UNDERSTANDING PAIN

Why You Hurt, How Your Body Heals, and What You Can Do About It



A Practical Guide to Lasting Relief, Better Movement, and a Healthier, More Active Life

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WELCOME

Clear answers. Practical next steps.

Pain can be confusing and frustrating. You may wonder why it still hurts, whether something is seriously wrong, or how to get back to your normal activities. This guide offers a practical starting point for those conversations.

Your pain is real. Your care should make sense to you.

SEVEN THINGS EVERY PATIENT SHOULD KNOW

- Pain is not always a direct measure of damage.
- Your nervous system can become more protective.
- Imaging needs the context of your symptoms and examination.
- Appropriate movement is usually part of recovery.
- Progress includes function, sleep, and confidence.
- A useful recovery plan fits your individual needs.
- Some symptoms need prompt or emergency care.

Read a section at a time, then use the worksheet on page 11 with your clinician. This 12-page companion is a concise introduction to the longer book shown on the cover.

01 / UNDERSTAND THE SIGNAL

Pain is real. It is not always a damage meter.

Pain is more complex than a simple injury alarm. It can occur when tissues are irritated, while they are healing, or when the nervous system has become unusually protective. An ongoing tissue problem can also cause pain and may need evaluation.

WHY PAIN CAN PERSIST OR FLARE

- Sensitivity after an injury or a period of pain.
- Inflammation or other changes that lower the pain threshold.
- Changes in activity, strength, sleep, or stress.
- Previous experiences and worry about what symptoms mean.

Pain deserves attention, but its intensity alone cannot tell you how much tissue damage is present.

A PRACTICAL EXAMPLE

A sore back after an unfamiliar activity may reflect irritation or a change in load. It does not, by itself, prove a new disc injury. The pattern of symptoms and the examination help determine what comes next.

ASK AT YOUR VISIT

“What findings help explain my pain, and what would make you investigate further?”

02 / THE PROTECTIVE SYSTEM

Your nervous system is an alarm system.

Your brain and nerves interpret information from your body and surroundings. Pain is one way this system can respond when protection seems necessary. After an injury, the alarm may become more sensitive, sometimes longer than expected.

FACTORS THAT MAY INCREASE SENSITIVITY

- Poor sleep or fatigue.
- Stress, fear, and worry about pain.
- Repeated flare-ups or reduced activity.
- Ongoing inflammation, irritation, or other health conditions.

A sensitive alarm does not make pain imaginary. It can mean that the protection system is responding at a higher setting.

THE GOAL IS TO REBUILD CONFIDENCE

Understanding symptoms, addressing relevant health problems, and gradually returning to appropriate activity can be parts of a broader care plan. There is no single switch that turns every person’s pain off.

ONE USEFUL QUESTION

“What is safe for me to do while I recover?”

03 / PUTTING SCANS IN CONTEXT

A scan is one piece of the puzzle.

X-rays, MRI, CT, and diagnostic ultrasound answer different questions. When appropriate, imaging can help identify fractures, some tendon injuries, nerve compression, and other structural problems.

THE REPORT NEEDS A CLINICAL INTERPRETATION

• Age-related changes can appear in people with little or no pain.

• Words such as “bulge,” “arthritis,” or “degeneration” do not automatically identify the source of symptoms.

• The location and type of a finding matter.

• History, examination, strength, sensation, and function help establish whether a finding is relevant.

Imaging should inform clinical reasoning, together with the person’s symptoms and examination.

QUESTIONS WORTH ASKING

“Does this finding match my symptoms?”
“Will imaging change my treatment?”
“What can this test tell us, and what can it not tell us?”

Two people with similar scans can have different symptoms and care needs. A normal scan also does not mean that pain is unreal.

04 / BUILDING CAPACITY

Movement is usually part of recovery.

Some injuries need a period of protection. For many common musculoskeletal problems, however, prolonged inactivity can contribute to stiffness, weakness, and reduced tolerance for normal activity.

BUILD BACK GRADUALLY

- Choose a starting activity you can reasonably tolerate.
- Adjust the amount, intensity, or range of movement to your condition.
- Progress walking, strength, mobility, or other activities in manageable steps.
- Judge the overall trend rather than one good or bad day.

The right dose of movement is individual. You do not always have to be completely pain-free before you move.

ILLUSTRATIVE EXAMPLE, NOT A PRESCRIPTION

If a long walk causes a significant flare, several shorter walks may be a more manageable starting point. Your clinician can help choose an appropriate amount and decide when to progress.

Stop and seek advice for new weakness, increasing numbness, or rapidly worsening symptoms. Follow specific restrictions after surgery, fracture, or other serious injury.

05 / MEANINGFUL PROGRESS

Recovery takes time. Progress can be measured.

There is no single timetable for every painful condition. Pain relief, tissue healing, strength, endurance, and confidence can improve at different rates. Early relief does not always mean that full activity tolerance has returned.

