

## **National Aquatic Physiotherapy Group**

# AQUATIC PHYSIOTHERAPY EVIDENCE-BASED GUIDE

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This Guide is an excerpt from the *Aquatic Physiotherapy Evidence-Based Practice Guide* and differs in its purpose to provide clinicians with a listing of the evidence for aquatic physiotherapy practice and indications to the outcomes researchers have measured in the evidence. Clinicians should refer to the *Practice Guide* for more detailed descriptions of the evidence and the aquatic physiotherapy interventions represented in the body of evidence.



## **ABSTRACT**

In response to increasing physiotherapist and consumer demand, the Management Committee of the Aquatic Physiotherapy Group sought funding from the Australian Physiotherapy Association Special Purpose Fund in 2007 to develop the APEBPG. A substantial systematic review was undertaken using the phrases "aquatic physiotherapy", "hydrotherapy", "aquatic therapy" and "water exercise" over electronic databases including CINAHL, MEDLINE, EMBASE, PEDro, AMED, Ageline, Sports Discuss and The Cochrane Library. A personal bibliographic database was created to store and manage the 154 research papers retrieved that met the inclusion criteria of recency of publication (from 1997 to 2007), publication in English, availability in full-text-format, and not balneotherapy, whirl pool, passive immersion or spa. Evidence was catalogued into clinically useful areas of practice; musculoskeletal, neurological, paediatric, women's health, cardiorespiratory and sports physiotherapy practice. Data extracted pertained particularly to answer three questions; (1) what evidence - relating to research-design and level of evidence, (2) what intervention - with particular emphasis on reporting in detail the aquatic therapies and exercise programs in order to guide clinicians in replicable practice, and (3) what effect – reporting on outcome domains including effect on function, ambulation, strength, range of movement, flexibility, pain, balance, well-being, depression, quality of life, health status, activity and participation, athletic performance, body composition, cardiac and respiratory function, fitness, spasticity, medication use and costeffectiveness. Evidence was documented to support aquatic physiotherapy in the management of osteoarthritis, rheumatoid arthritis, joint arthroplasty, fibromyalgia, ankylosing spondylitis, back pain, upper- and lower- limb disorders, stroke, acquired brain injury, spinal cord injury, multiple sclerosis, Guillain Barré syndrome, post-polio syndrome, adult cerebral palsy, juvenile rheumatoid arthritis, muscular dystrophy, spinal muscular atrophy, cerebral palsy, autism, Rett syndrome, maternal peri-natal health, post-menopausal health, osteopenia, obesity, lymphodema, chronic obstructive pulmonary disease, heart failure, and sports-specific rehabilitation.



**Table 1. Evidence and Outcomes** 

Diagnostic Group or Subject Heading	Papers	Levels of Evidence	Subjects	Outcome Domains
Musculoskeletal Aquatic Physiothera	ару			
Osteoarthritis 14,42,65,92,160,185,210	11	II, III-1, V	1196	func, amb, strgth, pain, ROM, QoL, wellB, Hlth, depr, Actv
Rheumatoid Arthritis 20, 60, 175	5	II, V	216	func, amb, Strgth, pain, ROM, HQoL, Hlth, Dis Act
Osteo- & Rheumatoid Arthritis	4	II, III-3	297	strgth, flex, ROM, bal, compliance
Arthroplasty 81	9	I, II, III-3, IV	176	func, amb, strgth, pain, ROM
Ankylosing Spondylitis 49	3	I, II	120	func, pain, QoL, WellB, dis act
Fibromyalgia <sub>7, 87,103,137,204</sub>	9	I, II, III-3	236	func, amb, strgth, pain, QoL, WellB, Health, depr, fit
Back Pain <sub>144, 176, 182</sub>	14	I, II, III-3, IV, V	252	func, amb, strgth, Pain, med, RTW
Lower Limb Conditions	4	III-1, III-3, IV	106	amb, strgth, ROM, bal
Upper Limb Conditions	10	III-2, III-3, IV, V	7	func, strgth, ROM
Aquatic Physiotherapy in Neurology Stroke 36	3	II, IV	18	func, <b>amb, strgth, fit</b> , UL movt
Spinal Cord Injury	4	III-2, IV	48	func, amb, strgth, resp Fx, spast
Acquired Brain Injury &	7	III Z, IV	40	rano, amb, sugui, resp i x, spast
Intellectual Disability <sub>55</sub>	3	II, III-3, IV	20	strgth, ROM, fit, wellB, body comp
Adult Cerebral Palsy	4	III-3, IV	57	func, amb, strgth, ROM, self perception
Multiple Sclerosis	2	III-3, IV	20	func, strgth, QoL, fatigue
Guillain Barré Syndrome	1	V	1	
Post-Polio Syndrome	2	III-1, V	28	pain, fit



