient was evaluated by Dr. Mirovski. A very big protrusion of the herniated disc was found and the patient was recommended to undergo the operative treatment...

The patient passed the laminectomy with discectomy, but in postoperative period his condition didn't improve, and failed back syndrome was diagnosed. The back surgeon decides that the patient has to be treated in pain clinic and sends the patient back to the pain clinic for further treatment.

The pain specialist evaluates again the patient, and proposes to introduce into the epidural space a spinal cord stimulator. This method of treatment helps the patient, his condition is better and he returns to his workplace.

During the workshops the participants explain their point of view as to how to evaluate and treat the patient with low back pain and radicular syndrome according to guidelines currently common in the literature and in practice.