“Back scans rarely find the cause of back pain. Before having the scan, ask your doctor what the alternatives are for you.”

Still unsure?

When you talk to a doctor, ask:
1. Do I really need a scan?
2. What are the risks?
3. What happens if I don’t have a scan?

Professor Ian Harris, Orthopaedic Surgeon

Scan your options

— not your back
Not everyone needs a scan

This is important to know, because having a scan that you did not need can cause harm (see next page). This leaflet contains information about when you might need a back scan, and when you should try other options first.

Things to look out for

You may need a scan if you have

• a temperature or fever
• unusual changes going to the toilet
• unusual numbness around your bottom
• cancer
• recent infection or use of recreational drugs
• inability to move legs or feet

Common back pain

The following symptoms do not generally require a back scan

• spasms
• severe back pain

Why you should scan your options, not your back

On average, for every 100 people with common low back pain who have a scan:

- 68 will get false alarms*
- 11 will recover more slowly
- 1 will have surgery they didn't need

The remainder may be no worse off, but they will experience no long-term benefit from having the scan.

* A false alarm is a scan result that seems serious (e.g., 'disc bulge') but is common in healthy people without back pain. Many people get a false alarm on their scan results. This can lead to unnecessary surgery and other treatments that don't help.

Get back to better

Back pain improves on its own

Expert doctors recommend trying some of the options below to manage your pain in the short term. If you don’t have any of the ‘things to look out for’ (page 1), you don’t have to make a decision about having a back scan right now.

- Gentle movement
- Use heat eg. hot water bottle or wheat pack
- Don’t rest for too long
- Use pharmacy medication (if needed)
- Give yourself time. Many recover in 2-4 weeks