

When Pain Becomes Persistent

Understanding and Managing Long-Term Pain in Rehab

1 What Is Persistent Pain?

Pain lasting more than three months is considered persistent (also called chronic) pain. It affects approximately 1 in 5 adults and is one of the most common reasons people seek rehabilitation. Persistent pain is not simply tissue damage that has not yet healed — in many cases the original injury has resolved, but the nervous system has become sensitised and continues to produce pain signals. Understanding this distinction is the first step toward meaningful recovery.

Persistent pain is real. It is not imagined, exaggerated, or a sign of weakness — it is your nervous system working differently. With the right approach, it can improve.

2 Central Sensitisation — Why Pain Persists

The brain and spinal cord can become sensitised over time — a process called central sensitisation. Think of it like a car alarm that has been set to trigger at the slightest touch: the alarm (pain) goes off even when there is no real threat. This explains many experiences people with persistent pain report, including pain that spreads beyond the original injury, discomfort from light touch or gentle movement, and pain that worsens with stress, poor sleep, or low mood.

Sign of central sensitisation	What it means for you
Pain spreads to other areas	Your nervous system is amplifying signals beyond the original injury site — not a sign that new damage is occurring.
Pain with gentle touch or movement	Your sensitivity threshold has lowered. This is a feature of a sensitised nervous system, not evidence of new structural damage.
Pain worse after stress or poor sleep	Cortisol levels and nervous system arousal directly affect how loud pain signals are — improving sleep and stress helps turn the volume down.

3 How Rehab Works Differently with Persistent Pain

When pain has become persistent, the goal of rehabilitation shifts. Rather than simply fixing a structural problem, the aim is to retrain the nervous system and rebuild confidence in movement. This is achieved through graded exposure — gentle, progressive activity that gradually reduces the nervous system's sensitivity and helps your brain learn that movement is safe.

Traditional rehab goal	Persistent pain rehab goal
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Fix structural problem	Retrain nervous system response
Reduce pain before moving	Move gradually to reduce pain over time
Protect the area from loading	Build tolerance through safe, graded loading

4 Strategies That Help

Managing persistent pain works best when several approaches are combined. The strategies below are evidence-informed and complement the rehabilitation programme your clinician has designed for you.

Strategy	Why it helps	How to apply it
Graded movement	Gradually desensitises the nervous system and restores confidence in movement.	Start small; increase by approximately 10% per week as tolerated.
Sleep improvement	Poor sleep directly raises pain sensitivity — better sleep turns the volume down.	Keep consistent sleep and wake times; limit screens 1 hour before bed.
Stress management	Lowers cortisol and reduces nervous system arousal that amplifies pain.	Slow breathing, relaxation techniques, and planned rest periods each day.
Pacing	Prevents the boom-bust cycle of overdoing it and then crashing.	Plan activity within your comfortable range; stop before pain stops you.

5 Key Takeaways

KEY TAKEAWAY 1

Your pain is real — and your nervous system can change. Persistent pain is not imagined and it is not a sign that your body is permanently broken. The nervous system is remarkably adaptable. With patience, consistency, and the right guidance, it is possible to retrain your pain system and regain your quality of life.

KEY TAKEAWAY 2

Movement is medicine — even when it is uncomfortable. Avoiding movement because of pain can actually make the nervous system more sensitive over time. Gentle, gradual, guided movement is one of the most powerful tools for calming persistent pain. Trust the process your clinician has designed — each small step forward is teaching your brain that moving is safe.

KEY TAKEAWAY 3

Progress is possible — focus on function, not just pain. Recovery from persistent pain is not always a straight line of decreasing pain. Measure success by what you can do — the walk you completed, the activity you returned to. Better function and greater confidence in movement often come before pain fully resolves, and both are genuine, meaningful signs of progress.