

Book Review of:

Tell Me Where It Hurts: The New Science of Pain and How to Heal

by Dr. Rachel Zoffness

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Dr. Rachel Zoffness is a global pain expert and psychologist who brings extensive expertise to her forthcoming book, ‘Tell Me Where It Hurts: The New Science of Pain and How to Heal’. This book is a timely and valuable read for individuals living with chronic pain, in addition to clinicians, families and others in a supportive role. In the book, Zoffness offers a powerful reframing of chronic pain—one that challenges outdated biomedical narratives and replaces them with a holistic, hopeful, and evidence-based approach. This book helps readers understand that chronic pain is not merely something to be endured or ‘managed’, but something that can be treated and in some cases healed. Such changes are possible when we consider the whole person: brain and body, physical and emotional, individual and social.

One of the book’s most important contributions is its clear and engaging insight into the nature of chronic pain. Indeed, pain education is a major component of helping individuals to effectively manage pain, yet most clinicians fail to receive dedicated compulsory education in this area (Shipton et al., 2018). Zoffness addresses this educational gap directly, offering readers – both individuals living with chronic pain and clinicians alike - a comprehensive and engaging overview of how pain actually works - one that is heavily grounded in contemporary research and neuroscience. The overarching theme of the book is the biopsychosocial (BPS) model of pain, which recognizes pain as a multifactorial experience shaped by biological,

psychological, and social influences. Whilst this model is not new (it is supported by decades of research), what feels distinct is how Zoffness unpacks the model in a clear and engaging way, suitable for a wide-ranging audience. This feels especially pertinent given that the BPS model is under-implemented, with many clinical services still operating from a biomedical approach of pills and procedures.

The clinical and societal narrative around chronic pain can often feel confusing, dismissive, and hopeless. A recent large-scale survey of 165 international pain clinicians reported that the following messages are all too common for patients to receive during clinical encounters: it’s ‘all in your head’, pain has ‘an elusive fix’, and you are at ‘the end of the line’ (Jordan et al., 2025). Against this backdrop, Zoffness makes the clear and corrective assertion that pain is ‘eminently understandable – and also treatable’. She presents this message with a strong presence and a fierce compassion: ‘join me’, ‘I am going to help you’. Her message and her writing style feel particularly powerful in a field where hopelessness and invalidation can be all too common.

This 336-page book consists of 14 chapters separated across three parts. An overview of each part is detailed below.

Part 1: Pain Isn't What You Think It Is

In part 1, Zoffness explains what the biomedical model of pain overlooks and introduces the BPS model. From the start, she dismantles common myths about pain, beginning with the assumption that pain is a direct indicator of tissue damage. To illustrate this, she draws on the example of elite athlete Usain Bolt (dubbed the 'fastest man alive'), who, despite having scoliosis and significant leg-length discrepancy, experiences no significant pain or functional impairment.

Key concepts are introduced, such as neuroplasticity and central sensitization. Zoffness explains how, in chronic pain, the nervous system can become hypersensitive, with the brain and spinal cord producing and amplifying danger signals long after tissues have healed. She highlights how chronic pain often has less to do with the place that hurts and more to do with a nervous system stuck in overdrive, dominated by sympathetic arousal. The concept of neuroplasticity is presented as a source of hope: if the brain can change in ways that sustain pain, it can also change in ways that reduce it.

This part of the book ends with the concept of a 'Pain Recipe'. Here, Zoffness uses a visual 'menu' that maps onto the BPS model to identify wide-ranging ingredients contributing to pain, from inflammation and sleep deprivation, to stress, unhelpful beliefs, challenging relationships, and negative past experiences. While some ingredients may be unchangeable, many can be changed, providing the reader with a level of agency over their experience of pain.

Part 2: The Pillars of Pain

The second part explores the pillars of pain beyond biological factors, touching on emotional, cognitive, social, and environmental influences on pain.

As part of this, the 'Pain Cycle' is described, outlining how many of these factors - including our thoughts, emotions, physical sensations, and behaviors - are inextricably linked in the experience and maintenance of pain. Crucially, Zoffness avoids oversimplification; while the chapters on emotional cognition explore how stress, anxiety, attention, and

beliefs can turn the 'pain dial' up or down, these discussions are always contextualized within a broader multidimensional framework, preventing any implication that chronic pain is 'all psychological'.

The chapters on social and environmental factors are particularly compelling. Whilst the social domain of health remains among the most neglected in medicine, an entire chapter is dedicated to 'social medicine', and the chapter on environmental factors covers a range of topics, including culture, race, sex, and gender. Recognizing these topics shows that although people can influence many factors linked to pain, any approach to reducing pain must also consider each person's broader life context, including their social and environmental circumstances.

Notably, this part of the book also delicately touches on trauma. While chronic pain and trauma co-occur at high rates (Otis et al., 2003; Egloff et al., 2013), Zoffness carefully resists the growing tendency in society (particularly on social media) to universalize trauma as the root cause of chronic illness. Whilst raising awareness of trauma's association with chronic pain, this section curbs any misunderstanding by clearly stating that not everyone who experiences trauma will develop chronic pain, and not everyone with chronic pain has experienced trauma.

Part 3: The Pain Protocol

In the final part, Zoffness translates the principles of the preceding chapters into actionable guidelines that enable readers to design their own treatment protocol. She also provides tips for clinicians on how to offer more integrated care and how to enhance communication in clinical practice.

Topics such as sleep, medication, and nutrition are addressed alongside mindfulness, movement, and cognitive reframing. Movement, in particular, is handled with care, providing a clear explanation of established concepts such as fear-avoidance and pacing, as well as creative suggestions like reframing 'exercise' as 'joyful movement' to help the nervous

system shift out of overdrive and relearn safety rather than threat.

Examples around how to apply different strategies are wide-ranging and inclusive, making no assumption about an individual's current level of functioning. Tips are also provided on how to find further resources; however, some of these are specific to an American readership.

Ultimately, 'Tell Me Where It Hurts' combines cutting-edge pain science with compassionate clinical insight, positioning it as a standout

contribution to the field of pain management. This book serves an important function in supporting the shift from fragmented, biomedical approaches to integrated, biopsychosocial care.

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References

Egloff N, Hirschi A, von Känel R. Traumatization and chronic pain: a further model of interaction. *J Pain Res*. 2013; 2013(6), 765-770.

<https://doi.org/10.2147/jpr.s52264>

Jordan A, Brook-Rowland P, Noel M, Gauntlett-Gilbert J. Harmful words: A qualitative survey of pain clinicians' perspectives on unhelpful messages in chronic pain. *J Pain*. 2025; 35, 105524.

<https://doi.org/10.1016/j.jpain.2025.105524>

Otis JD, Keane TM, Kerns RD. An examination of the relationship between chronic pain and post-traumatic stress disorder. *J Rehabil Res Dev*. 2003; 40(5), 397-405. doi: 10.1682/jrrd.2003.09.0397

Shipton EE, Bate F, Garrick R, Steketee C, Shipton EA, Visser EJ. Systematic review of pain medicine content, teaching, and assessment in medical school curricula internationally. *Pain Ther*. 2018; 7(2), 139-161.

<https://doi.org/10.1007/s40122-018-0103-z>