Diagnostic Group or Subject Heading	Papers	Levels of Evidence	Subjects	Outcome Domains
Pediatric Aquatic Physiotherapy Cerebral Palsy	4	III-1, IV, V	68	resp Fx, wat skill, Soc comp, soc acc
Chronic Regional Pain Syndrome	1	IV	103	func, pain
Juvenile Idiopathic Arthritis 59	2	II, III-3	88	func, strgth, fit, dis act, ptt sat
Rett Syndrome	3	IV, V	1	amb, bal, anx, UL movt
Autism	1	V	0	strgth, bal, soc comp
Spinal Muscular Atrophy	3	IV	1	maintained weight
Aquatic Physiotherapy in Women's Pregnancy-related Wellbeing <sub>166</sub>		I, II, IV, V	208	stress, <b>mood</b> , discf, body img
Pregnancy-related Back Pain <sub>116</sub>	<sub>5</sub> 2	I, II	258	pain, absnt
Post-menopausal Wellbeing	3	II, IV	88	bal, QoL, strgth, amb, flex, body comp
Labor-related Pain <sub>17</sub>	3	I, II, V	18	pain, anx, med
Osteoporosis 8, 9	3	II, IV	180	flex, co-ord, agility, strgth, endur, bone hrm, bone US
Breast cancer related lymphodema	1	IV	3	limb volume, strgth, endur, wellB
Obesity 70, 152	2	II	82	body wt, body fat, fit, flex, strgth, HQoL
Cardiorespiratory Aquatic Physiothe Chronic Obstructive Pulmonary Disease 157	rapy 6	I, III-1, III-2, I	II-3109	amb, fit, activity, <b>HQoL</b> , <b>resp Fx</b> , card Fx
Heart Failure 38, 206	7	II, III-3, V	138	resp Fx, card Fx, body comp, blood lipids, QoL, amb, strgth



Diagnostic Group or Subject Heading	Papers	Levels of Evidence	Subjects	Outcome Domains
Aquatic Physiotherapy in Sports and Deep Water Running 51	d Training 12	I, II, III-3, IV, V	155	fit, athl perf
Plyometric Training 141, 148, 174	4	II, V	81	fit, athl perf, strgth, exs-induced pain
Sport-specific Training and Rehabilitation 141	4	II, V	23	athl perf, balance
Total	151		3227	



#### **Reference Numbers**

Randomised controlled trials supporting the efficacy of aquatic therapy in each diagnostic group are indicated by subscripted reference numbers and link to the reference list below.

#### **Key to Outcome Domains**

Outcome Domains in **bold type** indicate those supported by Level II evidence.

(Absnt) Absenteeism, (Actv) Activity, (Aglty) Agility, (Amb) Ambulation, (Anx) Anxiety, (Athl Perf) Athletic Performance, (Bal) Balance, (Body Comp) Body Composition, (Body Img) Body Image, (body wt) Body weight, (Body Fat) Body Fat, (Bone Hrm) Bone Hormones, (Bone US) Bone Ultrasound, (Card Fx) Cardiac Function, (Co-ord) Co-ordination, (Cost) Cost Effectiveness, (Depr) Depression, (Dis Act) Disease Activity, (Discf) Discomfort, (Endr) Endurance, (Fit) Fitness, (Flex) flexibility, (Func) Function, (Hlth) Health, (HQoL) Health Related Quality of Life, (Med) Medication Use, (Mood) Mood, (Pain) Pain, (Ptt Sat) patient satisfaction, (QoL) Quality of Life, (Resp Fx) Respiratory Function, (ROM) Range of Movement, (Soc Acc) Social Acceptance, (Soc Comp) Social Competence, (Spast) Spasticity, (Stress) Stress, (Strgth) Strength, (UL movt) Upper limb movement, (Wtr Skill) Water Skills, (WellB) Well Being.

#### **Key to Levels of Evidence**

- I Evidence obtained from a systematic review of all relevant randomized controlled trials
- II Evidence obtained from at least one properly designed randomized controlled trial
- III-1 Evidence obtained from well-designed pseudo randomized controlled trials (alternate allocation or some other method)
- III-2 Evidence obtained from comparative studies (including systematic reviews of such studies) with concurrent controls and allocation not randomized (cohort studies), case control studies, or interrupted time series with a control group
- III-3 Evidence obtained from comparative studies with historical control, two or more single arm studies, or interrupted time series without parallel control group
- IV Evidence obtained from a case series, either post-test or pre-test and post-test
- V Evidence obtained from clinical peers, as referenced literature reviews, or as clinical opinion

Adapted from: National Health and Medical Research Council of Australia (1999). A Guide to the Development, Implementation and Evaluation of Clinical Practice Guidelines. NHMRC: Canberra

### **Subject Tally**

The subjects tally excludes those cited in systematic reviews. Subject numbers from clinical trials include both intervention and control groups.



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