Musculoskeletal Research Facilitation Group (CAT Group) Critically appraised topic and clinical bottom line October 2017

Specific Question:

Do patients with long term Musculoskeletal or rheumatology conditions that attend regular hydrotherapy sessions utilise NHS services less (e.g clinical review with GP/Consultants/Allied Health Professionals) compared to those who do not attend regular hydrotherapy?

Clinical bottom line

The search revealed no evidence to answer this question. Further research is required.

Why is this important?

Often patients with long term conditions are unable to complete land based exercises due to pain. An alternate way of exercising is in a hydrotherapy pool. Patients can perform cardiovascular, muscle strengthening and flexibility exercises in the pool. Benefits of exercising in a pool include increased flexibility, increased muscle strength, improved function and reduced pain. Treatments for long term conditions include exercise as part of their self-management strategies. However access to hydrotherapy pools is limited. The current policy at a local hospital allows patients to access the hydrotherapy pool however if patients require on-going sessions they have to attend outside exercise groups.

<u>Search timeframe</u> 2007-2017 <u>Inclusion criteria</u>

	Description	Search terms
Population and Setting	Adult and children Patients with long term MSK conditions Osteoarthritis. Rheumatoid Arthritis Ankylosing Spondylitis Juvenile Rheumatoid Arthritis Juvenile Idiopathic Arthritis (JIA) Group Attendance Chronic Back Pain Registered charities Self-help support groups. Self Care	Patients (adult and children) who are regular users of hydrotherapy with long term conditions including: Musculoskeletal Ankylosing Spondylitis (AS) Osteoarthritis (OA) Rheumatoid Arthritis (RA) Juvenile Rheumatoid Arthritis Juvenile Idiopathic Arthritis (JIA) Chronic Back Pain Self Help Groups Support Groups Self Care NASS Group

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Intervention or Exposure (ie what is being tested)	Hydrotherapy Regular Hydrotherapy Long Term hydrotherapy Any water based therapy	Registered Charities Clubs Societies Self funded Private funded Hydrotherapy Hydrotherapy Methods Aquatic Therapy Aquatic Exercise(s) Aquatic Physiotherapy Water Therapeutics Aquasize Brine Baths Thalassotherapy (sea water) Any form of water based
Comparison, if any	No hydrotherapy Land based exercise	No Hydrotherapy Land based therapy Physiotherapy Complementary/Alternative Therapy Electrotherapy Home Exercises
Outcomes of interest Types of studies	EuroQol 5D (EQ5D) Quality adjusted life years (QALY) Clinical visits Health care utilisation Reduced pain Cost effectiveness Physical function	Quality of Life Health Care Utilisation Quality Adjusted Life Years (QALY) Health Year Equivalent (HYE) Disability Adjusted Life Years EuroQol 5D (EQ5D) Short Form-36 Health Survey (SF-36) SF-6 Health Care Resource Reduced Clinical Visits Cost Utility Analysis Health Consultation Reduced Medication Use Health Care Costs Economic Outcomes Cost Benefit Analysis Cost Effective Clinical Effectiveness Cost Savings Disability Outcomes

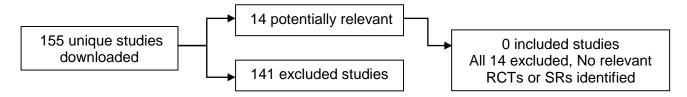
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Date of search February 2017

Routine Databases Searched

Cochrane Systematic Reviews, DARE/HTA/NHSEED, Medline, CINAHL, Embase, AMED, PsychInfo, NHS Evidence, PubMed, Duets UK, HMIC, Health Business Elite, British Nursing Index, Trip Database

Results



Summary

This CAT did not find any published RCTs or Systematic Reviews to answer this question

Implications for Practice/research

Future research is needed to see if patients with long term MSK or rheumatology conditions that attend regular hydrotherapy sessions outside of clinical care, for example as a member of a support or charity group, utilise NHS services less compared to those who do not attend hydrotherapy regularly.

What would you tweet? (140 characters)

Do regular hydrotherapy users utilise NHS services less? No evidence was found and future research is needed.

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