



Pattern 3: Constant Leg Dominant Pain

Descriptive Symptoms

- Leg dominant pain: felt most intensely below the gluteal fold above or below the knee.
- Pain is **always constant**.
- Neurological symptoms *must* be present

Findings on Objective Assessment

- Neurological examination must be positive for either an irritative test or a newly acquired focal conduction deficit.

Initial Treatment

NOTE: Pattern 3 will not respond to exercise. Treatment consists of prescribed REST positions. Track progress over six weeks (Neurological deficit beyond seven days does not happen unless it is Cauda Equina Syndrome).

1. Reassure patient. Provide patient with *Back Pain: Patient Information* and *Pattern 3: Patient Handout*
2. Instruct patient to follow appropriate treatment schedule: position, pharmacology and adjunct therapies.

Positions:

Basis of treatment is scheduled rest: 20-40 minutes every hour

- "Z" lie
- Prone lying on pillows
- Prone lying on elbows
- Rest on hands and knees
- Lumbar support
- Night roll

Typical Therapy Options:

Pharmacologic Therapy

- Acetaminophen
- NSAIDS
- Tramadol, Opiods

Non-Pharmacologic (Adjunct) Therapy

- Massage
- Acupuncture
- Apply Ice/Heat
- Progressive Relaxation
- Professionally administered invasive therapies
- Spinal Manipulation(if there is no inflammation)

Follow Up: One to two weeks after beginning therapy

1. Assess treatment response

- Assess pain medication and treatment modalities
- Assess improvement:
 - Better = decreased leg pain
 - Worse = increased leg pain

2. Has there been clinical improvement?

Significant Improvement

- Focus on symptom reduction for up to six weeks.
- Pain should begin to resolve within four weeks
- Once leg symptoms become intermittent or pain becomes back dominant continue treatment as per Pattern 1.

No Improvement

- If patient has no improvement, refer to the Multi Disciplinary Clinic.