
COURSE RESOURCE

TRAINING AROUND SIDE EFFECTS (CLIENT GUIDE)

Client handout | Working With GLP-1 Clients — how to adjust your training on tough days and when to stop and call your doctor

Some days on your medication you'll feel great and train hard. Other days nausea, low energy, or a queasy stomach will show up — often in the day or two after a dose, or when your dose changes. That's normal, and it doesn't mean you're failing. This guide shows you how to keep your training habit alive on tough days by scaling the session down instead of skipping it, plus the clear signals that mean stop and get medical help.

SCOPE OF PRACTICE

Your coach guides your training, general eating habits, and progress tracking. Your coach does not diagnose medical problems, prescribe, or change your medication — only your prescriber does that. If something in this guide overlaps with how you're feeling on your medication, bring it to your doctor or pharmacist. When in doubt, we recognise, document, and refer.

THE ONE RULE FOR TOUGH DAYS

Show up and shrink the session rather than cancel it. A 10-minute walk or one easy set keeps the habit and the identity of 'someone who trains' intact — that consistency matters far more over months than any single hard workout. Doing something small almost always beats doing nothing.

WHY IT MATTERS

The clients who succeed long-term aren't the ones who never have bad days — they're the ones who don't let a bad day become a bad week. A shortened session protects the streak.

QUICK SYMPTOM GUIDE

Find how you feel today, then use the matching adjustment. These are training tweaks, not medical advice — if a symptom is severe or new, see the Stop List near the bottom.

If you feel...	Do this today	Skip / avoid
Nauseous or queasy	Keep it upright and easy: walking, light machine work, mobility. Train before a meal, not right after.	Lying-flat moves, ab crunches, bending over, high-intensity intervals
Low energy / flat	Cut the volume — do about half your normal sets, longer rests, lighter loads. Focus on just showing up.	Chasing personal records or pushing to failure
Lightheaded / dizzy	Stop the current move, sit down, sip water. Only continue with seated or supported exercises if it passes.	Standing overhead lifts, fast position changes, anything where a stumble is dangerous
Dehydrated / dry mouth	Sip water before and during. Choose short, low-sweat work and cut the session shorter.	Long or hot sessions, heavy sweating, saunas after

THE 15-MINUTE MINIMUM SESSION

When you don't have a full workout in you, run this instead. It keeps you moving without taxing your stomach or energy.

- Warm-up: 5 minutes of easy walking or gentle cycling — just enough to feel a little warmer.
- Main: pick 2 movements (for example, sit-to-stand from a chair and a wall push-up). Do 2 sets of 8–10 easy reps each, stopping well short of struggle.
- Finish: 3–5 minutes of slow breathing and light stretching for whatever feels tight.
- Rule of thumb: on tough days aim for an effort of about 4–5 out of 10 (you can hold a conversation the whole time). Save the hard days for when you feel good.

EATING AND HYDRATION AROUND TRAINING

These are general habit tips, not a meal plan. Your prescriber or dietitian owns your nutrition targets.

- Time it to your gut: many people feel best training when their stomach is fairly empty, or a couple of hours after eating. Notice your own pattern and plan around it.
- Sip, don't gulp: small, frequent sips of water before and during the session sit better than a large drink all at once.
- Keep protein a priority on the days you can eat well, so you're supporting your muscle when you do train.

- If a bland, easy-to-digest snack settles your stomach beforehand, that's fine — go with what your body tolerates.

TRACK IT SO WE CAN ADJUST

A few seconds of notes after each session helps your coach spot patterns and adjust your program — and gives you something concrete to show your doctor if symptoms persist. Fill in:

- Date and how many days since your last dose.
- Energy today (1–10) and any symptoms (nausea, dizzy, low energy, none).
- What you actually did (full session / shortened / walk only / rest).
- How you felt afterward — better, same, or worse.

KEY SIGNAL

If you notice the same rough day landing at the same point in your dosing cycle, tell both your coach (so we schedule easier sessions there) and your prescriber (so they know how you're responding). That's the recognise-and-document habit working for you.

STOP AND SEEK MEDICAL HELP

Scaling down is for ordinary off-days. The following are not training problems — stop exercising and contact a medical professional. If anything feels severe or frightening, treat it as urgent and call emergency services.

- Chest pain, pressure, or tightness; a racing or irregular heartbeat.
- Fainting, or dizziness that doesn't clear when you sit and rest.
- Severe or persistent belly pain — especially high in the abdomen or pain that spreads to your back — that won't ease off.
- Repeated vomiting, or signs of significant dehydration (very dark urine, not passing urine, confusion).
- Shortness of breath out of proportion to the effort, or a cold sweat with feeling unwell.
- Any new, severe, or unusual symptom you can't explain.

SCOPE OF PRACTICE

Your coach can help you recognise these signals and will always tell you to stop and get checked — but we cannot assess or treat them. When it comes to medical symptoms, the

safe move is always to refer you on. There's no penalty for taking a rest day; your program will be here when you're ready.

EVIDENCE NOTE

The training adjustments here reflect general, widely accepted exercise-safety and habit-building principles adapted for common medication side effects. This is a client-friendly summary; the course team will attach verified clinical references in the full toolkit. It is not medical advice and does not replace guidance from your prescriber.