LOOK BEYOND THE PAIN SCORE

- Better sleep or fewer pain-related interruptions.
- More comfortable movement.
- Improving strength, mobility, or endurance.
- Fewer or shorter flare-ups.
- Returning to work, hobbies, or household tasks.
- Needing less help or treatment to manage symptoms.

A flare-up does not automatically mean you are back at the beginning. New or changing symptoms still deserve attention.

CHOOSE ONE EVERYDAY MEASURE

Track a task that matters to you, such as walking comfortably, sitting through a meal, or turning your head while driving. Compare your ability over time with your clinician.

06 / A PLAN WITH A PURPOSE

Your recovery plan should fit you.

There is no single treatment that works for everyone. A useful plan connects care to a clear goal and changes when your progress or examination indicates that it should.

A CLEAR PLAN ANSWERS THESE QUESTIONS

- What am I trying to get back to?
- What can I safely do now?
- What is my next small progression?
- How will we measure improvement?
- When will the plan be reassessed?
- What changes would require additional evaluation?

Treatment should help restore function, confidence, and independence.

Depending on the condition, care may include education, rehabilitation, activity modification, hands-on care, or other treatments. Medication or specialist referral may be appropriate through the relevant healthcare professional.

Ask about expected benefits, limitations, alternatives, and costs. If care is not helping you move toward a meaningful goal, the plan deserves another look.

07 / KNOW WHEN TO SEEK HELP

Some symptoms need urgent attention.

Most musculoskeletal pain is not an emergency. Certain changes need medical assessment rather than routine self-care.

GET EMERGENCY CARE NOW

- New difficulty passing urine, loss of bladder or bowel control, or numbness around the groin, genitals, or buttocks with back or leg symptoms.
- Sudden or rapidly progressive weakness, major loss of coordination, or other serious neurological change.
- Chest pain, severe shortness of breath, fainting, or signs of stroke.
- Serious trauma with possible major injury.

Call 911 for a suspected life-threatening emergency. Do not wait for a routine clinic appointment.

SEEK PROMPT MEDICAL ASSESSMENT

- Pain with fever, feeling seriously unwell, or possible infection.
- Severe or rapidly worsening symptoms.
- Unexplained weight loss, cancer history, or symptoms that are unusual for you.

These examples are not a complete checklist. If you are uncertain about a concerning new symptom, seek timely medical advice. Red flags do not establish a diagnosis by themselves.

PUT IT INTO PRACTICE

Small steps for your everyday recovery.

1 / CHOOSE A MEANINGFUL GOAL

Pick something specific you want to do more comfortably: play with your children, walk the neighborhood, return to exercise, or complete a work task.

2 / FIND A MANAGEABLE STARTING POINT

Work with your clinician to choose appropriate activities. Break demanding tasks into shorter periods when needed, and avoid doing everything on a good day if that leads to a prolonged flare.

3 / SUPPORT THE BASICS

Keep a consistent sleep routine where possible. Notice how stress, workload, and rest affect your symptoms. Discuss persistent sleep difficulties or other health concerns with your healthcare professional.

4 / REVIEW THE TREND

Record a few useful observations rather than constantly checking pain. Note what you can do, how symptoms settle after activity, and whether daily function is improving.

Bring questions to your visits. Understanding the plan is part of participating in your care.

If you are not improving, or the symptom pattern changes, ask for reassessment. A plan should evolve with your needs.

YOUR RECOVERY WORKSHEET

Make the next steps specific.

Complete this page with your clinician. Leave any item blank until you have an appropriate recommendation.

THE ACTIVITY I MOST WANT TO RETURN TO:

MY STARTING ABILITY OR LIMITATION:

ACTIVITIES OR EXERCISES AGREED WITH MY CLINICIAN:

MY NEXT MANAGEABLE PROGRESSION:

HOW I WILL MEASURE PROGRESS:

WHEN WE WILL REVIEW THE PLAN:

SYMPTOMS THAT MEAN I SHOULD SEEK HELP:

QUESTIONS I WANT TO ASK:

Date: _____ Review date: _____

ABOUT YOUR AUTHOR

Meet Dr. Adam Roussel

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QUESTIONS ABOUT YOUR CARE?

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FURTHER READING

This companion introduces the themes of *Understanding Pain: Why You Hurt, How Your Body Heals, and What You Can Do About It*. It is a shorter educational guide, rather than the complete book.

Educational resources
NINDS: Pain | NHS: Back pain

Brinjikji et al. Imaging findings of spinal degeneration in asymptomatic populations. *AJNR*, 2015;36:811-816. DOI: 10.3174/ajnr.A4173.

Educational use only. This guide does not replace individualized medical evaluation, diagnosis, or treatment. Outcomes and recovery times vary. Cover artwork is illustrative.
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