

Understanding Pain During Rehabilitation

Your clinician has prescribed a rehabilitation programme tailored to you. Pain is a signal from your brain — not simply a reading of tissue damage — and knowing how to interpret it will help you exercise with confidence and make safe progress.

1 What is Pain?

Pain is produced by your brain and nervous system as a protective signal. During recovery, the nervous system can become extra sensitive — meaning pain may feel louder than the actual threat in your tissues. Hurt and harm are not always the same thing.

Pain is an Alarm — Not a Damage Meter

Like a smoke alarm that triggers when toast burns, your pain system can fire even without serious injury. Gradual, safe movement is one of the best ways to calm nervous system sensitivity and restore normal function.

2 Finding Your Therapeutic Zone

The chart below shows how exercise intensity relates to your symptoms. The goal is to stay in the Therapeutic Zone — enough challenge for your body to adapt, but not so much that symptoms spiral.

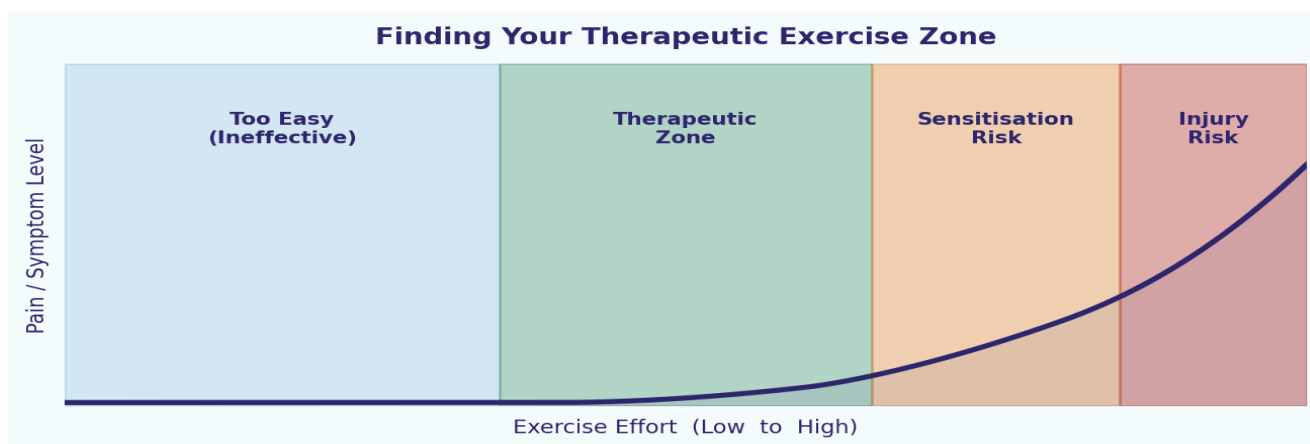


Figure 1 — Exercise intensity vs. symptom response. Aim to stay in the green zone.

Too Little / Too Much

The Right Approach

- Stopping all movement slows healing and reduces confidence.
- Pushing through high pain sensitises the nervous system further.

- Moderate challenge with steady progression is the evidence-based path.
- Your clinician's programme is designed exactly for this balance.

3 Your Symptom Response Guide

Use this guide during and after your exercises to decide how to respond to any symptoms.

- GREEN CONTINUE** Mild ache or muscle effort · settles within 24 hrs · no new symptoms
- YELLOW MODIFY** Discomfort building during exercise · lingering >24 hrs · mild limping
- RED STOP & REPORT** Sharp or intense pain · new numbness/tingling · symptoms won't settle

Figure 2 — Use this traffic-light framework to guide your response to symptoms.

Often Acceptable During Rehab	Needs More Caution
• Mild to moderate muscle effort or aching • Slight increase in usual symptoms during exercise • Symptoms settle within 24 hours • Muscle burn during sets	• Sharp or stabbing pain • Pain building through the session • New numbness, tingling, or weakness • Symptoms not settled after 24–48 hours

4 What Can Amplify Pain

Factor	How it amplifies pain
Poor sleep	Lowers pain threshold and impairs tissue repair overnight.
High stress / anxiety	Keeps the nervous system on high alert, amplifying pain signals.
Fear of movement	Avoidance prevents desensitisation and weakens supporting structures.
Sudden activity spike	Overloads tissues before adaptation — common cause of flare-ups.
Dehydration / poor nutrition	Reduces tissue resilience and delays recovery.

5 During Your Rehabilitation

Three things to keep in mind every session

- Follow your programme: Stick to prescribed sets, reps, and intensity. Expect effort, mild muscle aching, and some symptoms — these are normal.
- Monitor after exercise: If symptoms linger well past 24 hours or a new, different pain appears, reduce intensity next session and tell your clinician.
- Stop and report new numbness, tingling, loss of strength, or anything that worries you — your clinician wants to know.

6 If You Have a Flare-Up

Flare-ups are a normal part of recovery — they do not mean you caused damage. Follow this 3-step plan:

Step	Action	Guidance
1	Rest briefly	Take 1–2 days at reduced activity. Light movement is usually better than complete rest.
2	Reduce intensity	Return at a level you managed well before. This is smart progression, not failure.
3	Report if not settling	If symptoms stay elevated beyond 48 hours or feel clearly different, contact your clinician before continuing.

Key Message

A temporary increase in symptoms during rehabilitation does not automatically mean damage. Rehabilitation works best when movement is safe, gradual, and repeated often enough for your body to adapt. Trust the process, stay in communication with your clinician, and focus on steady progress.